THE LANCET.

OL. I.] LONDON, SATURDAY, SEPTEMBER 26, 1835.

T1835-36.

PREFACE

TO THE VOLUMES OF THE LANCET FOR 1835-36.

THE act of writing a PREFACE to a book, so often resembles the ceremonial of a first introduction to a new company, that it is generally executed with some degree of awkwardness, and, very frequently, under the pressure of embarrassed feelings. In our own case the plea of novelty, or of a first appearance, cannot be urged in extenuation of an imperfect discharge of our duty. But prefatory introductions to new works are generally compounded of the reasons which have induced the author to publish. and of promises relative to the materials which he will furnish for the amusement or the gratification of his readers. After twelve years of anxious and successful labour in the field of medical reform, it is unnecessary to reintroduce the reasons which first prompted the writer to publish THE LANCET; and, from circumstances and motives equally obvious and conclusive, we will not derogate from the character and influence of this journal, by inviting, through the instrumentality of pledges and promises, a more general attention to the subjects which are usually introduced into its columns. The occurrences of by-gone years must be taken, in both instances, as the best and surest guarantees of what the events of future years will produce. If, after the obstacles which we have successfully encountered and overcome; if, after the monopolies which we have demolished, and the monopolists whom we have made quail; it could be necessary to offer one word in proof of our sincerity and devotedness to the cause which we have so long advocated, why then, indeed, the prospect before us would exhibit a dreary void, unenlivened, unchecred, by a single feeling of inspiring hope. The pioneer in works of reform, labours but with a sorrowing mind when he is not urged onwards by the stimulating confidence of those persons who observe, and who are capable of understanding, the tendency of his actions. When, therefore, the success of THE LANCET, and the wide diffusion of the principles which that journal has advocated in promoting the cause of medical reform, are taken into consideration, it must be recollected that aeither of those results would be observable at the present period, had not the great members of the medical profession contributed, by their powerful supwirds making that journal the great instrument of their liberation aldom of the universities, hospitals, and other chartered medical then, all medical reformers stand on an inviting, an enviable, a position. Although they were perplexed, transmelled, and obstructed

at every step in the permanenement of their career, the onward interested of events in twelve brief years has terrified the conceited and titled drones attached to our colleges and hospitals into an acknowledgment of their guits and impotence, and has converted many of them from being the most instent of tyrants into the most submissive of hypocrites. It is not in one or two medical establishments only that the changes which have been effected are perceptible. The entire body is convulsed, and in several of the extremities of the hideous monster, monorour, the agonizing throes which precede dissilution, are at once both seen and felt. We are not advancing towards the goal of improvement by tardy lingering steps, but by a salient movement; and the strength which is daily acquired as the labour advances, gives an assurance, which cannot be shaken by any temporary disaster or check, of an unqualified and permanent success.

What, then, is the ultimate object of the national work in which medical reformers are engaged? Nothing less than the conservation of the public health. To this great end it is sought to bring the whole power and force of the principles of the science of medicine into active operation. Hence it is in the contemplation of what medicine might achieve, that we witness, at every step, in our charitable and public institutions, the barriers and drawbacks which have hitherto defrauded the public out of those manifold advantages which it is in the power of the learned and experienced members of the profession to confer. At present the whole system of medical government is sustained on the odious principles of self-election and monopoly. It is a compound of nepotism, knavery, and extortion. The highest posts of honour are occupied for the most part by imbeciles; and men endowed with the highest attainments which can ornament the human mind,—who may have endeavoured to obtain rank in our public institutions, through the instrumentality of merit,—unaided by the influence of wealth and family commexions, would engage in a toil which could have no other result than that of bitter disappointment.

As illustrative of the exclusive character of the proceedings in our hospital and other public medical institutions, we cannot call to mind, at this moment, a single instance in which a medical student in this metropolis,—out of all the hundreds and thousands who have attended our schools since this journal was first published,—on whom has been conferred a post of honour and emolument as a just reward for his industry and attainments. This is a frightful fact. It is puerility itself to employ argument in denouncing auch a system. In what other quarter do we find its parallel? In what other profession? Certainly not in the Church. Obviously not in the Law, for, in both, men of industry and great mental powers are sure of obtaining preferment. In medicine the highest collegiate title is that of the doctorate; yet it has been, and is now, obtainable by a display of telent—it is almost a profanation to use the term in this place—which would excite even the derision of the drag-dealers in Rhubarb Hall. Still this distinction may be obtained by residence, by lounging, and by money. The M.D. is then turned adrift upon society—let loose like a newly-weaned, wild, and cast-off monster, to feed and fatten on the vitals of the community.

Why, in every county town with its four and five thousand inhabitants throughout the kingdom, there lived, not ten years back, your puny boy-doctor, a "graduate," an "university man," it is true, but who, of hospitals knew only that they the peculiarities of disease knew nothing. Henceforth those ambition at Jericho till their beards be grown." The surgeon in general practical and twenty years experience, is not to be thrust aside by each aspirants for fame. Our medical colleges have been so many medical numerous, and have tended

avery penalties way, the advancement of that science which they were instituted to promote and protect. Arouse your energies, then, English sargeons. Continue your exertions in the cause of medical reform, and suffer them that for one instant to relax or abate. It is in consequence of your advocacy and sustemance of the principles which have from time to time been promulgated in the pages of this journal, that so much has been achieved. We can feel to reluctance in taking to currelyes that portion of reward and praise which is our due, for having projected and instituted a free medical press,for having insisted on and obtained the right to publish lectures which are delivered on public medical foundations,—for having proclaimed and enforced the right to publish the cases which are presented to the view in the wards of our hospitals; but had we not found a spirit of sympathy among the mass of our professional brethren, all our exerions would have proved fruitless, all our anxieties and labours must have been utterly and wholly unproductive. Diffused as are the members of our profession over the entire surface of the country; moving as they are in the first circles of society, what egitimate object is there connected with the science of medicine, which it is not in their power to accomplish? Left free and unshackled by the odious trammels of pariamentary statutes, the science of medicine would have flourished, would have asserted and established its supremacy, amongst a people so thoughtful and reflective as the English. But it is only now fettered by chains which have been rusting and decaying . or upwards of three hundred years. The operations of time, however, have at length so weakened these galling and perplexing restraints, that a few more efforts on the part of the oppressed will break them into atoms and cast them aside for ever.

What, then, is wanting in medicine in order to give the best security to the public realth, and to clear away all the rubbish, toll bars, and checks, which are still to be ound on the road of medical preferment? Of no consequence is it under what names hey exist, whether under those of universities, colleges, hospitals, or schools. They must not be allowed to obstruct genius in the pursuit of knowledge and of ame. If these institutions cannot, by a wise and prudent system of legislation be rendered subservient to the exalted objects of medical science, the interests of society demand that they should be diverted to some other purposes, or that they should ease to exist. No point now remains to be elucidated on this subject; it is adequately understood by every tyro in the profession. In the evidence which was taken before the Parliamentary Medical Committee, and a considerable portion of which has lately been published in this journal, it has been shown that the surgeons of England who are engaged in the duties of a general medical practice, were spoken of by some of the self elected heads of their own College, as a subordinate class of medical society-nay, as nen who were aliens to the medical profession. The very by-laws of the College sink them into an inferior position, and attainments superior to those of mere handicraft degrade them beyond the pale of medical advancement. Manual dexterity is placed in the ascendant, while a knowledge of the principles of medical science brings upon its possessor an infliction which approaches in character to the severity of a penal punish ... ment. If the members of the British Colleges of Surgeons could submit tamely and silently to injustice and insult of such a nature as this, they would deserve only the source . of every enlightened member of the community, instead of that sympathy which is now the the sections which they have progressively and successfully made

Never was there a time more favourable than the second or the second or

Benefit. Those surgions, therefore, of the United Stapping who are solicitous that gapin should have a clear field for exertion, - that merit should receive its due reward, - tha monopolies in medical practice should be destroyed—that the system of teaching in our medical schools should be placed on a new footing, that the offices in our hospitals should no longer be obtained by family interest or intrigue, -that secret remedies should ne longer be tolerated under the sanction of a government stamp,—that uniformity o title in the ranks of the profession should be made to depend on uniformity of attainmen in medicine,-such advocates of reform will continue to bestir themselves, and de vote their faculties to promote the success of the cause which they have so long sup ported. The application of excited energies, however, can be of little avail, if the power so exercised be not properly directed. Hitherto there certainly has been no misapplica tion of that moral and intellectual influence which the members of the medical profes sion are able to direct against their enemies and persecutors. All our grievances are traceable to the defective state of the law. Towards the Legislature, therefore, every movement tending to promote an improvement of that law should be employed; and, a: there is a perfect concordance of opinion amongst British medical practitioners relative to the extent and character of the abuses which are connected with the science are practice of medicine, there will be little difficulty in establishing a complete unity of action towards effecting their removal. If it were not for the obstacles which exist in the form of Charters and Acts of Parliament, medical practitioners might, by a judi cious combination of their abilities and numbers, carry out their views into a well organized system of government. But the strong arm of the law now interposes it power, and forbids any final adjustment of the question, without the intervention of the Legislature. As this is a fact which remains undisputed and is indisputable, there is no surgeon in the empire who has devoted the smallest portion of his time to a considera tion of the subject of medical grievances, who will not freely and candidly admit that i is to the Legislature, and to the Legislature alone, that application must be made for an instrument which will be adequate to the demolition of our incorporated monopolies.

In acknowledging, also, the supremacy of the Parliament in this respect, it is exhibitate ing to observe the kindly sympathy which the complaints of the profession have alread: excited in both Houses of the Legislature. If a reference be made to the debates in the Houses of Commons and Lords on the passing of the Apothecaries Act in 1815, and to the discussion in the House of Commons on the introduction and rejection of the Surgeons Bill in 1816, it will be perceived that a most extraordinary revolution has occurred amongst our senators, regarding the claims which medical practitioners have see forth for the purpose of showing that they are entitled to protection from Parliament But in 1815 the question of MEDICAL REFORM was not understood either in or out or Parliament. It had been, then, only partially discussed. A few petty grievances had been considered, and some imperfect remedies had been suggested, but no comprehensive evetem of medical government had-so far as we have been enabled to ascertain, from a careful examination of the writings of that period-engaged the attention, or eccupied the minds, of our medical regenerators. During the last twelve years, however, the subject has been unceasingly discussed in all its elementary branches; and we verily believe that the surgeon's apprentice of two years' standing, in 1835, understands more of the question, and could argue it more effectually in writing and in converge could any six members who belonged to the House of Commons in M ible is the feeling of encouragement which this rapid advag energy and exertion!

In admitting, therefore, the supremacy of the Landinture, let us mot

of what is our duty towards that depository of the will of the nation. If any ladiridual feel disposed to condense the Pavliament for its conduct in 1315, he is bound, on every principle of justice and sound policy, to use his own individual afforts towards rendering the members of the present Legislature amenable to public orining for any missonduct in framing and passing crude and incompetent laws for medical government. It is our duty, as well as our interest, to afford to them full and adequate instruction relative to the extent and enormity of medical abuses.

But it may be said that a Committee of the House of Commons, headed by an able and indefatigable chairman, has been appointed to inquire into the state of medical law and practice, that witnesses have been examined, and that evidence has been taken. and much of it printed. Hence it may be inferred, that with such materials at their command, the whole subject of medical government must be well understood by the members of the House of Commons; whereas it is very probable that not more than six members of the medical Committee understand any one portion of the question thoroughly; and that the Chairman is the only member of that Committee whose judgment on the subject of medical policy has been matured and confirmed by a patient, unprejudiced, and philosophic investigation of the abuses connected with the existing system, and who is fully sensible of the principles on which a strictly new system should be established. If the members of the House of Commons could find time to peruse, with the requisite attention, evidence taken before Committees, nothing more would be required to enable them to understand the various questions brought before them. But the reports of the House are so numerous and voluminous, and embrace such a multiplicity of national affairs, that it is not possible for any man, whatever may be his industry, the strength and accuracy of his memory, or the vigour and capacity of his mind. to analyse a twentieth part of the sessional reports which are placed on the table of his study. This deficiency extends, in some measure, to documents connected with every department of the state. There are, possibly, a few men in each House of Parliament who are capable of discussing with accuracy several prominent important features of every great question; but it seldom happens that more than two or three members, especially if the subject be new to the House, who take a view of the whole question. and understand it thoroughly. In law reforms, in church reforms, in municipal reforms, in matters of international commerce, the accuracy of this statement is sustained by a vast mass of facts. Whenever, therefore, it is sought, in either House of Parliament, to institute a new law, the parties interested in the success of the measure invariably furnish the members of the senate with a "digest" of their " reasons" for urging institution, and an abstract of the principles on which the new enactment is to be founded. Various means are adopted for this purpose. Petitions are placed in the hands of the members. Printed explanations of the arguments which can be adduced in favour of a particular bill are industriously insinuated into the hands of the members in the lobby and passages of both Houses. The agents for new bills, and the friends and supporters of those measures, visit many of the members personally, and explain prally the objects which they have in view; and, when the claims of the parties are well cunded,—are sustained by the principles of justice and of reason, their efforts, in nineon cases out of twenty, are ultimately rewarded with success.

they have already employed so energetically, and with such infect, available of further acc of the cause of medical reform. Of all the modes of medical reform.

PREPACE.-MEDICAL REPORM.

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judice, there is some equal to the enforcement of truth in personal conveniation. Sould are dissipated as they arise; questions are instantly unawered; objections are suddenly rémoved. The organs of meech are instruments of infinite power when their movements are directed by a jufficious and well-fortified mind. Already have the members of the profession proceeded in the work of senstorial instruction most industriously and impressively. We implore of them not to relax in their exertions. The fruit of their labours is already apparent in the desire which the House of Commons has recently manifested to render justice to the members of the medical profession. The science of medicine itself is spoken of with admiration in that assembly, and the claims of medica practitioners are treated with marked attention. The tone of the Commons in this instance is not more striking than it is extraordinary, considering the temper and ignorance of that body on medical subjects, so lately as in 1815. The alteration car neither be explained nor understood, except by making an unqualified acknowledgement of the value of the individual exertions of the members of the profession amongst members of the Legislature residing in their respective localities. In earnestly entreating that those exertions may be unremittingly continued until the next session of Parliament,-in imploring our professional brethren to embrace every opportunity which may be made instrumental in acquainting members of both Houses of the Legislature not only with the extent and character of medical abuses, but also with the principles on which a new law should be instituted for establishing ONE UNIFORM SYSTEM OF MEDICAL GOVERNMENT, executed TRIPARTITELY, in the three great divisions of the empire, we are, in reality (and we write under a conviction which is founded on personal observation), beseeching them to take that course which will lead to the speediest and happiest termination of their labours; and while the value of the disinterested and patriotic efforts made by British surgeons in the cause of humanity and justice, will be gratefully acknowledged by an intelligent community, the splendid results of those efforts will be solemnly proclaimed to the world, in an ACT of the Imperial Parliament.

LIST OF THE SCHOOLS OF MEDICINE

IN LONDON.

OPEN TO STUDENTS IN THE SESSION 1835-36.

E districts of the metropolis in which (institute any comparison between these medical schools are situated, may be ated, according to the situation of the tals, into the following divisions :e containing the London Hospital, situ-

t the eastern extremity of London, in hitechapel-road.

vitals, situated in Southwark, near the of London Pridge.

ne containing St. Bartholomew's Hospintuated in Smithfield.

ne containing the North London Hospiand the Middlesex Hospital, near Totam Court Road.

ne containing the Westminster Hospital. ited at the back of Westminster Abbey which division, if not in the previous ict, the Charing-Cross Hospital may be ed, when it is "recognised" by the ical boards; an event which circumes will, most probably before the expin of another year, render unessential to stablishment as an office for the sale of ficates to students; and, finally,

ie containing St. George's Hospital, ted at Hyde Park Corner.

each of these institutions there is now hed an association of gentlemen who er courses of lectures on those subjects are named in the "Regulations" of Company and the College ir neighbourhood

various establishments, for the difficulty of selection amongst them, on the score of superiority of advantages and instruction, becomes every year more difficult, (with one or two exceptions, which have already been indicated in the pages of this ne containing Guy's and St. Thomas's journal,) we proceed at once to lay before our readers a digest of the advertisements issued from them, in the order enumerated in the preceding list of the hospitals. We may first premise, however, that on comparing the present arrangements of the schools with those of last year, the change of lecturers, and the rising and sinking of schools, are not less numerous than they were observed to be at the commencement of the last session, as compared with the arrangements of the session before that. How, in fact, the lecturers can, with any approach to gravity of countenance, in the face of these incessant variations, allow themselves to offer to students the optionof "perpetual" attendance to their courses of lectures, we know not. The word "pernetual," however, is to be found in almost every prospectus, and we may here observe that in the lists of fees in the subjoined tables, the accord sum is the fee required for entrance under that head. The first sum is the fee named for single courses, either of three or six months duration. Reserving, then, such observations as we may be dispilar courses posed to offer to students on this occasion antil the list of schools is concluded, we the latter materal begin at the east end of the metropolis, and mt. attempting Talinsert first an account of the

LONDON HOSPITAL SCHOOL AND PRACTICE,

Subjects.	Locturers.	Days and Hours of Lecturing.		Fees.							
Medicine.		Tues. Thurs. & Fri. at	£	8,		£	·				
meuicine.	Dr. Billing and Dr. Davies.			4	άz	7	7				
Materia Medica	Dr. Cobb.	Wed, and Fri. at 9 a.m.	3	3	œ.	4	- 1				
				3	&		-				
Midwifery.	Dr. F. Ramsbotham.	Tues. Thurs. & Sat. at 10.	٠,	.,	a	•	•				
Chemistry.	Mr. Pereira.	Mon. Wed. and Fri. at			c		8				
		10 a.m.	4	4	œ	8	ъ				
Medical Juris-											
prudence.	Ramsbotham, and		!								
	Mr. Percira.	Saturday, at 31 p.m.	3	3	æ	4	4				
Aratomy, Phys.											
& Operations of Surgery.	milton, & Adams.	Daily, at 2½ p.m.	5	5	Ø.	10	10				
Anatomy, with	Messrs. Hamilton &										
Dissect. &c.	Adams.	Daily, from 11 till 4.	3	3	8.	10	10				
Surgery.	Mr. John Scott.	Mon. Wed. Fri. at 7 p.m.		3		- 5					
Botany.	Mesrs. Percira and	and the second second									
,	Quekett.	No days named.	::	3	A	4	4				
Compar. Anat.		In the Spring.			•••	-	•				
Morbid Anat.	Mr. T. B. Curling.	in one opting.									

Scott, and Mr. Luke.

practice is, for twelve months, 16 gaineas; 50%. for perpetual attendance, 20 guineas; the apothecaries' fee, 1 guinea.

practice is, for twelve months, 20 guineas; -2. A Spring course of Comparative Anafor twelve months as dressing pupil, 30 tong, by Mr. W. J. Linle.

... The Physicians of the hospital are, Dr. guineas; for six months as dressing pupil, Dr. Frampton, Dr. Billing, and Dr. Gordon. 20 guineas, library fee, 1 guinea.

The Surgeons are, Mr. Andrews, Mr. John cott, and Mr. Luke.

Lectures commence tectoner 181, as John part 2. General fee for attendance upon all the above Lectures, qualifying for Royal and Analyseams, Hall. Lectures commence October 1st,* at hali-The fee for admittance to the Physicians' College of Surgeons and Apothecaries' Hall,

Promises.-1. Ctinical Lectures by the Physicians and Surgeons. Dr. Billing is one of those gentlemen who strictly abides The fee for attendance on the Surgeons' by his share in the promise here given.

ST. THOMAS'S HOSPITAL SCHOOL AND PRACTICE.

Subjects.	Lecturers.	Days and Homs of Lectron:		I ec.							
Medicine.	Dr. Williams.	Mon. Wed. and Fri. at	Ľ	ж.		Ł	×.				
		'0 a.m.	.3	.3	Ň.	G	6				
Mat. Medica.	Dr. Burton.	Mon. Wed. & Fri. at 4 p.m.									
Midwifery.		Tucs. Thurs, and Sat. at									
			3	3	٨٠	ti	6				
Chemistry.	Mr. R. Phillips.	Tues Thurs, and Sat. at									
•	•	10. a.m.	: 4	-1	å.	6	6				
Med. Juris.	Dr. Lister and Mr.										
	R. Phillips.	Tues, and Fri. at 12.	3	3	å	4	4				
	Messrs. Tyrrell, Mack-			9.							
	jun., & Mr. Charke.	Daily at 24 p.m., & 11 a.m.	9	9	. .	15	15				
Surgery.	Messis. Travers and Terrell.	Mon. and Fri. at 8 a.m., and Wed. at 7 a.m.				6.15					
Botany.	Mr. J. Hayes.	Not till April.	1	7			Lor				

^{*} In every school the lecturing offinnences on this day

The fees for attendance on the medical practice of the hospital are, physicians' pupil, two "" 3, 241. 3s.; one year, 151. 15s.

The physicians make their visits daily, at one o'clock; Dr. Williams on Mondays and Thursdays; Dr. Roots on Tuesdays and Frideys; Dr. Burton on Wednesdays and Saturdays: Dr. Lister sees the out-patients on Thursdays and Saturdays at eleven.

The fees for attendance on the Surgical practice are, Dresser, one year, 511. 2s.; Surgeons' pupils, by Mr. Travers, Mr. Green, six months, 32l. 12s.; Surgeons' pupil, one and Mr. Tyrrell .- 5. Pupils entering to the year, 261. 6a.; six months, 201.; a second Surgical practice of St. Thomas's Hospital, entry, if within two months, 61, 12s.

o'clock; Mr. South sees the out-patients on tice or lectures. Mondays and Wednesdays at eleven o'clock; on Fridays operations are performed.

and the commence of the commen

Promises .- 1. Anatomical Examinati by the Lecturers and Demonstrators, twice a weck .- 2 Attendance in the Dissectingroom by the Lecturers from twelve o'clock, and by the Demonstrators from ten o'clock. until half-past two, daily .- 3. Lectures on Morbid Anatomy, by Dr. Barker .- 4. Clinical Lectures will be delivered to the Physicians' pupils, by Dr. Williams, Dr. Roots, and Dr. Burton, and to the Dressers and are allowed to attend that of Guy's,-6. The Surgeons make their visits daily, viz., Post-mortem Examinations at one o'clock, Mr. Travers on Mondays and Thursdays at by Dr. Barker .-- 7. A Distribution of Prizes one o'clock; Mr. Green on Tuesdays and will take place in May.—S. The use of the Pridays at one o'clock; Mr. Tyrrell on Wed- Library and Reading Room allowed, so long nesdays and Saturdays at half-past one as gentlemen continue attending the prac-

CUY'S HOSPITAL SCHOOL AND PRACTICE.

Subjects.	Lecturers.	Days and Hours of Lecturing.		Fees.				
Medicine.	Drs. Bright and Ad-	Mon. Wed. and Fri. at	£	s.		£		
	dison.	3} p.m.	4	4	&	8	8	
Mat. Medica.	Dr. Addison.	Tues. Thurs, and Sat. at						
	1	34 p.m.	3	3	æ	4	4	
Midwifery.	Dr. Ashwell.	Daily at 81 a.m.	3	3	å	10	10	
Chemistry.	Messrs. Aikin and	Tues. Thurs. and Sat. at						
•	Taylor.	110 a.u.	4	4	å	8	8	
Med. Juris.	Mr. A. Taylor.	Mon. and Fri. at 10 a.m.	3	4 3	S.	4	4	
Anatomy, &c.	Messrs. Cooper and		8	8	Š:	21	0	
• •	Cock.	Daily at 2 p.m. & {10 a.m.	3	3	ď:	5	5	
Surgery,	Mosses. Key and	Tues. Thurs. and Fri. at	į					
	Morgan.	S p.m.	2	2				
Botany.	Mr. C. Johnson.	Mon. Tues. Thurs. Fri. at						
Morbid Anat.	Dr. Hodgkin.	Tues. Thurs. Fri. at 64 p.m.	2	2				
Compar. Anat.	Mr. T. Bell.	Mon. and Wed. 17 p.m.	2	2				

The physicians of the Hospital are, Drs. physicians and by Dr. Ashwell, whose pupils are Messrs. Key, Morgan, and B. Cooper. Hospitel Practice. -

- Physicians' pupils, rpetual, 24/. 4s.; one year, 15/. 15s.

Cholmeley, Bright, and Back. The surgeons are allowed to attend the Hospital Lying-in Charity (?)-2. Lectures on the teeth, by Mr.T. Bell.-3. Clinical lectures and instructions by the surgeons .- 4. Sir Astley Cooper g, one year, 514. 2s.; six (will attend as) consulting surgeon. - 5. The surgical pupils of Guy's may attend that of months, 26l. 6s.; St. Thomas's. - 6. The use of the library, patry within two reading-room, and botanic garden .- 7. The time of the lectures not to interfere with the that of the practice.

THEATRE OF ANATOMY AND MEDICINE WEER BRUGET, MAZE POND, BOROUGH.

Gablests.	Lecturers.	Days and Hours of Lecturing.		Fees.							
Medicine.	Dr. Whiting.	Mon. Wed. and Fri. at	£	8.		£					
Medicine.	Die warenig.	14 p.m.	4	4	R	6	6				
Mat. Medica.	Dr. Whiting and Mr.	Tues. Thurs. and Sat. at	!								
	Everitt.	\$10 a.m.	3	3	å	4	4				
Midwifery.	Dr. F. H. Rams- botham.	Tues. Thurs. and Sat. at 7 p.m.	3	3	&	6	6				
Chemistry.	Mr. Cooper.	Mon. Wed. and Fri. at	4	4	Æ.	6	6				
Mcd. Juris.	Dr. S. Smith & Mr.	Tues, and Thurs, at 14	3	3			-				
Anatomy, Physiology, and	Cooper. Messrs.Grainger,Pil- cher, Millard, and	p.m. Daily, at 2½ p.m. & at 11½ a.m.	.3	3	æ	5	.,				
Demonstra- tions.	E. Barron.		8	8	ά	15	15				
Surgery.	Messrs. Grainger and	Mon. Wed. and Fri. at	1								
	Pilcher.	6 p.1n.	3	3	Ň	5	- 5				
Botany.	Dr. R. Dickson.	Daily 19 a.m.	3	3	å:	4	4				

Mr. Grainger will deliver the introductory lecture at 11½ a.m., on Thursday, Oct. 1.

Promises.—1. Official superintendence in the dissecting-room.**—2. The museum open Periodical examinations of the students. to students .- 3. Gentlemen entering to the

ST. BARTHOLOMEW'S HOSPITAL SCHOOL AND PRACTICE.

Subjects.	Lecturers.	Days and Hours of Lecturing.		Fees.							
Medicine.	Dr. Hue.	Tues. Thurs, and Sat. at	.1	s.	•	Ŀ	۵.				
		10 a.m.	-1	4	۵	6	6				
Mat. Medica.	Dr. Roupell.	Mon. Wed. and Fri. at									
	-	3 <u>₹</u> p.m.	3	3	A:	-1	4				
Midwifery.	Dr. Hugh Ley.	Tues. Thurs. and Sat. at									
-		7 a.m.	3	3	à	7	7				
Chemistry.	Dr. Hue.	Mon. Wed. and Fri. at									
		10 a.m.	4			8	8				
Med. Juris.	Dr. Burrows.	Wed. and Fri. at 14 p.m.	3	.3	å	4	-1				
Anatomy, Phys., and Demons.	Messrs. Stanley, Wor- mald, & M'Whinnie.	Daily, at 9 a.m. and 21 p.m.	8	8	&	21	0				
Surgery.	Mr. Lawrence.	Mon. Wed. and Fri. at									
		7 p.m.	5	5	&	8	8				
Botany.	Dr. F. J. Farre.	Mon. Tues. Thurs. Fri.	1								
-		and Sat. at 11 a.m.	3	3	δι	4	4				
Compar. Anat.	Dr. A. Farre.	Tues. Fri. at 21 p.m.	1	1	&	2	2				

and Saturdays, at 11 to see out patients, and 12½ to see in-patients on Thursdays. Dr. days. Mr. Early

The hospital officers are, Drs. Huc, Latham on Mondays and Tuesdays at tham, and Roupell, physicians; and Messrs.

Dr. Hue attends at 11½ a.m. on Mondays and Saturdays, at 11 to sec out-patients, and at 12½ on Mondays.

lays and Saturdays. Dr. G. Burrows at As dresser, for success assenths, fifty gui-ll in the out-patients' room, except on ness; for six assentes, thirty-six guineas. fhursdays.

Br six months, eighteen guineas.

The fees for attendance are,—on the Medical Practice for an unlimited period, hirty guineas; for eighteen months, fifteen quineas; for nine months, twelve guineas. On the Surgical Practice, for twelve uonths (or perpetual), twenty-five guineas; br six months, eighteen guineas; br six months, eighteen guineas;

ALDERSGATE SCHOOL OF MEDICINE.

(Near St. Bartholomew's Hospital.)

Subjects.	Lecturers.	Days and Hours of Lecturing.	Fees.								
Medicine.	Dr. Marshall Hall.	Mon. Wed. and Fri. at	£	8.		£	8.				
income.	DIT I THE COLUMN TARIES	8 <u>i</u> p.m.	4	4	&	6	G				
Mat. Medica.	Mr. Pereira.	Tues. Thur. and Sat. at	_	-		-					
•		6 p.m.	3	3	&	b	5				
Midwifery.	Mr. Walford.	Mon. Wed. and Fri. at									
		11 a.m.	3	3	å	4	4				
Chemistry.	Mr. Pereira.	Tues. Thur. and Sat. at	3	3	e.	6	6				
Med. Juris.	Dr. W. Cummin.	10 a.m. Mon. Wed. and Fri. at 11	.)	3	œ	Ų	•				
Anat. Phys. and	Dr. W. Camanin.	a.m.	2	2	8e	3	9				
Demons.	Messrs. Skey & Furley		_	_	_	Ü					
Botany.	Messrs. Percira and		6	6	&	14	14				
	Quekett.	(No time named.)	3	3	&	4	4				
Comp. Anat	Dr. R. E. Grant.	Tues. and Thurs. at 6 p.m.	12	lect.		1	1				

Promises.-1. Extra lectures on Medical ; by Dr. Birkbeck.-3. Attendance on labours and Morbid Anatomy by Dr. Hall.—2. Grato to qualified midwifery pupils.—4. Botanical unious lectures on Mechanical Philosophy, excursions in the summer.

UNIVERSITY OF LONDON, AND NORTH LONDON HOSPITAL.

Subjects.	Lecturers.	Days and Hours of Lecturing.		Fees.						
		t designed on the second secon	£	8.		£	8.			
Medicine.	Dr. Elliotson.	Daily at 8.	ä	0	&:	8	0			
Mat. Medica.	Dr. A. T. Thomson.	Daily except Sat. at 3 p.m.	6	0	Š.	9	0			
Midwifery.	Dr. D. D. Davis.	Mon. Wed. Fri. at 9 a.m.	5	0	&	7	•			
Chemistry.	Dr. Turner.	Daily at 10 a.m.	7	0	8	10	0			
Med Juris.	Dr. A. T. Thomson.	Tues. and Sat. at 41 p.m.	3	O						
Anatomy, &c.	Dr. Quain and Mr.	Daily except Sat. at 2 p.m.								
••	R. Quain.	and daily dissections.	12	0	&	18	•			
Surgery.	Mr. S. Cooper.	Mon. Wed. and Fri.								
	1	at 7.	4	10	&c	6				
Botany.	Dr. Lindley.	Tues. Thurs. and Sat. at								
A STATE OF THE PARTY OF THE PAR		9 a.m.	3	0	&	6	•			
and the	Carswell.	Mon. Wed. and Fri. at 10.	3	0						
	ment.	Daily, except Thurs. Sat.,	ı							
	A Section of the sect	at 3.	3	0						
Personal Visite	Mr. Yousen	To begin Nov. 1st.	5	0	à	7	0			
Zet an						-	_			

The Physicians of the Clospital are, Drs. Elliotson, Thomson, and Carawell; the Sur-geons are, Messrs. S. Cooper, R. Liston, and Students without additional payments, pre-R. Quain. Dr. Davis holds the office of ference being given to those who, with equal Obstetrical Physician.

tice and Clinical Lectures on the following versity.

terms :-

and Surgical Practice, 261. 5s.

For attendance during one year upon the Physicians' and Surgeons' Practice, 21/.

For attendance during one year upon the Physicians' or Surgeons' Practice separately,

15l. 15s.

For attendance during six months upon 15/. 15s.

rately, 101. 10s.

the maintenance of the establishment.

Secretary.

House Surgeons, Physicians' Clerks, and moral character, have obtained the highest Students are admitted to attend the Prac- honours in the medical classes of the Uni-

The Surgeons' visits are made daily from For perpetual admission to the Medical 12 to 1, the Physicians' daily from 1 to 2

o'clock.

Medical and Surgical Clinical Lectures are given several times a week.

Dr. Davis, Dr. Carswell, and Mr. Quain, sec out-patients daily in the morning.

This Hospital is rendered by its arrangethe Physicians' and Surgeons' Practice, ments and constitution by far the most advantageous in the metropolis for the at-For attendance during six months upon tendance of students, and we advise all those the Physicians' or Surgeons' Practice sepa- students with whom circumstances render the choice of a locality subservient to their (Note.) Their proportion of these fees desire for professional advantages, to exahas been relinquished by the Physicians and mine attentively its claims as a place of in-Surgeons of the Hospital, and is devoted to struction. As small pamphlets on the arrangements of the Hospital and the Uni-Every student pays, in addition to these versity may be readily obtained at either infees, 10s. to the Apothecary, and 5s. to the stitution, we shall not further occupy space with regard to them here.

MIDDLESEX HOSPITAL SCHOOL OF MEDICINE.

Subjects.	Lecturers.	Days and Hours of Lecturing.	Fres.							
Medicine.	Dr. Copland.	Mon. Tues. Thurs. Fri.	£	8.		£	8.			
	•	at 3 p.m.	3	3	8:	- 6	6			
Mat. Medica. Midwifery,	Dr. Macreight. Mr. Sweatman.	at 3 p.m. Tues. Thurs. Sat. at 9 a.m. Tues. Thurs. Sat. at 10	3	3	Å:	5	5			
Chemistry,	Mr. Everitt.	p.m. Mon. Wed. Fri. at 10	3	3	8:	5	5			
Cucinistry,	MI. Dieine.	a.m.	.,	.,	x.	c:	6			
Med.Jurisprud. Anatomy, Phys.,	Dr. Leighton. Sir C. Bell, Mr. Tu-	Wed. Sat. at 3 p.m.	3	3	ă	4	4			
with Demon- strations.	son, and Mr. Shaw.	Daily at 11 a.m. and 2	6	6	e.	16	16			
Surgery.	Mr. Arnott.	Mon. Wed. Fri. at 9 a.m.		3						
Botany.	MII. MINOCE.	(During the summer.)	2	2	å	3	3			

Arnott.

The terms of attendance on the medical paying 101. 10s. extra. practice are, during three months, six guineas; six months, ten guineas; nine months, medical and surgical officers of the hospital. twelve guineas; twelve months, fifteen guineas; unlimited attendance, twenty-one guineas. Apothecary's fee, one gninea.

The terms of admission of surgeons' dressers and pupils are, dresser for twelve months, 311. 10s.; for six months, 211. Lectures of Pupil, for twelve months, 211.; for six logy, and Si months, 151. 15s.; for three months, 101. 10s. Smith,

The Physicians of the Hospital are, Drs. From the dressers the house-surgeon is Hawkins, Watson, and Wilson. The Sur-geons are, Sir C. Bell, Mr. Mayo, and Mr. A pupil may be allowed three months? dressing during the time of his pupilage, hy

Promises .- Clinical lectures from all the

HUNTERIAN THEATRE Lectures on Ass

of both, 61. 6s.; perpetual to both 121. 12s. Brookes.

mencing on the 1st of October. A Lecture The Lectures and Dissecting-rooms will be daily, at half past two o'clock. Dissections open free of expanse, to the perpetual pupils and Demonstrations from the 8th of October of the former-school at this Theatre, and to daily. Terms of the Lectures:—One course the perpetual pupils of the late Joshua

MEDICAL SCHOOL, WESTMINSTER DISPENSARY.

9. Gerrard Street, Soho.

Subjects,	Lecturers,	Days and Hours of Lecturing.	Fees.
Medicine.	Dr. Ryan.	Mon. Wed. Fri. at 11 a.m.	One course on Medicine 51. 5x.; one on Mid-
Mat. Medica.	Dr. Epps.	Mon. Wed, and Fri. at 9 a.m.	wifery, 5l. 5s.; Med Juris, (Summer), perpe- tual to all these, 10l. 10s.
Midwifery,	Dr. Ryan.	Tues. Thurs and Sat. at 11 a.m.	One course on Mat. Med., 31, 3s.; one on Chemis-
Chemistry.	Dr. Epps.	Tues. Thur, and Sat. at 9 a.m.	try, 51. 5s.; one on Bota- ny, 51. 5s.; one on Bota-
Med. Jurisprud.	Dr. Ryau.	Fri. at 11 a.m.	ny, 2/. 2s.; perpetual to all three, 10/. 10s.
Anat. Phys. De- mons. & Surg.	Mr. Dermott.	Daily at 10 a.m., and 3 p.m.	Anat. Phy. Demons. and
Surgery.	Mr. Dermott,	Daily at 31 p.m.	Surg Single course, 51. 5s.; perpetual to all,
Botany.	Dr. Epps.	In the Summer.	71. 78.

BLENHEIM-STREET SCHOOL OF MEDICINE.

Founded by the late Joshua Brookes.

As we have received no prospectus of this school, we are compelled to insert the only account we possess of it, as it is contained in an advertisement inserted on the cover of Thompson. the journal.

The Winter Courses commence October 1st.

Anatomy, Physiology, and Morbid Anatomy, by Mr. King, assisted by Mr. Savage. | and W. Theobald, Esq., Barrister-at-Law.

Demonstrations and Dissections, by Mr. King, Mr. Thurnam, and Mr. Evans.

Medicine, by Dr. Litchfield (whose Pupils may attend his Practice at the Westminster. Dispensary).

Surgery and Surgical Operations, by Mr. King.

Chemistry and Pharmacy, by Dr. R. D.

Materia Medica and Botany, by Dr. Steggall. Midwifery, and the Diseases of Women

and Children, by Dr. Richmond. Medical Jurisprudence, by Dr. Litchfield

KING'S COLLEGE MEDICAL SCHOOL

Subjects.	l.ccturers.	Days and Hours of Lecturing.	g. Fees.							
Medicine.	Dr. F. Hawkins.	Mon. Wed. and Fri. at	£	8,		£	*			
		9 a.m.	3	3	&	6	6			
Mat. Medica.	Dr. B. Hawkins.	Mon. Wed. and Fri. at					_			
		11 a.m.	3	3.	&c	6	6			
Midwifery.	Dr. R. Ferguson.	Tues. Thurs. and Sat. at								
		11 a.m.	3	3	&	6	- 6			
Chemistry.	Mr. J. F. Daniell.	Mon. Wed. and Fri. at								
		3 p.m.	4	4	å	10	10			
· · · · · · · · · · · · · · · · · · ·	Dr. Watson.	Tues. and Thur. at 3 p.m.	3	3	&	4	4			
MATERIAL STREET	gara. Mayo and									
	artridge.	2 p.m., and daily at								
Autorit.		10g a.m.	8	8	&	18	18			
Surgery.	Mr. J. R. Green.	Mon. Wed. Fri. at 8 a.m.	4	4	&	6				
Motany.	Mr	Tues. Thurs. Sat. at 9 a.m.	4	4	&	6				

CHARING-CROSS, WESTMINSTER, AND ST. GEORGE'S HOSPITALS.

Near King's College is the Charing-Cross required by the existing regulations, 15t, 15s. Respital, in which, pare are four phy- and 21t. Surgical, for six months, 12f, 12s. Sicians: — Drs. Sheardian, Golding, Sig-: Clinical lectures are promised by the mond, and Chowne; and two surgeons, physicians and surgeons of the hospital. Messrs. Pettigrew and Howship; and their. The question as to the "recognition" of attendance takes place ddly at twelve. the hospital at the College of Surgeons and The charge to medical students for per- Apothecaries 'fall must be answered at those mission to walk thomsels the world adds at 'institutions respectively. (See near 11) that hour, are, to the medical practice for A pumphlet full of arrangements and pro-nine months, 164. 10s.; for the full period miscs may be obtained at the College.

AND THE RESERVE THE PROPERTY OF THE PERSON O WESTMINSTER SCHOOL OF MEDICINE.

Subjects.	Lecture.s.	Days and Hours of Lectures.	Fees.						
Medicine. Mat. Medica. Midwifery. Chemistry. Medic. Jurisprud.		Mon. Wed. Fri. at 9. a.m. Mon. Wed. Fri. at 11 a.m. Tues. Thurs. Sat. at 11 a.m. Tues. Thurs. Sat. at 9 a.m. Mon. Thurs. at 10 a.m.	5 5	5	å å	6	6		
Anat. and Demon. Surgery. Botany. Compar. Anat.	Malyn & Hancock. Mr. Guthrie and Mr. Thompson. Mr. D. O. Edwards.	Daily lecture at 21 p.m., and Demons. daily, ex-	12 5 2 2	12		16 6	16		

There is a newly-built hospital near this lars, however, may, possibly, be ready for school, but up to the hour of our writing delivery by the 1st of October to impring the conductors were not prepared to state students. The promises in the prospectus the terms of attendance on its practice. It of the school are very similar to those of is probable, therefore, that no students are other medical schools extra muros. expected to enter to the practice. Particu-

SCHOOL OF ANATOMY AND MEDICINE ADJOINING ST. GEORGE'S HOSPITAL.

Subjects.	Lecturers.	Days and Hours of Lecturing.			Pros.					
Medicine.	Drs. Stevens & Wil-	Mon. Wed. and Fri. at	*	 4.		£	ž.			
Mat. Med.	Dr. Wood and Mr.	6 p.m. Mon. Wed. and Fri. at	3	3	&	5	5			
Midwifery.	Mr. Stone and Dr.	i III am	3	3	&	5	5			
Chemistry.	Davies. (At the Royal ln.	9 a.m. Tues. Thurs. and Sat. at	3	3	čķ	5	5			
Med. Juris.	Messrs. Broughton	9 a.m.								
nat. & Demon- strations.	and Wilcox. Dr. Wilson & Mesars.	- 1	3	3	&	4	4			
urgery.	Lane & Harrison. Messrs. Liston and	Daily, 104 a.m. & 24 p.m. Mon. Wed. and Fri. at	6	6	&		6			
Sotany.	Walker. Mr. Hayes.	Tues. Thurs, and Sat.				T.				
		114 a.m.	Y.F	27		4	4			

Bwo of the lecturers at this school (Dr., Wilson and Mr. Walker) are medical officers of St. George's Hospital, the terms of ettendance at which are stated under the head below. The school has been newly school.

And the second s

THEATRE OF ANATOMY; KINNERTON-STREET,

WILTON PLACE, ADJOINING ST. GEORGE'S HOSPITAL.

A Course of Lectures on Anatomy, Phyarranged, and is now rendered complete in niology, and Surgical Anatomy, will be de-every department of "regulation" lectur- livered at this School, by Mr. Tatum, and ing. Between entrance to the lectures at Mr. H. J. Johnson. A Lecture daily at this school, and entrance to the lectures at 21 p.m., commencing on the 1st of October, this school, and entrance to the lectures at and a Course of Demonstrations of Practical the hospital, no student ought to hesitate Anatomy will be delivered by Mr. H. J. for one moment. Let them enter to the Johnson, and Mr. II. C. Johnson. A Demonstration daily, at 104 a.m., commencing on the 10th of October. One course of both, 12/. 12s.; perpetual to both, 16/. 16s.

ST. GEORGE'S HOSPITAL SCHOOL AND PRACTICE.

Subjects. Medicine.	Drs. Macleod and	Days and Homs of Lectoring.	Fees,					
		Mon. Wed. and Fri. at	£			£		
, , , , , , , , , , , , , , , , , , , ,	Seymonr.	114 a.m.		3	æ	6	6	
Mat. Medica.		Tues. Thurs. and Sat. at	i	3				
Midwifery.	Dr. Robert Lee.	Mon. Wed. and Fri. at 9 a.m.		3	Š:	,		
Chemistry.	None given.	J 4.111.	٠,	.,	a	.,	3	
Med. Juris. Anatomy.		Mon. Thurs. and Fri. at 47 p.m.	3	3	&	4	4	
Surgery.	Mr. C. Hawkins and Mr. G. Babington.	Mon. Wed. Fri. at 8 p.m.	3	3	Å.	5	5	
Botany.	Dr. Dickson.	Daily, except Saturday, at 14 p.m.	3	3	&	4	4	

nital .- Physicians :- Drs. Chambers, Sey- twenty guincas; perpetual pupils, fifty guimour, Wilson, and Macleod. - Assistant neas, Clinical Lectures &c. are promised Physician: Dr. Hope. Attendance on the by all the physicians and surgeons, except practice of the physicians for nine months. Dr. Chambers. twelve guineas; for one year, sixteen guineas; perpetual pupils, twenty-four guineas. Surgeons: Mr. Keate, Sir B. Brodie, Operations on Thursdays at one o'clock. Mr. Hawkins, and Mr. Babington. Assist- The physicians and surgeons are stated to ant Surgeons: Mr. Walker and Mr. Cutler, attend almost daily at half-past twelve Attendance on the Practice of Surgeons for o'clock.

Medical and Surgical Practice of the Hos- six months, fifteen guineas; for one year,

three guineas; perpetual, five guineas.

Lectures on Medicine, on Monday, the 5th petual, six guineas. of October, at 16 a.m., at the House of Mr.

Dr. Jewel, will commence his autumnal delivered at 93, Bartholomew Close, near lectures on Midwifery and the Diseases of Women and Children, at the Hunterian Waller, commencing on Monday, the 5th of Theatre of Anatomy, Great Windmill-street, at 1 6 p.m., and continued every at 7 p.m. October 3, 1835. One course, Monday, Wednesday, and Friday, at the three guineas; perpetual, five guineas. Dr. Roberts will commence a course of

Lectures on Medicine will be delivered at the "Free Hospital, Greville-street, Hatton-garden," by Dr. Uwins, Senior Physician to the Hospital, commencing Oct. I, at four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and continued every succeeding Mon., Tues., Thurs., and Fri., at a four o'clock, and c LECTURES on Medicine will be delivered

Physiology, Pathology, and Surgery, will be delivered at the same place, by Mr. Greville Jones, Surgeon to the Hospital, commencing October 2, and continued daily at 21 p.m.

DISEASES OF THE SKIN .- An Institution, entitled the London Infirmary for the Treatment of Discases of the Skin, is advertised at 51, Great Ormond-street, Queensquare; Dr. J. P. Litchfield, Physician; Mr. Carpue, Consulting Surgeon, Mr. H. Styles, Resident Surgeon, and it is stated that it ragraph was accidentally omitted:will afford opportunities to students in medicine, for observing the nature and treatment of cutaneous diseases.

GENERAL DISPENSARY, 36, Aldersgatestreet .- Physicians: Dr. Whitsed, Dr. Holt Yates, Dr. Rowley, and Dr. J. R. Bennett. The following terms of attendance are ad-lectures are admitted by Mr. Wade to his The following terms of accommod tentions to the lectures, tree from charge vertised:—For the period required by the lectures, tree from charge vertised to all the lectures, thirty pounds. months, 5t. 5s.; for three months, 3t. 3s. But of course no student who wishes to learn anything of the practice of medicine, or has ment.

7 p.in., Oct. 1, by Mr. J. H. Curtis.

advertises a course of Lectures which is to the course, embracing medical jurispinembrace, in advantageous union, all the dence, will begin in January 1836. facts, and their relative bearing and con- course will be delivered at the becurenexion, which constitute subjects of examina-room, 8, Grafton Street, Fitzroy Square."
tion at Apothecaries' Hall. Such a con- A course on "Hygeine" presents strong spectus of medical knowledge may prove claims to the attention of medical men, and

studies previous to their presenting themselves for examination at Apothecaries' Hall, of consideration either to practitioners or at 4, Robert-street, Hampstead-road.

Dr. COLLIER will commence courses of Lectures on Medicine and Materia Medica, on Monday, October 5th, at 11 a.m., to be continued daily at the same hour, Saturday there has accumulated a considerable mass excepted, at 32, Spring-gardens.

At the Saint Pancras Infirmary, Dr. L. R. Willan will, in October, commence a course of Clinical Instruction and of General Pathelogy.

LECTURES on Materia Medica and Medical Jurisprudence will be delivered by Mr. Barnes, at 72, Euston-square.

Materia Medica at a quarter before six o'clock p.m., on Mon. Wed. and Fri., beginning October 5. Fee for each six months' course, 4/.

Medical Jurisprudence at the same hour, on Tues and Thurs. Fee for the whole course, 4/.

, Under the head of "Medical School. Westminster Dispensary," the following pa-

The Lectures commence on Thursday. the 1st of October, at 11 in the morning, with a lecture by Dr. Rvan. Instruction in Morbid Anatomy is given by Mr. Wade, Surgeon to the Westminster Dispensary, and the gentlemen entering to the above lectures, free from charge. Perpetual entry

HYGEINE AND MEDICAL JURISPHYpench.-A course of lectures on "Hethe slightest regard for his character as a geine," the first occasion on which the professional man, will think of expend-subjects included under that title have been ing his money at this notorious establish- made the topics of lectorial discourses-is announced to be given this winter by Mr. Farr, a gentleman of ability and acquire-THE EAR -A course of Lectures on the ments competent to the task, in the follow-Ear is advertised to be given at the Dispen-ing advertisement, the latter division of the sary, 10, Dean-street, Soho, commencing at course involving the various branches of medical jurisprudence : --

" An Elementary Course of Hygeine and of Medical Jurisprodence, by Mr. Farr. LECTURES FOR APOTHECARILS HALL - The lectures on Hygeine will commence on Mr. W. Meade, 32, King-street, Borough, Monday, October 19th; the second part of

very useful to pupils as an introduction to will, probably, from its novelty, obtain many their general studies. Mr. Meade also contained to give private instruction for the to medical science, the state of our knowledge and Hall. the history of the public health and of epi-Mr. Toase assists gentlemen in their demies, and the statistics of medicine genestudents. The application of physical science to therapeutic investigation is daily becoming more frequent among philosophers, and as much valuable information has recently been brought to light relative to the hygeinic operation of external agents. of important truths which demand to be made generally known, and may most usefully combined.

Sec. 3.

CHARING-CROSS HOSPITAL SCHOOL AND PRACTICE.*

Subjects.	Lecturers.	Days and Hours of Lecturing. Mon. Wed. Thur. Fri. at	Fces.					
			£	8.		£	8.	
Medicine.	Dr. Shearman.	li a. m.	١,	3	e.	r.	Ę.	
Mat. Medica.	Dr. Sigmond.	Mon. Wed. Thurs. Fri. at	"		. 60		3	
111101 111001011		4 p. m.	3	3	&	5	5	
M idwifery.	Drs. Golding and Chowne.	Tucs. Thurs, at 8 p.m.	3	3 3	ĸ	5	5	
Chemistry.	Mr. Mangham.	Mon. Wed. Fri. at 10 a.m.	4	4	&	7	7	
	Drs. Sigmond and Chowne, and Mr.							
		Sat. at 11 a.m.	2	2	å	3	3	
Anatomy, Phys.,	Messrs. Pettigrew and		1					
and Demons.	Lucas.	Daily at 2 p.m., and 21 p. m.	6	6	δı	8	8	
Surgery.	Messrs. Pettigrew and		}					
	Howship.	Mon. Wed. Fri. at 5 p.m.	3	3	&	5	5	
Morbid Anat.	Mr. Howship.	Thursday at 5 p.m.	12	3 2	Ř.	-1	-1	

* Accidentally omitted from page 8.

COLLEGE OF SURGEONS.

couire Candidates to bring proof-

- 1. Of being twenty-two years of age.
- iology, by attendance on Lectures and De-: the following order:nonstrations, and by Dissections, during ogy, occupying not less than one hour each, given on separate days; and at least 100 the 31st of July.

 Jenionstrations of the like duration, given

 First Winter Session. — Chemistry; Anaions, of which distinct Certificates are re- strations; Materia Medica and Therapeutics. mired.
- 4. Of having attended at least two courses of Lectures on Surgery, delivered in two listinct periods or seasons, each course to comprise not less than sixty Lectures.
- 5. Of having attended Lectures on the practice of Physic, on Chemistry, and on Midwifery, during six months; and on sotany and Materia Medica during three
- 6. Of having attended during twelve months the surgical practice of a recogsized hospital in London Dublin, Edinburgh, Hasgow, or Aberdeen; or for six months es of such hospitals, and twelve ny necesnised provincial Hos-

APOTHECARIES' HALL.

The Board of Examiners at Apothecaries' The Council of the College of Surgeons | Hall require candidates to attend the following Courses of Lectures:

Students whose attendance on Lectures 2. Of having been engaged five years in tober, 1835, will be required to produce he acquirement of professional knowlege. proof of having attended Lectures during 3. Of having studied Anatomy and Physithree Winter and two Summer Sessions, in

The Winter Medical Session is to be unwo anatomical seasons. An anatomical derstood as commencing on the first of cason is understood to extend from Octo- October, and terminating in the middle of ser to April inclusive, and to comprise at April, with a recess of fourteen days at cast 140 Lectures on Anatomy and Physio- Christmas; the Summer Session as com-

n a similar manner; exclusive of Dissectiony and Physiology; Anatomical Demon-

Second Winter Session. - Anatomy and Physiology; Anatomical Demonstrations; Dissections; Principles and Practice of Medicine; Medical Practice of an hospital.

First Summer Session .- Botany, and such other branches of study as may improve the student's general education.

Second Summer Session .- Botany, if not attended during the first summer session; Midwifery and Diseases of Women and Children; Forensic Medicine; Medical Practice of an hospital.

Third Winter Session .- Dissections : Principles and Practice of Medicine ; Midwifery, with attendance on cases: Medical Practice of an hospital or disugnsary.

The Student is also required to attend the Medical Practice of a recognised hospital, from the commencement of the Second Winter to the termination of the Third

The following are the PERPLEXATIONS, or "Regulations," which have been ordained at Rhubarh-Hall to bewilder those candidates for the license of the Company, who are severally circumstanced as below stated, and not now commencing their payments under the ticket-system for the first time: -

Students whose attendance on Lectures commenced prior to the 1st of February, 1828, will be admitted to examination in conformity with the Regulations published in September 1826, viz., after an attendance

One Course of Lectures on Chemistry One Course of Lectures on Materia Me-

dica. Two Courses of Lectures on Anatomy and

Physiology. Two Courses of Lectures on the Theory

and Practice of Medicine.

And six Months' Physician's Practice at an Hospital, or nine Months at a Dispensary.

Students who beyon to attend Lectures subsequently to the 1st of February, 1828, and previously to the 1st of October, 1828 in conformity with the Regulations of September, 1827), will be admitted to an examination after an attendance on

One Course of Lectures on Chemistry

One Course of Lectures on Materia Medica and Botany.

Two Courses of Lectures on Anatomy and

Physiology.

Two Courses of Lectures on the Theory and Practice of Medicine: these last having been attended subsequently to the Lectures on Chemistry and Materia Medica, and to and Children .- Two Courses. one Course at least of Auatomy.

And six Months, at least, Physician's Practice at an Hospital, or nine Months at a Dispensary; such attendance having commenced subsequently to the termination of in Morbid Anatomy. the first Course of Lectures on the Principles and Practice of Medicine.

Students whose attendance on Lectures commenced in October, 1828, must have complied with the Regulations of September, 1828, viz., by having attended

Two Courses of Lectures on Chemistry. Two Courses of Lectures on Materia Me-

dica and Botany.

Two Courses of Lectures on Anatomy and Physiology.

Two Courses of Anatomical Demonstraions.

Two Courses of Lectures on the Theory and Practice of Medicine : these last having been attended subsequently to one Course of Lectures on Chemistry, Materia Medica, scribed by the Regulations. and Anatomy.

And Six Months, at least, the Physician's Practice at an Hospital (containing not less than sixty beds), or nine Months at a Dispensary: such attendance to have commenced subsequently to the termination of the first Course of Lectures on the Principles and Practice of Medicine.

Students who began to attend Le tures in January, 1829, are required to have attended the Physician's Practice at an Hospital for nine months, or at a Dispensary for twelve months, and also to have attended

Two Courses of Lectures on Midwifery, and the Diseases of Women and Children.

Students whose attendance on Lectures commenced on or after January, 1831, must addree proof of having devoted at least 'wo years to an attendance on Lectures and Hospital Practice; and of having attended the following Courses of Lectures:

Chemistry .- Two Courses-Each Course consisting of not less than Forty-five Lec-

tures.

Materia Medica and Therapeutics .- Two Courses - Each Course consisting of not less than Forty-five Lectures.

Anatomy and Physiology. - Two Courses-Of the same extent as required by the Royal College of Surgeons of London.

Anatomical Demonstrations. - Two Courses Of the same extent as required by the Royal College of Surgeons of London.

Principles and Practice of Medicine,-Two Courses - Each Course consisting of not less than Forty-five Lectures, - to be attended subsequently to the termination of the first Course of Lectures on Chemistry, Materia Medica, and Anatomy and Physiology.

Bolany .- One Course -- Consisting of not less than Thirty Lectures, - to be attended between the 1st of April and 31st of Oc-

Midwifery and the Diseases of Women

Forensic 'Medicine,-One Course-to be attended during the second year.

Students are likewise earnestly recommended to avail themselves of instruction

The Candidate must also have attended, for Twelve Months, at least, the Physician's Practice at an Hospital containing not less than sixty Beds, and where a Course of Clinical Lectures is given; or for Fifteen Months at an Hospital wherein Clinical Lectures are not given; or for Fifteen Months at a Dispensary connected with some Medical School recognised by the Court. No part of this attendance can be entered upon until the termination of one entire year from the commencement of attendance on Lectures, nor until one course of Lectures, at least, on Chemistry, Materia Medica, Anatomy, and the Practice of Medicine, has been attended in the order pre-

Registration.- A book is kept at Apothecaries' Hall for the registration, at stated times, of the names of students

lectures, hospitals, attend.
All students in the life in the condition of the condition in sonally, and to register the sever for which they have taken tickets; and those finly will be considered to have complied with the regulations of the Court, whose names and classes in the register correspond with the testimonials of the teachers.

The book will be open for the registration of tekets authorizing the attendance of students on lectures and medical practice during the first twenty-one days of October, and first fourteen days of May, from nine o'clock until two; and for the registration of certificates of having duly attended such lectures or medical practice, during the last fourteen days of April and the first fourteen days of August.

Examination.—Every person offering himsolf for examination must give notice in writing to the clerk of the Society, on or before the Monday previously to the day of examination, and must also at the same time deposit all the required testimonials at the office of the beadle, where attendance is given every day, except Sunday, from nine until two o'clock.

The examination of the candidate for a certificate of qualification to practise as an apothecary will be as follows:—

In translating parts of Celsus de Medicina, and Gregory's Conspectus Medicine Theoretice:*

In Physicians' Prescriptions, and the Pharmacopæia Londinensis:

In Chemistry:

In Materia Medica and Therapeutics:

In Botany:

In Anatomy and Physiology:

In the Principles and Practice of Medicine.

The examination of a candidate for a certificate of qualification to act as an assistant to an apothecary, in compounding and dispensing medicines, will be as follows:—

In translating Physicians' Prescriptions, and parts of the Pharmacopecia Londinensis:

In Pharmacy and Materia Medics.

By the 22nd section of the Act of Parliament, no rejected candidate for a certificate to practise as an apothecary, can be re-examined until the expiration of six months from his former examination, and no rejected candidate as an assistant until the expiration of three months.

ares of children.

The Court meet is the Hall every Thursday, where candidates are required to attend at a quarter before four o'clock.

For information relative to these regulations, students are referred to Mr. Watson, who may be seen at his residence, 43, Berners Street, between the hours of nine and ten o'clock every morning (Sunday excepted).

It is expressly ordered by the Court of Examiners, that no gratuity be received by

any officer of the Court.

THE LANCET.

London, Saturday, September 26, 1833.

In some of the preceding pages of the present Number of THE LANCET will be found the announcements of the Medical Schools for the Session 1835-36. The statements which we have printed are taken from the prospectuses which have been issued by the conductors of the various establishments. We are not answerable, therefore, for what we have inserted, further than concerns the accuracy of our extracts. Heaven forbid that we should be answerable for the promises and pretensions of the lecturers! The bills of fare for the present year are, for the most part, screwed up to the last turn of extortion, in perfect consonance and keeping with the regulations which have been recently issued by the Apothecaries' Company. Oh those drugdealers of Rhubarb Hall! They will receive a dose of physic soon from another establishment, the effects of which will be permaneut, both upon their constitutions and their coffers. Never was there endured, in a civilized country, a more abominable system than that which affects to lecture a student into a knowledge of the practice of medicine and surgery. In the absence of statutory enactments no such abomination could have existed even for five years. It would have been broken down under the pressure of its own guiltiness. It is made up of falsehood, fraud, and avarice. Still, the students must bend to the existing re-

Students may undergo their Latin examination in these works at the commencement of their studies is sendion, by giving notice to the headle, at their resistantion, of their wish to the so. And situated their section of the sending and application to the sending sending an application to the sending sending and application to the sending sending and purposes an in-

plundered, -or they cannot, according to the decisions of some of our judges, become legally-qualified practitioners of medicine in any part of England or Wales. The moment, however, that they obtain their qualifications, they have it in their power, by the positions which they are enabled to occupy to contribute towards the overthrow of the system which, for a time, they are compelled to support by their unwillingly-paid funds We call upon them, therefore, to conform strictly to the " regulations" of the Boards of Examiners. And this demand upon their patience and good-temper is made in the hope of seeing them turn, as hundreds of their predecessors have turned, with vigour and boldness, upon the monopolists and the extortioners, for the purpose of effectuating that general smashing of the medical lecturing concerns, which have not only sprung up in the metropolis, but are now springing up, like so many foul fungi, in every part of the British empire. Is it not the boast of all our writers on medicine and surgery, that, from the seventeenth to the eighteenth century, the science of medicine had advanced with the most rapid steps of improvement? And yet, -hear it, ye lecturers and pretenders!-there neither existed then, nor in 1314, any such peremptory system established by law as exists now. Let those surgeons who are engaged in the practice of their profession in our country towns, and who have faithfully discharged the obligations imposed on them by the indentures of their apprentices, - let those surgeons, we say, refer to the bills of fare exhibite I in the preceding pages,-to the charges for the stale and stolen hashes of words which the students are compelled to purchase in this metropolis, or be excluded from the pale of the prefession. Let them observe, also, that no distinction whatever is made by the colleges, hospitals, and schools, between the instructed and uninstructed applicant. The young man whose mind is well stored with a knowledge of the principles an I practice of his profession, is compelled to expend as same terms, that

gulations,-must submit to be duped and i much time and money in this metropolic upon lecturing and ward-walking, as the individual who has never devoted an hour of his life to the consideration of professional subjects.

> Why, rather than that such a system as this should continue to flourish, it would be preferable for our hospitals and schools to be swept from the face of the earth. Why is the knowledge which the country surgeon communicates to his pupil, treated as nought by the extortioners of our colleges and companies? It is one of the grossest insults that was ever offered to a body of educated men. By the existing regulations, all the medical students in the kingdom, unless they have paid certain sums of money to other schools where the system of folly and of falsehood is carried partially into operation,-all the students, without exception, we repeat, are treated as so many dunces, -as mere beginners in the rudiments of medical education. What doctrine does this inculcate to the community? Why, that those surgeons who take apprentices are incapable of instructing them even in the very elements of professional knowledge. Thus, in the course of years, they are deprived of those fees which they are entitled to receive from their apprentices, because parents and guardians, naturally enough, contend, that if the knowledge which the student derives during his apprenticeship does not lessen the expense of a medical education in London, the money paid for the papilage in the country is, virtually, thrown away. Thus a flagrant robbery is committed on the great body of surgeons and apothecaries who are engaged in private praccice, and a most shameful injustice is inflicted on the student, who, during his apprenticeship, and under the able and generous guidance and instruction of his master, has succeeded in obtaining a practical and scientific knowledge of his professi With what show of reserve tended that the prentice should be treet

imposed on the one,-that no privilege qualify his pupil for the practice of the proshould be awarded to the other?

" "Oh, but there are prizes given in the schools! Look," some blockhead may exclaim, "at the splendid announcement of prizes which has just been made in the prospectus of the St. Bartholomew's school!" Bah! It is all humbug and quackery, and our legal authorities. Hence it is that we the lecturers know it. When are the prizes would entreat the whole of our medical awarded? Certain enough, at the end of students to comply with the terms which every session, when the last shilling has are laid down in the "regulations" of the been extorted from the pockets of the stu- examining bodies. The triumph of principle dent! And of what do the prizes consist? is about to be acknowledged. This, there-Why of "Books," written, we suppose, by fore, is not the time for making stumblingthe STANLEYS, the EARLES, the VINCENTS, blocks out of collegiate forms, or for hesiand genuises of that class. If anything could tating relative to the payment of a sum of display effectually the monstrous character money which is unjustly demanded, when it of this PRIZE FARCE, which has just been is quite certain that a non-acquiescence got mi as the new catch-fee of the day, it with regard to that demand may be conmight be seen in this fact, -that out of the verted into an instrument for one's own class which attends St. Bartholomew's Hos. rnin. A judicious course of policy, therevital, not less than thirty-seven students,- fore, requires that the students should comthirty-seven !- obtained at one examination ply with the conditions of the bonds which "nizes" and "certificates of honour;" have been framed for their "benefit" by and, to complete the picture of absurdity, the heads of our Colleges and Schools. At the distinctions were distributed by that the same time they are bound to see that knowing man MATTHEW PRYME LUCAS, the other contracting powers do not escape Esquire, Alderman of the City of London, from the conditions which are obligatory on -a somewhat better judge, we take it, of them. Punctuality of attendance should in turtle, than of the quality of medical attainments. If the lecturers had introduced the which have been made in the prospectuses practice of awarding prizes on the ground of rewarding merit, alone, by instituting a free and open competition amongst all classes of medical students, they would have established fellowships, or scholarships, in their schools, and would render the successful competitors free to the hospital and classrooms during their sojourn in the metropolis. In a mental point of view, we admit, this may be no reward; but it might relieve. at any rate, some of the students from a payment of fifty or sixty pounds for tickets ich are of no other value than that of insrementation the procuration of so

fession, but to insist, at the expiration of the apprenticeship of the pupil, that he shall be admitted to an examination for the diploma of the College, or the license of the Hall. After what has occurred we know that the right would be disputed by many of all cases be enforced, and where promises are not redeemed in practice, the delinquents should be at once unhesitatingly exposed.

It should be observed, that we do not direct our strictures against individuals, but against the odious ticket-system generally. We complain not so much of the lecturers as a body, as of the incorporated monopolists who have originated and sustained the LEC-TURING ABOMINATION for their benefit. That some of the teachers, and several of the hospital surgeous, are men of capacity and skill, we freely and cheerfully admit; but they do not command our respect, because they resistlessly allow themselves to be that every surgeon in the dragged through the mire by authorities d right not only to which they have it in their power to control. We do contend, however, that the | an examination for a surgical diploma and principles and practice of medicine cannot be taught by means of oral addresses. We care not what may be the lecturer's capabilities of speech,-what may be the extent of his information and his experience. It is not possible to convey correct impressions of disease to the mind through the ear, which should be imparted through the medium of another sense. The eye must be The deviations from normal employed. structure and function must be seen, before they can be adequately understood. Until, therefore, the rights of all medical men are placed on an equal footing with respect to the privilege of educating youths for the practice of medicine, we shall continue to exercise, fearlessly and unremittingly, whatever influence we may possess, in the hope of demolishing the ticket and certificate system of our incorporated hospitals and recognised schools.

(From a Correspondent.) - On Wednesday last an apothecary was elected by ballot (not by concours) at Westminster Hospital.

The numbers were as follows :-Mr. Thurnam 102 Mr. Alfred Hall 68

Majority for Mr. Thurnam 34

Mr. Thurnam, a member of the society of Friends, was the protegé of the Artillery party, of whom Dr. Hallam is the great gon, and Dr. Wood the chief bombardier. As the mode of election had nothing to with the merit and competence of the party to fill the office, we have no one to congratulate on the result of the competition.

A GREAT meeting of the medical men residing in the Eastern part of England was appointed to be held at Bury St. Edmunds yesterday, Friday, the 25th just , for the purpose of forming an Eastern Provincial Medical Association. The names of 150 medical gentlemen were attached to the requisition by which the meeting was called. The system of Poor-law contracts has been the ori ginating cause of the requisition.

UNIVERSITY OF LONDON AND COLLEGE OF SURGEONS.

To the Editor of THE LANCET.

the admission to compete for a chair in a medical school were ever before compared." Things may be unlike, while the principles whence they result admit and require comparison. Your remarks necessarily lead me to inquire on what principles the London University, and on what principles the College of Surgeons, were founded, and ought therefore to have been conducted. It will then be seen in which of the two bodies the conductors have most deviated, and in what direction, from those principles. The London University was established, and the sum of 10,000l. was subscribed, for the advancement and promotion of literature and science, and for the purpose of affording opportunities of attaining such branches of knowledge as were not previously taught in London; and it was declared that candidates for professorships should be treated with such strict regard to justice, that a difference in competency, even so slender as the hair that turns the halance, should determine the choice. Have these principles really been acted upon? The facts will speak for themselves. A large portion of the funds was expended upon a building, of which the dome alone cost about 20,000%. That building has since been mortgaged partly to erect an hospital, the officers to which were appointed without even the form of an election. Those branches of science, such as moral philosophy and jurisprudence, which required endowment and support, and which it was one of the first objects of the proprietors to cause to be cultivated, have been left unprotected. The professors, who should have been elected with such nice regard to justice, were chosen in a manner the least conducive to justice and impartiality. If these things have resulted from the management of the London University, its conductors must have deviated from the principles on which it was founded, and surely the deviation has been in the wrong direction. After this turn to the College of Surgeons.

That corporation was embodied by charter, and if its conduct has been in accordance with the principles of the charter, the Council must stand acquitted of the serious charges of misgovernment which the directors of the London University have incurred. More than this: it cannot be denied that the changes made of late years by the College of Surgeons, have been marked by increasing justice and liberality; and, to revert to the case in question, the Council there acted upon principles to have charter itself seems to have while the Council of the Louis Taivers wanner distant of the Council of the Counci SIR,—Your comments on my letter of last week induce me again to address you. "You much doubt," you say, "if two former might not be least to the their might not be least to the comment of the last the same to the last the same to the last the same to the last the

TLINICAL LECTURE

ON CASES OF

NJURIES OF THE ABDOMINAL

AND

PELVIC VISCERA.

ANDREW ELLIS, Esq., M.R.C.S.I.,

Surgeon to the Jervis Street Hospital, and Lecturer on Surgery in the School of Auat., Med., and Surg., Peter Street, Dublin,

Gentlemen,-Ibeg your attention whilst I read an abstract report of a few cases which bear on the subject of the symptoms, pathology, and treatment, of injuries of the abdomen, and which have been selected from the case-book of the hospital for the purpose of illustrating those points.

CASE 1 .- Stabbing Wound of the Stomach. John Lawiess, aged 26 years, was admitted. into the hospital at nine o'clock p.m., on the 28th of December, in consequence of his having been stabbed with a knife by his brother, with whom he had been quarrelling. On admission he appeared to labour under the combined effects of the wound and drunkenness; he was weak, with pale sunken countenance, and quick pulse; he vemited repeatedly a considerable quantity of blood mixed with food. The wound was situated near the umbilions; it was about an inch and a half in length, and through it a piece of intestine of a pinkish colour protruded. The patient was now put to bed, and an attempt made to reduce the intestine, but this it was found impossible to accomplish in a perfect or satisfactory manner; it could be returned with moderate facility through the wound in the integnments, but instead of passing through the opening in the peritoneum and thence into the cavity of the abdomen, it went into a pouch or recess formed between the membrane and the abdominal muscles. During the efforts made ! to restore the intestine, he was very rest-less and unmanageable, bolding his breath, and otherwise resisting the efforts made to relieve him. It was now deemed advisable to have an enema administered, and a vein opened in the arm: when about twenty ounces of blood were drawn, the bowels were affected, and he became quite exhausted and pulseless, the skin being covered over with cold perspiration. Whilst in this state of synapse, the protruded intestine was returned into the state of the cold into th The fact of none of the contents maxing.

bandage, which was applied with a moderate degree of tightness. This being done, the patient was placed in a posture calculated to relax the abdominal muscles.

29. He has slept but little during the night, vomited three or four times, and complains of exquisite pain in the abdomen. which obliges him to scream whenever he makes a full inspiration : he cannot bear to be moved or touched in the slightest degree; the countenance is sharp and anxious, tongue brown; excessive thirst; pulse 140, and no secretion of urine. He was bled again to the amount of thirty ounces, and ordered three grains of calomel and half a grain of opium every hour.

2 o'clock p.m. The bleeding produced fainting; he has been exceedingly restless since the last visit, and suffered much from thirst and vomiting; the bowels have been moved, but no secretion of urine has taken place; at present he lies in rather a torpid state, with much heaving of the chest; the respirations are forty in a minute; the pulse is exceedingly quick and almost imperceptibly small.

30. He died at six o'clock yesterday even-

Autopsy.-On examining the body sixteen hours after death, it presented the following appearance. There was a small quantity of blood, but no food, effused into the cavity of the abdomen; and a wound about half an inch in length was found in the stomach, situated two inches from the pyloric orifice, and, consequently, much above the level of the external wound. There was no other viscus wounded, and the usual effects of peritoncal inflammation were but imperfectly marked.

Remarks .- There are a few points connected with this interesting case to which I beg to call attention. In the first place, it may appear to you somewhat strange, that the stomach should be the only organ wounded when the knife had entered the abdomen so low down as the umbilicus; however, when you call to mind that the situation occupied by the stomach must in a great measure be determined by the various degrees of plenitude or vacuity to which it is liable, that which, at first blush, appeared abstruse and unaccountable, becomes at once simple and intelligible. Now, be it remembered, that this unfortunate man had been drinking before the accident occurred, and that he subsequently vomited up food as well as blood. Under these circumstances, it is obvious that the stomach was distended, and conseonenty encroached on the umbilical region. at the moment the wound was inflicted, but when discharging its contents it contracted. and thereby withdrew itself from the ex-

is a strong proof of the accuracy of the explaintion. I gays the (FANCET, No. 629, page 753, when speaking on the subject of abdominal extravasations, and the steps taken by nature to prevent their occurrence were discovered in the cavity of the abdomin cases of wounds of the hollow viscera. The influence of the enema and blood-flatus, and the peritoneal coat was of a letting of the cavity of the abdominance of the enema and blood-flatus, and the peritoneal coat was of a

which originally forced out the bowel, and matter. subsequently resisted its return; whilst the Remarks.-It may appear remarkable that cause of dissolution.

men and vomiting, which continued during the night. On the morning of the 7th he pale, auxious, and indicative of great sufthe pulse could not be felt at the wrist; the and he was incessantly tormented with an case of abdominal injury. insatiable desire for cold drink. The usual treatment for such distressing symptoms was employed, but in vain; the poor fellow Rupture of the Duodenum. died at eight o'clock the next morning, July, Eliza Healy, aged there year

letting in facilitating the return of the bright rose colour, except where covered protrided intestine, reminds us of what we with lymph, which was shed in grea: quanfrequently see take place in cases of stran-tity. The execum was dark-coloured and gulated hernia.

The state of syncope to which the patient lower extremity an aperture, with irregular was reduced by loss of blood, had the effect ragged edges, merely of sufficient size to of producing general relaxation, and, conse quently, of overcoming the muscular action. There was no extravasation of feenlent

chema, by exciting the inverted action, or in this case the patient was able to walk to antiperistaltic motion of the intestines, con-tributed to its replacement. It has been dent occurred; and that it was not until very properly noted down that the usual some bours afterwards that he was attacked effects of peritoncal inflammation were but with bad symptoms; whereas, in the case of imperfectly marked; I am disposed to attri- Lawless, violent symptoms were established bute this circumstance to the early depletion at the moment the wound was inflicted, and the patient underwent, and the short time continued without intermission until he he survived after the accident. You may died. In reference to this point I beg to ob-regollect that the wound itself gave rise to serve that it is a fact, very generally ada very considerable hemorrhage, and that, mitted, that the degree of shock imparted in addition, forty or fifty ounces of blood to the constitution in consequence of injuwere taken by the lancet in the course of ries of the abdomen, is in the direct ratio of a few hours afterwards. On the whole, I, their relation to the solar plexus; that is to should be inclined to account for his death | say, the nearer the injury is to that importby saying that the constitution sympatheti-lant and vital part, the more deeply will the cally sunk, both in consequence of the loss constitution sympathize at the moment of of blood, and the serious injury done to a the accident, and the greater the danger to very important organ, rather than state that be apprehended, as to the ultimate terminaperitoneal inflammation was the immediate tion of the case. If you acquiesce in the correctness of this doctrine, you can readily comprehend why Lawless, who was Case 2 .- Crushing of the Abdomen .- wounded in the stomach, got no quarter Rupture of the Cacum .- The next case to from the moment of the accident; whilst which I wish to call your attention is that Donohoe, whose esecum was ruptured, hid of J. Donohoe, a drayman, who on the 6th not suffer from bad symptoms for some of July, whilst leading his horse through hours after the infliction of the injury, when the street, was caught, and severely crushed, peritoneal inflammation set in, and finally between the wheel of his own and that of became the more immediate cause of death. another dray, which were passing in opport Allow me again to remind you of the fact, site directions. Soon after the accident he that Lawless lived but sixteen hours after he walked to the lospital, where he arrived at received the wound, and on examination of two o'clock p.m. Having got some instruc- the body it was ascertained that the usual tions and medicine, he walked home and effects of periton al inflammation had been went to bed. In the course of the evening but imperfectly established; we must, therehe was seized with violent pain in the abdo- fore, infer that in this instance the patient simk partly from loss of blood, but more especially from the direct effects of the inwas carried to the hospital, being now to- july on the system at large; or, in other tally unable to walk; his countenance was words, from what Mr. Travers would call "constitutional irritation." I will now read fering; the skin was cold and clammy, and a case which tends to support the validity of the opinion already expressed as regards abdomen was tense, and would not bear the the influence which the relation of the solar slightest pressure; the vomiting had ceased, plexus to the local mischief may have in a

the ligh of

thrown down in the street by a dray, the fied, and assume a dark-red colours and wheel of which passed over her body; she grenous spots will that on the integral was carried to the hospital in about an hour ments, through which, should the patient afterwards; on admission she was exceedingly weak and exhausted; the countenance pale and the eyes sunk; the pulse quick and almost imperceptibly small; she seemed unwilling to answer questions; was extremely restless, constantly tossing her avidity, had frequent retching, but nothing came up from the stomach; there was no tenderness of the abdomen. She gradually became more and more exhausted, and expired in four hours after her admission into the hospital.

Autopsy .- On examination twelve bours after death, the peritoneum presented a healthy appearance, but a few cherry-stones. mixed with alimentary matter, were found in its cavity. When these substances were removed, a small rent was discovered in the mity of the spleen was likewise ruptured, there was however very little blood extravasated; all the other viscera were perfectly natural.

Remarks .-- You will observe that this was a case in which the injury was situated quite in the neighbourhood of the solar plexus, and that the patient never recovered from the first shock of the accident; the peritoneal inflammation.

those of ruptured bladder, but before we discuss them individually, I feel that a few observations on the subject of urmary extravasations in general would not be misplaced, and that they might be instructive titioner, when satisfied that extravasation to the junior part of my hearers.

ruptured; should blood pass from the ex- exit, and therefore will not become dif-ternal orifice soon after the accident, the fused through the neighbouring parts. re can't no doubt but extravasation has been as the control of the time enormously tume- reous incrustations which usually form on

survive, sloughs of the cellular membrane. saturated with a mixture of urine and illconditioned matter, will escape. Whilst these changes are taking place locally, the patient's constitution suffers severely; symptomatic fever becomes quickly established, limbs about in the bed; she drank with he feels hot and restless; complains of headache and thirst; the tongue is covered with a brownish tenacious matter; the secretions generally are diminished; and the pulse is very frequent. As the case advances, all these symptoms become worse; delirium and coma set in; the tongue is now dry, black, and contracted; the skin is often at this stage of the complaint covered over with a urinous sweat; the pulse becomes exceedingly small and intermittent; and, finally, death closes the scene.

If the description I have now given of descending portion of the duodenum, through the usual effects of urinary extravasations which they had escaped. The lower extre- caused by rupture of the urethra be correct, you must at once perceive the necessity of attention and decision on the part of the surgeon, and the fatal consequences which are likely to ensue, either from diffidence, hesitation, or ignorance, on his part. You should keep constantly in mind the pernicions effects produced by urine when brought in contact with any of the living animal textures, save the skin and mucous immediate cause of death cannot, therefore, membranes. In accordance with this view be fairly attributed either to loss of blood or of the subject, you should consider such a case as I have supposed to occur to be of The next cases for our consideration are local origin, but of a most dangerous tendency; you should, therefore, when called on, in the first instance, apply yourselves to the source of the evil.

Taking this view of the subject, the prachas actually taken place into the cellular Urinary extracasations may be suddenly membrane of the perineum and scrotum, produced either by blows or falls on the should introduce a silver catheter as far as perineum; or on the abdomen, if the bladheam, without using much force, into the der should happen to be distended at the mrethra; in all probability that will be down time of the accident. For example, let us to the laceration; he should now with a suppose a case in which a sportsman, whilst knife or scalpel make a free incision through in the act of riding his horse over a fence, the tumefied parts, until he has exposed the loses his stirrup, and is, accordingly, thrown catheter at the rupture in the urethra. By forward on his perincum with all his weight this means the urine already effused will be against the pommel of the saddle. Now, drained out of the cellular membrane, and in a case of this description, there is much in the event of any more escaping from the reason to suspect that the arethra has been aperture in the arethra, it will have a ready fused through the neighbouring parts. patient in attempting to pass water feels as This being done, the metallic instrument if he were emptying the bladder, yet none should be withdrawn, and a gum clastic escapes externally; and if the attempt were catheter should be introduced into the bladstended with a swelling of the scrotum, der, and retained there by a suitable appa-

its vesical extremity, until the breach in the quence of the great straining produced by urethra shall be considered up. The constitutional treatment of a case of this · description must vary in different instances, and be determined, in a great measure, by the sort of person affected, the character of the symptoms, and the stage of the complaint. For example; if the accident happened to a plethoric young man, and was succeeded by the ordinary symptoms of inflammatory fever, there can be no doubt as to the propriety of employing antiphlogistic remedies in the first instance; but let us now suppose the case to be far advanced, the scrotum in a decidedly sloughy state. The constitutional symptoms here change their character, and resemble those of a bad typhus fever. Here the constitutional plan of treatment should consist chiefly of stimulants and tonics: such as camphor, carbonate of ammonia, with small doses of opium. Mild nutritious wine, such as claret; or if the patient were in the habit of indulging largely in malt drink, porter or ale may be administered with advantage. I have never found bark in any form useful, nor do I believe that it does much good in any case where the tongue is covered with a dark dry crust, and the stomach disposed to nausee or irritability. The best local applications for this stage of the case, are warm dressings, and the fermenting poultice.

I have just now placed before you, in a familiar manner, the ordinary symptoms and treatment of a case of extravasation of urine, having supposed it to arise in a healthy young man, in consequence of a rupture of the urethra. Let us now take another view of the subject, and assume that the accident had happened to an old fox-hunter of dissipated habits and broken-down constitution, and inquire if the symptoms and treatment would, or ought to be, precisely the same in There certainly will be no reboth cases. markable difference in the local symptoms, and they should be treated by the catheter, incision, and poultice, as in the former case : but the antiphlogistic plan of trentment will not be applicable in this instance at all; on the contrary, the patient should be watched closely from the commencement, and as soon symptoms of debility shall appear, the treatment I have recommended for the second stage of the former case should be at once adopted in the latter.

You will occasionally meet in practice, cases of extravasation of urine in children, and inasmuch as they differ in some respects from those I have described as taking place both in young and old men, I feel it my duty to make a few observations on this subject.

The usual cause of extravasation in children, is the giving way of the nrethra, in consequence of a small calculus having become firmly impacted in it when on its way from the bladder. The breach in the canal sometimes effected by rupture, in conse- mentioned "that Corrections

the irritation of the foreign body, and the urgent desire to pass water, which is now mechanically resisted, and at other times it is, I believe, the result of alcerative absorp-tion, which has not been preceded by the adhesive inflammation. However, be that as it may, my present object is merely to apprise you of this fact, that the urine of children, being chiefly composed of water. does not, when extravasated so speedily, produce the same destructive consequences to the cellular membrane through which it may be diffused, as in the cases of adults, or old persons, which I have already described. When apprising you of this pathological fact, I do not wish to convey the idea that you should be less vigilant or attentive in your treatment on that account; on the contrary, the cause of extravasation (the calculus) should be removed as quickly as possible, and a free incision made into the distended parts, in order to allow the effused urine an opportunity to ooze out of the cellular tissue with which it has com-I pronounce the word " noze" emphatically; for you must not expect, that a rudden gush of nrine will take place when an incision is made into the affected part; this never happens unless the extravasated fluid is confined in a circumscribed cavity, which does not often occur. After the incision a poultice should be applied, but I never found it necessary to introduce a catheter in the case of a child; and, indeed, I think it a very fortunate circumstance that such a procedure can be dispensed with; for, if it were absolutely necessary, it would be extremely difficult, if not impossible, to retain it quietly in the bladder. The observations which I have now made refer merely to such urinary extravasations as occasionally take place external to the abdomen and pelvis. I trust I have said sufficient to prepare you for the fatal consequences which are to be expected when similar effusions occur within those important cavities. With a view to illustrate this part of our subject, I beg to call your attention to a few cases of ruptored bladder.

CASE 4 .- Rupture of the Bladder from a blow. - William Corry, aged 26 years, a currier by trade, was admitted into the hospital on the 19th of March, at 11 o'clock p.m., under the following circumstances. When brought to the hospital he was stupidly drunk; his friends stated, "that he had; been drinking all the day, and that towards evening he had suffered much from a desire and incompetency to pass water; that he subsequently got into a row, and that they believed he had been struck on the belly with a watchman's relative was quite in-possible to obtain any diagraction from himself; but Mr. Cullen, who doubted him.

tacks of retention of urine, from spasmodic stricture, when he was guilty of any debauch, a Full.—James Cod, aged 29 years, a sera heavy sleep.

thirst, heat of skin, quick pulse, and inability fore it. He was placed in hed, and a catheter to pass water. The catheter was introduced, was introduced, but nothing came away but and drew off about a pint of healthy urine; a small jet of blood. he was bled, purged, stuped, &c. &c., yet the retching, which had been moderate and lowed up by warm fomentations.

Twelve o'clock. The symptoms have induced constant; the abdomen was very creased in violence: the abdomen is very were met as the circumstances of the case seemed to indicate; blood-letting was frequently had recourse to, both by the lancet and leeches; blisters were applied, and the nouth was slightly affected with calomel; the atheter was introduced three or four times very day, but never brought away more han an ounce of urine at any one time, excepting on the second day after his aduission into the hospital. All the sympoms gradually grew worse; the countenance became exceedingly sharp, and exressive of internal distress; the pulse very small, and the abdomen enormously tumeied; there was much general emaciation und debility; and on the fifteenth day after he accident, death put a period to his proracted and exquisite sufferings.

Autopsy .- On opening the abdomen six mours after death, the following appearances vere discovered. The intestines were very nuch distended with flatus; the peritoneum was hut slightly vascular, with a few unall patches of lymph on its surface; lowever, the cavity contained between two and three gallons of pale urinous fluid. ()n

and that he had frequently relieved him by vant; whilst riding a spirited horse on the drawing off the urine." On examining the evening of the 31st of August, the aniabdomen, it did not appear to be particularly mal became restive, reared up, and fell full or tense; however, it was deemed ex- hackwards on the rider. He was much pedient to introduce a catheter, but no shocked at the time, felt weak, and sick, arine came away. The stomach pump was and was immediately conveyed home and next employed and brought up a large bled by an apothecary; in about two hours quantity of liquid, which appeared to be a after the accident he was brought to the compound of whiskey and porter. He was hospital, and on admission he looked pale now placed in bed, and immediately fell into and auxious, his skin was cold and his pulse slow and weak; he expressed a desire to 20. He slept soundly during the night, pass water, but was incapable of doing so. but is at present very feverish; complains It was ascertained that he was tipsey at the of pain in the lower part of the abdomen; time of the fall, and that he had not evacuis affected with headache, foul tongue, ated his bladder for a considerable time be-

Sept. 1, five o'clock a.m. He is very he was hied, purged, stuped, ac. ac., yet his sufferings were mitigated only in a restless, complains of intense pain all over milling degree. The fever continued for the abdomen, and is much tormented with wo or three days, without undergoing any hiceup. He was ordered twenty-four leeches important change; at the end of this time to the abdomen, their application to be fol-

unid, tympanitic, and tender to the touch; tense, and exquisitely painful; the pulse as breathing was harried and oppressed i 120 and hard; the bowels confined, and the was exceedingly restless, and occasionally dusing to pass water proper. The eatheter a was exceemingly restress, and occasionally desire to pass water urgent. The catheter uffered from hierup, and had a constant was again introduced, and brought away lesire to pass water. These symmtoms was again introduced, and brought away lesire to pass water. These symptoms nothing but a small quantity of blood. He was ordered to be bled from the arm to the amount of ten onness, and to have forty leeches applied to the abdomen, and an emollient injection.

> Five o'clock. The leech-bites bled profusely; the bowels have been freed, and he passed a small quantity of urine without the catheter; the pain in the abdomen is less severe.

Sept. 2, nine o'clock a.m. Bowels free; passed some urine; pain in the abdomen inconsiderable; however, the prostration of strength is very great.

Five o'clock. He seems to be quite exhausted, with sunken countenance; cold perspiration; pulse scarcely perceptible, about 180 in a minute; respiration 60, and laborious; he still complains of some pain in the abdomen.

3. He died at six o'clack vesterday morn-

Autopsy .- The abdomen was examined three hours afterwards. It contained about a quart of reddish fluid, which emitted a urinous smell: the peritoneal coat of the the country of the little-finger intertines was vascular, but there was no maining the bladder, a vent, capable of intestines was vascular, but there was no maining the extremity of the little-finger intertines found in its interest of patterior part, there is a country of the peritoreum; the margin of the peritoreum; the margin of the cavity of the peritoreum; the margin of the opening did its its interest anything re-tailed the parts of the bladder inmediately around it bladder itself was perfectly empty, and contracted into a firm ball.

Remarks .- I have thus read to you two very interesting cases of ruptured bladder, together with a description of the appearances exhibited at the nost-mortem examinations; and now, before we separate, I wish to make a few general observations regarding those cases. In the first place it must appear somewhat strange to you, that the bladder should have given way in both instances in that part which is covered by peritoneum. Now, this is not a mere accidental or coincidental circumstance, for, in every case that I am acquainted with in which the bladder gave way in consequence of falls or blows on the abdomen, the rupture took place in the peritoneal region of the organ. In support of this statement, I beg to refer you to two very important cases of this description, which have been published in the second volume of the "Dublin Hospital Reports," by Doctor Cusack. The only explanation I would venture to suggest, is the anatomical fact, that the superior and posterior regions are weaker than the other parts of the bladder; inasmuch as they do not receive any support from the reflections of the pelvic fascia; Whilst the peritoneal covering, which is comparatively thin and delicate, and being, in common with all serous membranes, devoid of clasticity, it is, therefore, incapable of accommodating itself to violence suddenly applied; consequently it yields only by the laceration of its proper structure.

The next point to which I am anxions to call your attention, is the difference which exists between the local consequences that result from urinary extravasation into the cellular and serous tissues. I have already mentioned to you that inflammation and mortification are the usual effects when it takes place in the cellular membrane; now I beg to state that in no one instance with which I am acquainted did mortification ensue from urinary extravasation into the cavity of the peritoneum. Judging from the usual effects of injury or irritation on that very delicate and sensitive membrane, it appears to me very extraordinary that in cases of ruptured bladder, in which the peritoneum is wounded and brought in contact with a very acrimonious fluid, it should be discuss, I trust yo rather slow in taking on inflammatory ac- placed. tion, and capable of effectually resisting its gangrenous consequences. In the case of

Cod, which ended fatally on the third day after the accident, the usual effects of peritoneal inflammation were but imperfectly marked; and in the case of Corry the patient lived to the fifteenth day, and the post-mortem appearances would scarcely warrant us in saying, that the distressing symptoms under which he laboured during his illness were solely the result of peritonitis. Dr. Creack's patients died on the eighth day after the accidents, and the appearances presented by dissection were, with the exception of the manatural vesical openings, and the consequent urinary cfusions, those usually resulting from peritoneal inflammation.

Gentlemen, here I wish to apprise you of what, in my judgment, is a very crroneous opinion, as regards the state of the peritoneum in fatal cases of inflammation of this membrane. It is generally stated by authors who treat of peritonitis, that the sudden cessation of pain, which usually precedes a fatal termination, is a sure sign that mortification has actually taken place. Now, I wish you to understand that my experience of this disease, and the dissections I have made of persons who have died of it, induce me to arrive at an opposite conclusion. With the exception of one or two instances, I have never been able to find gangrenous spots in the peritoneum, when examining the bodies of persons who have died of inflammation of that membrane; I am, therefore, disposed to think that it would be more in accordance with the principles of correct pathology, to consider this absence of pain as indicative of a fatal loss of sensibility, rather than a positive assurance of structural disorganization, and chemical decomposition. For my own part, although it may, perhaps, appear too figurative to say so, I look on the sudden subsidence of pain in those cases, as the incipient ebb of vitality; or, if you will, the first stage of death.

The reason why scrous membrane is more capable of resisting the gangrenous effects of inflammation than cellular membrane, in cases of urinary extravasation, is in my mind easily explained by reference to the relative degrees of vitality, which they both possess. When you consider that the former is much more highly organized than the latter, you will not feel surprised to hear that the peritoneum may resist the disorganizing consequences of an inflammation which would prove destructive to the component parts of the scrotum. Gentlemen, you may probably consider that my observations to-day have been of a very desultory and heterogeneous character, but when you reflect upon the variety of topics, and the numerous cases, which is the my daty to discuss, I trust if the discuss, I trust if the discuss of the content of the c

4.00

CASE OF CATALEPSY

COMPLICATED WITH

HYSTERICAL SYMPTOMS.

To the Editor of THE LANCET.

Sin,-Having read with considerable advantage the two cases of catalepsy recently reported in THE LANCET, I am induced to forward to you the following case of the same affection, which, if it he considered interesting enough, I beg you will insert in your truly independent periodical. I have the honour to remain, Sir, yours respectfully.

John J. Kelso, M.D. Lisburn, Sept. 14, 1835.

Miss B., et. 19, is of a delicate make of body, with light-brown hair, fair complexion, and of a nervous temperament. Previous to the commencement of her present illness, she enjoyed, for the most part, tohrably good health. On the 21th of December, 1834, I saw her for the first time, and found her in the following condition: She was of conscioueness and sensibility; the muscles of the extremities &c. were quite flexible; the respiration about four in the minute, the heaving of the chest being scarcely recognizable; occasionally, a short expiration, with a sigh or a moan, succeeded to a deep and sonorous inspication. Pulse 60, fluttering and weak; skin rather cold and exsanguincous. Intense cophalalgia, as evinced by the occasional involuntary application of her hands to the forebead, which she would violently press until they were removed by some of the attendants. Eyelids closed, and on being raised up, the eyeballs are found strongly turned upwards; pupils dilated and fixed. Peculiar placidity of countenance. Catamenia &c. regular. This cataleptic state persisted for about nine hours, terminating in a confused sleep. The prostration at one time was so great that it was thought she would sink, the pulse having become imperceptible, and the respiration for nearly two minutes wholly suspended. Dr. Thomson, who had previously seen the case, had ordered a fetid enema, and leeches to the temples.

27. The catalepsis, which is almost continual, is now announced by the loss of command over the voluntary muscles, the head falling back, the eyes closing, and the other taking sulphate of quibine, which has been increased to Di daily, with hut little benefit.

A taking sulphate of quibine, which has been increased to Di daily, with hut little benefit.

March 27. For the last few days the fits the strongest stimuli; health was improving with her appetite,

headache relieved by the leeching, but sometimes excruciating; tongue clean; appetite good.

30. The fits to-day are hardly so frequent, or of such long continuance. During the attack she sighs or moans frequently, and, if mild, music will attract for a little her attention. The striking of the clock, too, will occasionally make an impression upon her, the strokes of which she will accurately count. On recovering from the seizure she instantaneously regains possession of all her faculties, and during the intervals between the paroxysms her spirits are good, and she employs herself in reading. Headache teasing, and there is globus hystericus. Restless nights. Sumat Tinet. Humuli 3ij, hora somni.

Jan. 5, 1835. The beadache and globus hystericus are peculiarly distressing during their existence, and for an indefinite time after the passing off of the fit. Pain of a neuralgie nature is felt in the course of the infraorbitar nerve, and she frequently experiences tooth-ache, which always aggravates her

state. No other alteration.

Feb. 15. On those days on which the fits are fewer they are invariably longer protracted, and rice rersa. They have assumed a periodical character, invading at one lving extended on her back, perfectly mo- o'clock and at seven p.m., persisting genetionless, with complete deprivation both rally at cach time for about three hours. During the rest of the day she is completely exempt from their attack. She has been taking the earb, of iron, which has been increased to 5viij daily, without producing much benefit. It may be remarked that the morning which is ushered in with violeut headache, invariably effects an irritability of temper, with a protraction of the tits, and an increased amount of suffering generally during the whole of that day. Appetite defective; bowels preserved relaxed by suitable aperients. Sleen still to he solicited by the anodyne.

> 27. The fit is announced by the fixing o her eyes on some imaginary object, either on the ceiling or the wall, which she w continue, as it were, attentively examining with a smile or a laugh, pointing to it at th same time with her finger. In this attit. she will remain until recovering from th scizure, when a convulsive tremor ensues, with the effusion of abundance of tears and frequent sighing. To-day the recovery from the fit is aunounced by a difficulty of obtaining breath, as it were, accompanied with a violent and frequent heaving of the chest, so that the respiration would appear to amount to 90, or more, in the minute. This state persists for three or four minutes, and then passes off in sighing. She has been taking sulphate of quivine, which has been

ever, she became suddenly and unexpectedly improving, from a residence, for these last worse. The catalepsis was preceded by a general convulsion, which lasted for nearly an hour. If she happens to be in the erect posture when the convulsive paroxysm invades, she becomes so rigid as to render abortive any attempts to hend her: again, if she be reclining, the flexor muscles of the trunk, by an instantaneous and violent effort, will elevate her into the semi-creet state. There is tenderness in the spinal column generally, but especially acute over the which is evidently depressed, and all the lumbar vertebræ. Pressure, if practised on any of those tender parts, excites acute pain and a sense of constriction, as if the body was ligatured by a cord; it invariably ev-Hirudines x dolent, partibus dorsi.

the body. Bowels &c. natural.

elevated, with a remarkable frequency and resulting from the displaced vertebra, which posture.

the convulsion and jactitation, entirely gave But although the displaced way in the beginning of July. The cata-turning to its appropriate

from the taking of exercise. To-day, how- | lepsis is yielding, and her general health is two months, at the sea-shore. I may mention that about a month since she experienced an attack of toothache, which so much aggravated her state as to render the catalepsy almost continual for the then four consecutive days. The tenderness in the spinal column has nearly disappeared, and the displaced vertebra is fast returning to its natural position.

Remarks.-The case just detailed I consixth and seventh cervical, the tenth dorsal, sider not only interesting but instructive, from its intimate connexion with acute spinal irritation, and the palpable displacement of one of the dorsal vertebrae. Although we find hysterical symptoms frequently, if not invariably, associated with cites a fit, or the convulsion terminating in catalensy, -affections, it may be observed, it. It was mentioned to me now that about not very dissir iter in their nature and seat, tightmonths previously, a tumour, of the size it can hardly be supposed for a moment of a fowl's egg, was developed, at about the that they originate from an analogous situation of the depressed vertebra, but discounse. It is pretty generally admitted, that - it can hardly be supposed for a moment appeared after some time, spontaneously, irritation, in what yer assumer excited, act-Intense headache, with feverish excitement, ting on the origin of the spinal nerves, in [predisposed habits, is the pranary and chief 30. The convulsive paroxysm, which is cause of the development of hysteria; but not so furious, is sumetimes alternated with since that affection presents itself so frejactitation. In some of the violent parove quently in the absence of every cataleptic ysms she will commence crying immode-isymptom, the pathologist most search after rately; the crying being occasionally after- some other cause, or series of causes, that nated with violent laughter. Nights dis-turbed by alarming dreams, rest not being tion. What has been here advanced, howprocured, as was wont, by the anodyne, ever, does not in the least militate against There is general screness over the surface of wint must be acknowledged as a fact, in my patient's case, viz., that irritation in the April 5. The catalensis very frequent, medulla spinalis, or the origin of those lasting for about ten minutes, and the connerves is using from it, excited trans whatvulsion or jactitation which always precedes surver cause, was an essential link in the chain it, about six minutes. The nights are not of causation, for the high degree of tenexempt now from the fits, which the least derness in particular parts of the spinal mental excitement will produce. The pant- column, on making the least pressure, so ing respiration frequently recurs, during suddenly set up on the 27th of March, which the chest and abdomen are alternately a from improduct exercise, with the irritation violence. Spine very tender. Habeat most was then detected for the first time, were chi grs. vi, ter die. To keep the recombent accompanied by a marked aggravation of the catalepsy &c., and the development of May 5. An uncontrollable propensity to the convulsive paroxysm. The intensity of straight-forward progressive motion during the affection, too, yielded on instituting that the existence of the catalepsis. Spine less appropriate treatment for the removal of tender, from repeated leeching, emping, and the local irritation, which being in great blistering. Pulse not affected during the measure effected, the convulsive fits and jactitation, which was occasionally violent. 20. The tendency to straight-forward pro- entirely ceased. It is to be regretted that gressive motion has disappeared. To this the spinal column was not subjected to an has succeeded a rotatory, whirling, round- earlier and accurate examination respecting about motion, which is always executed its real state. It must, however, he quite from right to left. During the fit she will evident, that the irritation or inflammation continue, to all appearance, reading, or fol- which led to the slight angular curvature, lowing any employment she may have been must have existed for some time, and very engaged in prior to its occurrence. Much probably from the period of the existence of the tumour on or hear man place, which september 1. The rotatory motion, with was, as reported, about eight months before

ther parts of the spine has nearly disappeared, the catalepsy still persists. This nay arise, I think, as much from the mor-oid habit established in the system, as from the continuance of the cause which originally called it into existence.

The headache, all along a peculiarly prominent and harassing symptom, may be Rwed as sympathetic on the spinal irritation, and the straight-forward and rotatory motions are referable, I conceive, to irritation influencing the origin of more or fewer of those nerves which are subservient to locomotion.

With regard to the treatment of the case. those means which were employed for combatting the local irritation in the spinal region were the most beneficial. The inter-nal remedies were not equally efficacious. These were chiefly carbonate of iron, quinine, camphor, ether, and musk; and although several other things were prescribed, she obstinately refused taking any of them.

. CASE, PREQUENTLY

SIMULATING HYDROPHOBIA.

To the Editor of THE LANCET.

Sir, - In the number of The LANCET published on the 29th of August last, I saw an article entitled "Remarks on Pseudo-Hydrophobia, by Dr. Hare," I must certainly agree with the Doctor in thinking that the case related by Mr. Tomkin in THE LANCET for August 15th, was "one of those mysterious neuralgie diseases which medical men sometimes meet with;" and a case fell under my observation last year which the remark of Dr. Hare brings to my recollection. I remain, Sir, your obedient servant.

J. L. M'CARTHY, M.D. Macroom, Sept. 14th, 1835.

A young and fine-booking man, a soldier in the 70th Regiment, belonging ton detachment of that corps quartered at Millstreet, about fourteen miles from the place, was sent in here by the apothecary in charge of the troops at Millstreet, for the purpose of being transmitted to head quarters in Cork. Lieutenant Jameson, commanding the detachment of the 70th, which was quartered here, called on me and begged that I would go and see this young man, who he said was reported to him as having hydrophobia.

icute Cenderuess experienced there and in a convulsive fit, struggling violently, howling and barking like a dog. He attempted to bite at every thing placed near his mouth, and the slightest blast of cold air, or the sprinkling him with any kind of fluid, aggravated the fit. His respiration was extremely irregular and convulsed, and he frothed considerably at the mouth. At the same time he was, to a great degree, conscious of what was going on, and would, when the snasm nermitted, answer questions that were put to him. He complained of great pain in the back of the head, along the spine, and in the epigastric region. The sergeant of the party told me that the fit had now lasted nearly an hour, and that the patient would soon fall asleep, as he was showing signs of faintness. I staid with him about half an hour, when the convulsions gradually abated, and he sank into a deep natural sleep. I then felt his pulse, and found it full, hard, and counting 97. The sergeant who had accompanied him from Millstreet told me that his bowels were most obstinately constinated.

I recommended Mr. White, an apothecary in this town, who had the medical charge of the troops here, to have him bled freely, and to give him a strong bolns of calomel jalap, camphor, and ginger, to be followed by an enema containing castor oil and oil of turpentine. Mr. White, however, did not think proper to follow my advice, and did nothing for the patient, simply reporting the case to the chief military medical officer in Cork, in order to have the man removed to the General Hospital.

When the patient awoke from his sleep, which had continued for four hours, I again went to see him, and obtained a history of his case. He told me, that when a boy about ten years old, he was bitten in the hand by a dog which was supposed to be mad. The dog was killed immediately afterwards, but it was not properly ascertained whether the animal was really rabid or not. The wound became very sore, and festered. It was canterized by a surgeon, and then tormented by the application of various continents, and at last, being ultimately left to nature, healed, and cicatrized in about three weeks. The accident occurred in the month of Jamary, and some time in the following May he was attacked with symptoms so like those of hydrophobia, that the medical man who attended him at once pronounced it to be that disease. He did not recollect any-thing of the treatment he then underwent; but in about a week from the commencement of the attack he completely recovered. He had then two of the convulsive fits in the twenty-four hours, and they were, he said, precisely of the character of the one which I accordingly with Mr. Jameson to I saw. He further stated, that the convulthe harracks, and found the patient bound sive fit was always preceded by a sense of the harracks, about swisted round suffication, tightness across the chest, a He was then in heavy weight at the epigastrium, extreme

difficulty of deglatition; and a feeling of hor- | could with safety pronounce whether a ror at the sight of fluids; but that when the fit went off, he found himself quite well, but exceedingly weak, and able to swallow both fluids and solids, with the same facility as when in a state of health. He was at that time in his 19th year, and he said that he had, since his first illness, experienced an attack of this disease regularly every spring, and also sometimes in the autumn; during the intervals he always enjoyed robust health. His illness was always pre-ceded, for some days, by constipation and irregular digestion, which also accompanied the attacks, and free purging gave him the greatest relief.

He remained here for nearly a week in this state before he was transmitted to Cork, and the fits were daily getting worse, as no treatment was adopted. I afterwards learned, that being put into the Cork General Military Hospital, he was bled and purged, and perfectly recovered.

I asked this young man why he barked and howled while in the fits, and he told me that he always fancied there was a troop of mad dogs about him, but that in every other respect his mind was unaffected. He said that two medical gentlemen who had attended him in two different attacks, both stated that his case was one of hydrophobia, and was cured by them.

I consider this affection to be one analogous to the hysteria in the case related by Messes. Tomkins and Varenne, and to have been originally caused by the bite, and the irritable treatment of the sore, afterwards recurring from habit and disorder of the digestive functions, the affection assuming a periodicity in its type.

HYDROPHOBIA.

REMARKS BY MR. VARENNE ON THE ARTICLE BY MR. YOUATT.

To the Editor of THE LANCET.

SIR,-I should feel obliged if you would insert in your valuable pages the following brief remarks, which bear reference to some observations on a case of supposed hydrophobia, contained in your 624th number.

A point of interest, with respect to hydrophobia, rather overlooked by the writer of those observations, remains yet to be examined; and that is, how long before decided symptoms of that disease make their appearance in an animal, is that animal capable of affecting the system of man or of case are never so constant, in all cases, that take place in the circumstant even an experienced and skilful veterinarian that the numerous

"sickly dog" was capable of producing hydrophobia by its bite or not. And herein consists the difficulty; for it has happened, as most people are aware, that, sometimes, at the period of inflicting a wound which has afterwards proved mortal, the animal has been actually unsuspected; and therefore we may conclude that in the woman whose case has been the subject of controvercy, the symptoms having been plainly those which are considered to be normal by the generality of medical authors, the circumstance of the dog not being mad at the period of his death, is no certain proof that the system of the patient was not affected by his virus. Had she died, perhaps the case would not have been considered so doubtfist.

When we consider that the slight scratches made by the dog's tooth, appeared inflamed on the 8th of August, after having been completely healed since the 24th of the previous July, it must be acknowledged that there was something more in the wound than is usually met with in simple abrasions of the skin, whether caused by a dog's tooth, a nail, or otherwise; and also when we pass in review the concurrent symptoms, there seems to be some, it not strong reason, in opposition to the opinion of Mr. Youatt, for the assection that there were decidedly symptoms of hydrophobia in the person attended by Mr. Tomkins and myself. I have the honour to be your obedient servant, E. G. VARENNE.

Kelvedon, September 17, 1835.

ON THE NATURE OF

INFLAMMATION AND IRRITATION.

To the Editor of THE LANCET.

Sin,-In requesting the favour of your allowing the subjoined paper to occupy a space in your Journal, some apology is necessary for adding to the number of attempts to explain the nature of inflammation, the more so, since the present inquiry is far from being complete. It forms merely a link which could not with propriety be excluded from a series which will hereafter compose a work on the treatment of inflammatory and febrile diseases. I am, Sir, yours respectfully,

HENRY SKARLE, Kennington, Sept. 19, 1835.

In the various descriptions which have other animals with the disease in question? been given of the section of inflammation, It may not be impertinent to state, that the so much importants had been ascribed to symptoms of what is called the latent dis- the changes which have been supposed to

appeared on the subjects have been raised | ever been since briached. Hunter's explaupon the alleged changes. One condition nation of the action of the arteries cannot in particular has attracted, an I even rivet be admitted by any one acquainted with tool, the attention of physiologists-viz. the physical science; he goes so far as to reverse turgescence of the vessels, o casioned by the order of nature, describing the natural the augmented columns of hi and. Tur- circulation to be accomplished by the active greeence of the bloodvessels has always contractions of the arteries, but the cirbeen considered the sine qua non of inflam- culation concerned in inflammation to be mation; the redness, swelling, pain, and achieved by their active dilatations. This rally attributed to the increased quantity of turgescence has been very little considered, blood in the inflamed part, and its cause otherwise it could not have been so well rehas been supposed to be identical with the civied. Since the microscope has been so proximate cause of inflammation. It is such employed in the investigation of the therefore not surprising that the grand circulation, the doctrine of obstruction has point of ioquiry should have hinged upon again become prevalent. this turgescence.

with their respective modifications. The is true, that on the targescence of the ves-former, the doctrine of obstruction, was sels depends the chief, if not all the external, first broached by Boerhaave, who attri- signs of inflammation, and on this very acvessels too small for their transmission, re- the key to the true theory of inflammation. unired an increased action of the heart and arteries to overcome the obstruction. Culthe obstruction to the vessels themselves, instead of to the blood, and attributed the

obstructed circulation have since appeared; cating the existence of inflammation. debility in various degrees, even to atony of the small arteries, has taken the place of spasm, an increased action, however, of the tial to these productions, many familiar exlarger arteries being retained as an essential part of the hypothesis.

The other leading hypothesis-viz. that the turgescence arises from an augmented flow of blood through the inflamed part, not the effect of an intermediate inflamma-was established by Hunter. There were tory process of the bloodvessels. In irriseveral reasons for this doctrine obtaining tative fever, as it is called, collections of our almost universal assent; it was described by teachers as consisting of a simply increased action of the arteries, including those leading to the inflamed part, as well monons inflammation; but so soon as these as those engaged in the inflammatory action; the simplicity of this view readily superseded the incompatible notions of an obstruction of an angmented flow of blood coexisting in different parts of the same formed without betraying any symptom of chain of vessels; surgical facts daily confirmed the idea of an augmented flow of blood through the inflamed part, and the appa- ceptions to the general rule, yet they suffirent increase of vascularity was an almost ciently prove that the morbid productions positive proof this being the case. The of inflammation do not depend either on authority of the atteries, or on

On reviewing the different hypotheses this turgescence. The turgescence can arise only from an respecting the nature of inflammation, on obstruction, or from an augmented flow, of common error presents itself, viz., that of bloud through the vessels; and from the endeavouring to trace all the phenomena of views taken of these two opposite states, inflammation to a particular state of the cirhave originated the two leading hypotheses | culation; but such a state does not exist. It buted the accumulation of blood, forming count it has been the stumbling-block of the turgescence, to an error hed of some of many distinguished men, who have vainly its particles, which, becoming impacted in sought for the cause of the targescence as

It is supposed that inflammatory action occurs in the following manner:-That an len modified this hypothesis by ascribing adequate excitement of the nerves of the part causes certain changes in the circulation of the blood, evinced by the more usual proximate cause to "a spasm of the extreme signs-redness, tumefaction, pain, and inarteries, supporting an increased action in creased heat, and that this particular state the course of them." Various modifications of this doctrine of tion of the various morbid effusions, indi-

> In order to prove that a preliminary stage of inflammatory action is not essenamples may be given. In cases of scalding, the effusion takes place immediately on the application of the stimulus of heat, as the direct effect of the nervous excitement, and sometimes occur in distant parts of the hody without being preceded by redness, throbbing pain, increased heat, or other sign of phlegcollections produce a certain degree of distention, their existence is indicated to the patient by the unensiness they create. In the same manner chronic abscesses are often arterial irritation.

Although these examples form mere exnedical classes as Huntar was not likely to any other change in the circulation, but that his own day; various they are the results of a morbid function of the secerning vessels. It is true that a local

excited action of the arteries mostly precedes the morbid effusions, but it would appear that these are distinctly different effects of the same cause: for, an increased action of the arteries alone, or a morbid function of the secenting vessels alone, or both these effects conjointly, may arise from one and the same cause. The following comparison between irritation and inflammation will tend to elucidate this view of inflammation.

IRRITATION consists in a simply excited action of the minute arteries, unaccommunied by derangement of their secerning extremities,

INFLAMMATION oppears to consist essentially in functional derangement of the secerning ressels, which, in most instances, is accompanied by an increased action of the

Simple arterial irritation occurs under a great variety of circumstances. It may be momentary-the most transient and trivial deviation from healthy to higher vascular action is witnessed in the blush occasioned either by mental emotion or gentle friction; - or it may be durable-the crythematons patches or mucous membranes irritated by the contact of vitiated secretions, may exist for years without assuming a strictly inflaminatory character.

This simple vascular irritation may be cither local or general: it may present itself diffused exanthematous form of rubedla, or of scarlatina.

General vascular irritation may occur either in paroxysms or in continuous forms. The paroxysms may be produced by mental emotions, by taking certain stimulant and sudorific medicines, cordials, as wine, spirits &c.; they may be induced by a sudden check to the circulation, such as is occasioned in cold bathing; they are often periodical, as in intermittent and hectic fevers. The continuous forms are observed in pyrexia. Many other examples of increased action of the whole arterial system might be given, in which no particular functional derangement of the secerning vessels can be connected with it, so as to constitute inflammation.

INFLAMMATION appears to consist essentially in functional derangement of the secerning vessels, combined, in most instances, with the arterial irritation already described.

According to this definition of inflammation, the morbid action of the secerning vessels is the essential part of the inflammatory process. So inessential, indeed, is arterial irritation to the existence of inlymphatic glands, abscesses, adhesions, tubereles, interstitial depositions, accumulations of lymph, serum, or pus, opacities, indurations, softenings, and other organic changes; any of which may take place without a sign being evinced, even to the patient himself, of the existence of the slightest arterial irritation. How incorrect then, and at the same time how delusive, a definition of inflammation is that which limits it to an increased action of the arteries, that arterial irritation often occurring without inflammation, and inflammation sometimes existing without any apparent arterial irritation! Consequently no fixed correspondence is preserved between the supposed cause and the effect, if such a relation can be established between them.

Inflammation distinguished from irritation.-Inflammation is in general more durable than irritation. Inflammation is almost always idiopathic. Irritation is very frequently sympathetic. Inflammation is always local; irritation may be either local or general. Irritation often exists without inflammation, but the latter is usually preceded and accompanied by the former, same cause, in different degrees, may produce either simple irritation or inflammation. For example: if a portion of the skin be subjected to the influence of friction during a minute or two only, simple arterial irritation will be the result; but if it be as a more crythematous speek, or in the subjected to the same agent during fifteen or twenty minutes, inflammation also will take place, and a blister be formed; anger may occasion merely a momentary irritation of the vessels of the brain, or it may produce a decided phrenitis. So any other cause, as heat, may occasion a temporary irritation of the arteries only, or its influence may extend to their secerning extremities, and disorder their function, constituting inflammation. Irritation may be in sympathetic connexion with inflammation. For instance; a suffused redness of the face and neck may coexist with cynanche tonsillaris; or an erythematous patch on the check may attend inflammation of a tooth or of the gum on the same side, and various cutaneous irritations may accompany gastro-enteritis, or other internal phlegmasia; but the most extensive and dangerous form of sympathetic irritation, is that which is connected with acute visceral inflammation, and presents itself under the character of inflammatory fever.

Acute inflammation in a part is always accompanied by irritation in the contiguous parts, and these diseased actions sometimes preserve a distinct coexistence in different flammation, that various changes of struc-ture occasionally take place without any For example; the subarrancellular tissue appreciable increased action of the arteries. Most unequivocal results of inflammation while the mucous members of inflammation are sometimes discovered in the head, chest, and although a sometimes also consider the solution of the soluti and abdomen; such as enlargements of the be explained on the

increased vascular action constitutes inflammation. In this case the submucous tissue, the seat of inflammation, becomes changed in structure,-the mucous membrane, the seat of irritation, continuing in its natural condition. In the same manner the cellular tissue of the liver may become inflamed and thickened, or any kind of deposition may take place into it, the lobules at the same time being in a state of mere icritation or active congestion, and secreting bile natural in quality and quantity.

7

RESEARCHES INTO THE DISEASES OF CHILDREN.

CONDUCTED ON THE

KNOWN PRINCIPLES OF ANATOMY AND PATHOLOGY.

WE intend to publish at intervals, in the numbers of the present and ensuing volumes cough was moist, and did not at all present of The Lancet, a series of cases illustration for the most important diseases of chillittle harsh and hoarse. The disease dedren, observed at the Hôpital des Enfans clared itself suddenly on the night of the lieve, in Europe, in which children of from the following symptoms: three to fifteen years of age are received. Our reports of these cases will, we expect, he very acceptable to British practic land a moderate access of sufficient. The tioners, to whom we present them as original access was soon repeated, and lasted for a communications, drawn up with great care, with a view to recording facts from which important practical rules in the treatment obstructed respiration. The latter, in the of the diseases of children may be drawn. In mentioning that these cases are expressly and accompanied with forced dilatation of reported for publication in our own columns, we do so simply to prevent any erroneous impression which may chance to be created with regard to the authority of reports of foreign cases in an English journal, in consequence of a habit which has prevailed in cannot therefore note the character of the some quarters, of extracting hospital cases from a Parisian contemporary (the Lancette Français) without acknowledgment. -- a piracy which has excited much complaint from their author in the French journal.

commence the series this week by giving the following case, to which we take the opportunity of attaching the name of its Athor, a gentleman of extensive acquirements and great research in medicine, and well competent distance and apply the facts which and onthology can

HOSPITAL OF SICK CHILDREN, PARIS.

INFLAMMATORY CROUP .- TRACHEOTOMY .-CURE OF THE CROUPAL SYMPTOMS .-DEATH FROM CAPILLARY BRONCHITIS ON THE NINTH DAY AFTER THE OPERA-TION --- AUTOPSY.

ALEXANDER GUYON, a boy four years of age, was received into the hospital under the care of M. GUERSENT on the 2nd of June, 1835. The parents of this child are both healthy, but he himself is in general subject to ill health; his chest is very narrow, and the sternum projects slightly forwards from lateral compression of the chest; the child however does not cough habitnally. For the last six or seven days the child has been affected with the symptoms of common catarrh, to which latterly some feverish symptoms were added. He was seen in town, on the morning of the 2nd, by a physician, who did not say any thing about croup, or seem to suspect the existence of this disease: at five o'clock in the evening the interne assures me that his Malades, in Paris, the only hospital we be 2nd, and at nine o'clock on the morning of the 3rd, the little patient presented us with

The face, which is habitually pale, is now few minutes, during which the child is very much agitated, tosses about from side to side in the bed, and suffers evidently from intervals of the fits, is laborious, abdominal, the nostrils, fourty-four in the minute: a sonorous raic passes in the back of the narcs. The child coughs a little, every now and then, for a few seconds at a time, but the cough has not the crowing character remarked in croup; he does not speak, we voice. The motion of the child when the access of suffocation comes on is very characteristic: he begins to writhe about in the bed, cries, and endeavours to obtain the npright position, but when taken up and held at the window, the fit very soon goes off. In accordance with our arrangements we The crachoir (tin spitting-cnp) contains a quantity of nearly clear-coloured serous fluid, in which we observed floating a portion of white false membrane about three quarters of an inch long by a quarter of an' inch broad. On examining the back of the fances we find a small patch of the same pseudo-usembranous concretion covering the left amygdala. The chest sounds well upon percussion, we think however there is some little matity on the right side above and

souffic bronchique in other parts of the aii; simple lavement; diet. chest a rûle sibilant. The skin is very moist 5. The second day after (and warm, pulse small, 140, respiration passed nearly in the same state as the now 48.

On examining the patient M. GUERSENT pronounced the disease to be croup, and ordered the operation of trachcotomy to be performed without delay. The little patient was carried at once into a neighbouring room, and the operation performed by the interne. The child lost some blood from the division of the veins about the lower edge of the thyroid gland, which scemed to us also to have been divided for a few lines, and before the canula could be introduced into the trachea, a good deal of blood had made its way into this tube, and brought on such a fit of coughing and suffocation that we thought every instant the child would have died under the knife; this state, however, fortunately went off after one or two violent accesses; the canula was introduced, and the patient quickly restored from a condition of the greatest agitation and suffering to comparative calm: in a few minutes after the operation, the pulse, which, counted immediately before, gave more than 140 beats, fell to 116, the respiration descended from 48 to 32, and we left the child enjoying a quiet sleep.

4. When we first saw the patient this morning, he was lying asleen; the face was free from moisture, the skin not very warm: the respiration sufficiently calm, and accompanied with a gentle dilatation of the nostrile, 36; the pulse still small, 152. The child soon awoke, and M. GUERSENT coming in, we learned that the chibl had coughed a good deal during the night, and passed some large portions of false membrane through the canula. This latter tube now became stuffed with thick mucus, and the child was seized with a fit of suffication very analogous to those we observed before the operation; the face does not become purplish as then, but the child makes violent efforts to respire; his whole hody is bathed in sweat, and at each effort the air, mixed with mucus, hisses through the canula with amazing violence; in a few seconds the canula hecame pretty free; the respiration was then less difficult, though M. Guer-SENT says the breathing is almost as oppressed now as it was before the operation. The canula was now cleaned with a morsel of sponge on a bit of whalebone; this caused some agitation, and the pulse rose to 156, respiration 44; a great quantity of greenish muens, mixed with little or no air, is driven through the tube at each expiration; the child is not very weak, for he stands up in bed without support. Skin org. Antim. gr. xvi. alk and water. noist, not very hot. The crachoir contains several portions of false membrane expectorated during the night; one of which is at played for a true for the standard water. least two inches long. Decoc. Malva for ing, when he we

posteriorly: at this point we have some drink; Solution of Gum with Ox. Antimo.

5. The second day after the operation was former; the respiration, however, became somewhat less embarrassed; the patient discharged from time to time through the canula complete tubes of false membrane, as if derived from the second bronchial division. Decoc. Matric; Solution of Gum with Oxy. Ant. xv gr.; simple lavement.

6. The patient looks much more calm to. day than yesterday or the day before; his respiration is also much less laborious, is regular, 38, a few minutes after the cannia was cleaned; the patient passed several hours last night in a state of perfect calm; at each expiration a small quantity of greenish mucus is driven as far as the orifice of the tube, but not forcibly beyond it; the appearance of the wound, which is about two inches and a half long, is good, but the skin is somewhat retracted from the edges. and leaves the subcutaneous tissue bare; the child had a fit of coughing during the visit, which brought away some false membrane; the fit was slight, continued only two or three seconds, and did not give rise to any coloration of the face or mouth; however, we may remark that to a non-medical person or parent Ac., the child would have appeared to suffer excessively, from the circonstance of his making all the motions which accompany cough in the ordinary state without opening his mouth, or of course producing any sound whatever; the skin is moderately warm, moist, and in some parts covered with sweat; the skin of the forehead is much warmer than that of the face, but not more so than that of the hands or the rest of the body; pulse 144; two stools during the night; in respiration the lips do not maye, but we observe a curious physiological phenomenon which we did not notice before, and which, as far as we know, has not been remarked in other histories of this operation. The unstrils move, evidently as if the patient respired through the month and nose, but on close examination we find this motion, though pretty regular, is not exactly that of respiration, nor corresponds exactly with each elevation of the chest; the dilatation, er, to give a better idea of the motion. the elevation of the nares, corresponds pretty nearly to each inspiration, but on the whole is slower, and every now and then the nares when drawn up make two or three short fluttering inspiratory movements and then subside; for the last two days the respiratory sound has been obscure at the summit of the right lung. Decoc. Malow ; Sirup of Gum ; Sol. Gom.; with

arly this morning was 120 to 124; is now at home. The inspiratory motions of the has had no fit of coughing this morning, wound looks well, does not suppurate; the nd his respiration is now sufficiently free; cervical and submaxillary glands are not tupassed some small fragments of false membrane last night through the canula; broth. his morning he ate half a biscuit with some Oxid. Antimon, xviii gr.

8. The fits of suffocation now no longer false membranes have been passed; the pa- broth. lient is now very feverish; skin burning hot; pulse 111 (this morning at one o'clock t was only 120 to 128); great thirst; respiration not much oppressed, 48; the nostrils whibit the same motions as yesterday, corespending very nearly with expiration; no ir whatever passed through the mouth r nose. M. Guersent observed that he cared the child was now evidently affected oth another disease than that for which the peration was performed, and would die med of his croup. Dervet. Mair v : Ox. Intere, xviii gr.; lavement; milk.

9. The child does not cough much,—only hree or four times in the course of the day; the child looks much better than bepanging out the camda in the trachea); the child was not very thirsty during the brane. hight; the respiration not laborious, is irrepdar, 48; skin moist and very warm, as efore; he has not expectorated any false embrane since; a greenish mucus is still ischarged from the canula, but after it was caned out with a sponge two or three lines, we observed that the nateus expecprated became rosy; the patient has eaten one current jelly with great relish. Oxide lulimony xviii gr.; currant jelly.

10. Seventh day after the operation. The hild lies perfectly quiet in bed, and pre-Ints a strong contrast to the agitated state which we found him on the first day of is disease; the respiration, though a little nick (38) and irregular, is not difficult. The unda was stopped this morning for an our; he hore this very well, and the inrne says his respiration immediately beone more slow and easy. The cough has uch diminished, the patient now only ighs to expectorate some mucus; is less ty; skin still moist, but excessively ; pulse sharp, pretty strong, 132; face lost all appearance of agitation; not y pale; the children with some appearance of agitation; not y pale; the children with some appearance of the children was passed to the children with the children was passed to the children with the children was passed to the children with the children was passed to the children was passed to the children was passed to the children with the children was passed to the children was passe

28; the respiration 32 to 36; the patient nostril are now much les perceptible; the

11. The patient has coughed very little appetite; the skin is moist and very slightly during the night; skin not so warm as warm; there is still some dulness of sound yesterday; pulse 120; respiration 48; on ansand absource of vesicular respiration at the cultation we hear some dry crepitating rale summit of the right lung. Same remedies; in the right lung posteriorly; the canula has been stopped several times since yesterday, and the interné again assures us exist, but the child had a long and violent fit that the respiration becomes more slow of conglining during the visit; the canula during that time; skin not very warm. Wine hoes not discharge much mineus, and no new an I water; Ox. Antim. gr. xij; chicken

> 12. The canula was removed yesterday, and has not been replaced since; the cough is not distressing or frequent; however, the respiration has been embarrassed from time to time, especially during last night. It is now a little difficult, 48; pulse small and very rapid, 136; skin rather cool. The child has had a good deal of diarrhea; five liquid stools; tongue white, but moist and not foul. From this time the child began to sink rapilly; the respiration became more difficult, and he died without convulsions during the night.

Autopsy at ten o'clock on the 13th of June.

Carity of the Chest .- The left lung looks ore, and lies quite quietly in his bed; little healthy externally; the right lung is of a appetite; pulse now 140, was only 116 this mottled red colour in front, and adheres morning (perhaps from irritation caused by to the parietes of the chest, anteriorly and laterally, by a pretty extensive false mem-brane. There is no effusion into the cavity of the chest. The trachea when opened does not exhibit any trace of false membrane; there is no inflammation immediately about the edges of the divided rings, but about two inches lower down than the inferior angle of the incision, there is some irregular capillary injection, with two or three points of ecchymosis in the lining membrane; there is also some ecchymosis above the wound, with some capillary injection round it. The whole of the bronchi, from origin to termination, are deeply injected, and when divided near the surface of the hour they discharge a moreo-purulent fluid. and seem somewhat dilated; no false membrane in any part of trachea or bronchi. On again examining the trachea we perceive on the right side of the incision that the mucous membrane is of a rosy colour, for about one inch in length by a half in breadth: the menibrane then exhibits a vellow colour, as if it had been bathed in pus for some space down, and then the membrane again becomes injected about an inch above the division of the bronchi. The whole inner surface of the traches is rough to the feel, and looks cools, one of here and there as if the nincous membrane mears that had been removed, but there is no trace irtying his bed | whatever of ulceration. When the summit

of the right lung is divided, it presents a Here and there some of the tubercles are gray-yellow colour, from the inditration of softened, and discharged their pus ento the tubercular matter; the appearance is different from that of Igray hepatization; the tissue is here soft, and yields under the finger with readiness; on the right lung brane; nor do we find any in the pharynx; also, about a quarter of an inch from the surface of the lung, and situate near the lower edge of the part adherent to the cost larynx externally, i.e. the crico-arytenoidal tal surface, we find a tubercle, in a crude surface, is very much injected, purplish and state, about as large as a five-sons piece; wrinkled like a piece of half-dried parch; and near the supmit a number of smaller; ment. No injection or annearing of false and near the summit a number of smaller ment. No injection or appearance of false tubercles. Here some points of the lung membrane about the larynx or cordæ vohave a solid feel, and are much engoue, but cales. do not give way under the flugor, or present the dark colour of an hepatized lung. Inferiorly in this same right lung the small softened, but presents no trace of inflambronchial tubes are excessively injected mation. There was nothing worthy of detailwith a deep-red capillary injection, and the jing in the viscera of the abdomen or head, tubes, when the lung is squeezed, give out a quantity of bloody mucous fluid, mixed here and there with some pus from certain of the bronchi. Between the upper and middle lobes of the right lung behind, we find some false membrane, which partially unites them together, and also to the side of the chest. tent, the substance of the lung round the Hepatie disease in India. By W. E. E. Contubercles is very red, and excessively solid; well, M.R.I.A., M.D., Surgeon of the Madras it does not yield under the finger, but tears Establishment. 8vo. p. 531. Duncan. readily, and sinks rapidly in water. The left — A Series of Botanical Tables, and Tables crude tubercles, but no appearance of in- Maps. Longman. flammation of the pulmonary tissue; the cut into, but not solid, or impervious to air. Enlarged; pp. 413. Simpkin.

of the right lung is divided, it presents a Here and there some of the tubercles are

P. H. GREEN.

BOOKS RECEIVED.

A Treatise on the Functional and Struc-The whole of the base presents the same tural Changes of the Liver, in the progress appearance as the upper part, except that of disease; and on the agency of Hepatic it is somewhat more dark than the gray-yel-derangement in producing other disorders. low colour above, and the tubercles are more With numerous cases, exhibiting the invasoft. At one point, about four inches in ex- sion, symptoms, progress, and treatment, of

lung is in general healthy, i. c. free from of the Materia Medica, designed for the use appearance of pneumonia. At the summit, of Students preparing for examination at particularly, there is a great number of small Apothecaries' Hall. With Engravings and

Martinet's Manual of Pathology; transbase of the left lung is much engoue when lated by Dr. Quain, 4th Edit. Revised and

The second secon METEOROLOGICAL REPORT.

(Extract from a Meteorological Journal kept at High Wycombe.

Lat. 51° 37' 44" North, Long. 34° 45" West.)

Days.	Thermometer.		Barometer.		Rain.	Wind.	Weather.	
1 .	Highest.	Lowest.	Highest.	Lowest.	Ins. Dels.		W Canality	
Sept. 14 15	66.50 63.50	46.50 39.25	29.65 .62	.47	0.2	S.W.	Fine throughout the day. Heavy rain in the evening.	
18	61.25 59. 51.	39.25 36.25 51.	.51 .52		0.98125	S. S. S.E.	Fine throughout the day. Fine. Morning fine; rain afternoca:	i
19 20	63.75 66.50	52.25 45.25	.31 .42	.35	0.10625	S. S.	Reduct intervals.	2

Sept. 22, 1835.

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THE LANCET.

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LONDON, SATURDAY, OCTOBER 3, 1835.

T1835-36.

RESEARCHES INTO THE DISEASES OF CHILDREN.

CONDUCTED ON THE

KNOWN PRINCIPLES OF ANATOMY AND PATHOLOGY.

HOPITAL DES ENFANS MALADES. PARIS.

CROUP.

In France the name of "croup" is confined exclusively to inflammation of the larynx and trachea, accompanied by a pseudo-membranous exudation. During the last five years this affection had been extremely rare at the Hopital des Enfans, and not more than three or four cases were observed; but it presented itself much more frequently in the course of the year 1835, during which we have observed no less than ten cases, affecting children from two to six years of age. The treatment employed in the majority of these cases consisted in the use of emetics, purgatives, local bloodletting, and cutaneous revulsives (blisters to the pole or front of the neck, to the superior or inferior extremities, &c.) The operation of tracheotomy was performed four times, and always accompanied by a momentary improvement in the symptoms, but the cases have nevertheless been fatal; in two patients death took place about thirtysix hours after the operation, once in fortyeight hours, and in the fourth, whose history we have already published (see p. 29), the fatal termination did not arrive before a lapse of eight days. In some of the cases shove enumerated the diagnosis was atbove enumerated the diagnosis was at of a hourse dry cough; alteration of the tended with considerable difficulty: thus, in voice, which is weak and barking; pulse one case, we have the physician attached accelerated; skin hot; intelligence perfect. to the hospital makes the croup for an plottidis); we nader the chin.

have also seen a case of simple inflammation of the larynx and trachea mistaken for croup; we shall report the latter case after having detailed one which did not present the slightest doubt, from the well-marked symptoms by which it was accompanied.

CASE. - Child five years old. Cough and hoarseness at the commencement; emetic; amelioration for two days; then alteration of the timbre of the voice; croupal rough; expectoration of false membrane; two applications of leeches to the neck; frequent emetics. Death on the seventh day; membranous concretion in the larynx and trachea; puriform mucosities in the bronchi.

Delorme Antoinette, a girl five years of age. of a good constitution, was seized on the 21st of August, together with one of her sisters aged two years, with cough and hearseness, and dyspuces. A physician being called in, prescribed an emetic for both the children; the accidents increased rapidly in the case of the younger child, who died with the symptoms of croup in three days. The elder sister felt some relief from the effects of the emetic, which persisted on the 26th and 27th, but on the following night she was seized with a frightful access of dyspnæa, which determined the parents to transport her to the hospital. the patient's arrival she was immediately given an emetic, which produced copious vomiting, accompanied by efforts to cough; in the midst of the matter thrown up was found a morsel of false membrane, organized, and as large as the thumb nail.

29. At the visit in the morning we found the child lying on the right side; the head thrown back; the face pale; the neck tender; the cervical glands on the left side engorged; pseudo-membranous concretion on the amygdala of the same side; respiration siffiante, twenty-eight per minute; fit

Ten leeches along the centre of the neck

B. Tart. Antimped Potass. gr. j.; Syrop.

Ipecacuan 3j. Orymei Scyllæ 3ss. To be taken in three portions. Tisan de

CASE 2.— Simple Laryngo-Tracheitis Kistaken for Pseudo-membranons Laryngiits.

— Child three years old; pain in the throat Mauve ; diete.

The patient appeared to have been much weakened by the application of the leeches. The two first portions of the emetic draught were given, with an interval of a few hours; these produced some vomiting, and towards evening the child had several accesses of suffocation; the pulse rose to 160.

30. The child's state seems a little improved, she answers the questions addressed to her, asks for something to cat, and says she feels no pain anywhere. The timbre of the voice is still strong, and the respiration more sonorous than yesterday; cough croupy; pulse 120; respiration 30; tongue moist; the child has not been to stool for the last two days. Purgative lavement; four leeches to the neck; emetics; sinapisms to the lower extremities; milk. During the day the child was seized, from time to time, with fits of suffocation, which on the 31st were repeated almost without interruption, from five o'clock in the morning to nine o'clock, when the child died.

Body examined twenty-six hours after death.

General appearance of fat; skin pale; no cadaveric rigidity; injection of the vessels on the sarface of the brain; gray substance natural; white substance somewhat injected; ventricles contain no fluid; the amygdalæ, the pharynx, and the epiglottis, do not present any appearance of a pseudomembranous exudation, nor is the mucous membrane lining those parts of a colour remarkably red. The ventricles of the larynx are filled with a muco-purulent fluid, and below them we find the commencement of a membranous concretion, which extends as far down as the bifurcation of the bronchi; it is about half a line thick; the subjacent mucous membrane is red and thickened; the bronchi contain some purulent mucosities, but do not present any trace of false membrane. The mucous membrane of the stomach and intestinal canal is free from all injection or membranous concretion. However, several of the glandulæ solitariæ are developed in a very remarkable degree, without being injected. Nothing particular in the other viscera.

The symptoms by which this case was characterized were very clearly marked and evident-viz. alteration of the voice, croupal cough, respiration sifflant, false membranes

-Child three years old; pain in the throat after exposure to cold; then cough; hoarseness; dyspucca; sonorous respiration; access of suffication. Death ; redness of the lower part of the larynx, trachea, and bronchi; no false membrane.

Garope Adele, three years of age, a child remarkably fat and well-looking; never had any previous illness, except a mild small-pox in her infancy; had been three days ill when she was brought to the hospital on the 10th of August last. According to the account given by the mother, it would appear that this young child, after having amused herself all day on the 8th on the banks of the river, was seized with hoarseness and cough in the evening on returning home. These symptoms persisted the following day; the appetite seemed then diminished, but on the night of the 9th the infant was seized with fits of suffocation, which made the parent believe she would suffocate every moment. The fits did not continue the next morning, but as the cough, hoarseness of voice, and dyspacea, increased, the patient was brought to M. TROUSSEAU, who declared that she was affected with croup, and immediately sent her to the Hopital des Enfans Malades, with a written invitation to the person on duty to practise as soon as possible the operation of tracheotomy; he also obligingly sent a box of instruments, lest the interne might not be furnished with everything necessary for the operation.

Immediately after the child's arrival at the hospital, the back of the mouth and throat were examined, and nothing was observed except some reduces and tumefaction of the amygdalæ. The hoarseness of the voice and cough showed clearly enough that the inflammation had extended to the air-passages; but there was, at the same time, every reason to believe that the inflammation of the larynx and trachea was of the same nature as that observed in the throat; ten leeches were accordingly applied on the sides of the larynx. A simple lavement given, and mustard poultices applied to the lower extremities. The child slept very profoundly during a great part of this night.

August 11. We saw the child to-day for the first time; the face was moderately coloured; the position of the child in bed varied; the intelligence was perfect; she spoke to her parents who visited her, and intreated on the amygdala, and also an expectoration to be taken home. The voice and cough of organized membranes from the trachea. The greater part of these symptoms were absent in the following case, which was mistaken for croup:—

R. Tartar. Antim. et Potast. gr. i; Ipecacuan. 358 in four parts; mustard poultices to legs. Diete.

Momentary calm after the vomiting. In the evening a few fits of dry hoarse coughing, and dyspuces.

12. Face is more coloured; the child affects the upright posture; the inspiration continues sonorous, and is heard at a good distance from the child; the voice is hourse, but does not resemble the voice of croup; the cough at times resembles the barking of a small dog; when asked where she suffers, the patient sometimes says in the neck, sometimes in the belly; there is no appearance of false membrane in the back of the throat; the redness of the palate and amvgdalæ are much diminished.

Sulphur, sublimed and washed, 9j; Sugar Si; in six doses. Same emetic as yesterday, to inspire the vapour of sulphuric ether.

This day was passed quietly, but towards evening agitation and dyspacea.

13. The cough, voice, and respiration, present the same characters as during the former days; the anxiety of the patient is somewhat increased; the sulphur and emetic powder were continued, and a large blister was applied to the auterior and superior surface of the thorax; the neck was rubbed with an ammoniacal lotion; during the day abundant diarrhea.

14. At the moment of the visit the patient was in a profound sleep; on awaking she made some efforts at coughing; the cough is more moist than yesterday, and is followed by some expectoration of a matter produced in the exophagus. We observe some little anxiety, some grinding of the teeth, but nothing announces an approaching termination of the disease. The stools are extremely frequent, and the matter passed is clear, like water. The abdomen is painful to pressure; nothing remarkable took place in the course of the day or night, but at seven o'clock in the morning the child was suddenly seized with a fit of suffocation, which carried her off before anything could be done for her relief.

Body examined twenty-four hours after death.

Exterior Habit. - Considerable embonpolat; purplish tint of posterior part of point; purposes that of posterior part of trunk, and of the upper part of chest and neck. The dissection was commenced by dividing the lower to the cavity of the mouth was then with care, and no alteration down with care, and ano alteration down with care, and any alteration divides a mygdale true as large as a libert; they do not injection either

not count it, from the restlessness of the externally or internally, the volum palatically, the volum palatically; pharynx of violet colour; the mucous membrane of the epiglottis and superior part of the larynx are pale and not thickened. We do not observe any trace of false membrane or ulceration. The inferior moiety of the largnx and the traches are red; their lining membrane thickened; the same lesion is found in the brouchial tubes of large caliber, which, moreover, contain The left lung some purulent mucosities. adheres at the summit to the pleura costalis for the extent of about a twenty-sous piece, and at the level of this adhesion the pulmonary tissue contains a cretaceous tubercle of the size of a pea; the remainder of the superior lobe is soft and crepitant; the inferior lobe is slightly engoue; right lung healthy; heart and pericardium free from alteration.

> Abdomen — The mucous membrane of the stomach, of a white rosy tint, presents everywhere a good consistence; the small intestines show here and there some patches of injection, and contain a single lumbricus; in the colon, deep red injection, disposed in striae very closely applied to each other, with ramollissement of the mucous membrane. Nothing worthy of notice in the other viscera.

From this latter fact, to which we might add several other analogous ones, we think ourselves justified in concluding .-

1st. That the diagnosis of croup occasionally presents many difficulties at the bedside of the patient.

2nd. That we ought not to decide on performing the operation of tracheotomy without a full and careful examination of all the symptoms; for this operation is, to say the least, useless in cases where no false membrane exists.

3rd. That simple inflammation of the trachea and larynx may give rise to fits of suffocation, which resemble closely enough those observed in the pseudo-membranous laryngitis or true croup.

We may observe, in conclusion, that in the case just reported, the error of diagnosis was not without prejudice to the patient; for if the physician, instead of giving repeated emetics, which perhaps gave rise to the inflammatory condition of the colon observed after death, had repeated the sanguineous emissions, under whose influence the inflammation of the throat was dissipated, he might also have been fortunate enough to subdue the analogous inflammation of the air-tubes.

MENINGITIS.

Inflammation of the membranes of the brain is a disease much more common at the Children's Hospital than at any of those consecrated to the reception of adults. This affection, considered under the double relation of its march and anatomical character, presents itself in infancy under two forms that are sufficiently distinct. In the first, the inflammation of the cerebral membranes is, in most cases, primitive and acute; is developed under the influence of appreciable causes (such as blows on the head &c.); passes rapidly through its different stages; and, when death supervenes, leaves, as pathological characters, serous, sero-purulent, or sero-albuminous effusions in the piamater, ventricles, or (much more rurely) in the grand cavity of the arachnoid.

In the second, which is so much more frequent at the French Hospital for Children, that it may be regarded as the type of the disease, the affection commences under a chronic form, and does not become acute until a period more or less near the fatal termination; but when the acute stage commences, both forms exhibit symptoms so analogous as not to be distinguished by any means that we as yet possess. This form attacks principally scrofulous patients, and presents for anatomical characters, the existence of whitish or yellow-white, tuhercular granulations, varying in size from a millet-seed to that of a rape-seed. These granulations are always found in the piamater, where they are sometimes disseminated, sometimes conglomerated, so as to form spots of more or less magnitude, which compress the cerebral substance, and are frequently united with it in a very close manner.

We would denominate the first form, simple acute meningitis, and would consecrate to the latter a new term (which sufficiently designates its most essential character), tubercular meningitis, or, in popular language, scrofulous hydrocephalus.

The two following cases offer examples of the first of these forms. In a succeeding Number we shall give examples of the second, or tubercular disease :-

CASE 1. - ACUTE MININGITIS OF THE ASE 1.— Acord Ministry of the Convexity.— Patient oyed six years; Leadache; general malaise; delirium; after to the consultions; loss of speech; stupor; coma; local blood-letting; blister to the low grains from time to disast patients.

neck. Death on the 16th day of the disease; opacity and thickening of the arachnoid on the convexity of the brain; serous infiltration of the pia-mater, sufficiently abundant to distend the convolutions.

Adelaide Baldy, six years of age, of a feeble constitution, after having passed the whole of the 7th of June exposed to the rays of a burning sun, returned home K. the evening with headache, and pains in the limbs, which persisted on the 8th and 9th. During the night she was unable to sleep, was agitated, and had some delirium. On the 10th some convulsive movements appeared, with trismus, strabismus, and grinding of the teeth. The convulsive symptoms ceased after the expiration of a few hours, and returned again two days afterwards. From this time up to the 17th, the day of her reception into the hospital, loss of speech, stupor, constipation; no bilious vomiting; the patient merely threw up some spoonfuls of tisan. On the 9th, some leeches were applied to the epigastrium; and on the 12th, a blister between the shoulders: the child had also some refrigerating draughts, and simple enemata, and sinapisms had been placed daily on the lower extremities.

June 17th (10th day of the disease). The child presented the following symptoms:-Decubitus dorsal; no renversement of the head backwards; face full; eyelids half open, pupils moderately dilated and moveable; no strabismus; sight preserved. The patient is in a state of stupor, and does not answer any question put to her; shows her tongue when bid, and then falls again into a state of stupor; sensibility of the skin is dulled, but equal on both sides of the body; automatic movements of the left arm, which the patient carries constantly to the nose; the other members are numbed; grinding of the teeth from time to time; the tongue is moist, and covered with a grayish coat; deglutition easy; no vomiting; abdomen indolent; no stool for the last twenty-four hours; pulse 108; respiration 30.

Emulcent decoct .; eight leeches, two to each temple, and two behind each ear; sinapisms to the feet; frictions with acetic ether on the limbs.

During the day constant stupor; the patient does not speak a single word; passes her urine involuntarily.

18. The stupor is less marked; the child answers in monosyllables to some of the questions put to her; makes an effort to show her tongue, but is unable; no convulsive movement; no paralysis; pulse 120; inspiration 36; dry cough from time to time. 4

Continue remedies, without the leeches.

out her tongue, which is dry, and presents | lung and the pleura costalis; the lung is some aphthæ on the surface; some diarrhæa has set in, and the abdomen is painful to pressure; pulse still 120; face very dull. To day the appearance of the patient, and the symptoms which she presents, are very much those of a child labouring under typhus fever.

Frictions with Camphor Oil on abdomen-on the limbs with Acetic Ether; tempoonful of Sulphuric Ether internally.

vulsive movements of the face; no acute cries (called hydreneephalic in France); no delirium; the child sighs from time to Case 2.—Acute Meningitis of the Base time; pulse 116. Blisters to the lower extremities.

23. At eight o'clock, general convulsions; at nine o'clock, permanent contraction of the right arm, which is demiflexed; carpology in the left wrist; inferior extremities in a state of relaxation; mouth deviated to the left side; pupils dilated and oscillant; strabismus; trismus; two involuntary dejections since the visit; pulse 130; respiration 30.

Three Leeches behind each car; Blister to the neck.

After the application of the leeches, general convulsions set in; the trismus was so complete, that a single spoonful of liquid could not be introduced into the mouth. Death at six o'clock p.m.

Body examined thirty-six hours after death.

Skull well formed; dura-mater healthy; opacity and milky colour of the arachnoid which lines the convex surface of the hemispheres; under this membrane we find a quantity of troubled serum, sufficiently abundant to form a layer, some lines in thickness, between the membranes and cerebral substance; the quantity of this scrosity was so great as to distend the anfractuosities, and even separate the convolutions from one another. The arachnoid, which is thickened, may be detached in layers from one to two inches long, and the pia-mater is not adherent to the cerebral substance; in the parts in contact with the liquid the substance is pale, and seems to have undergone a kind of maceration. The cortical substance is pale and not firm; the fluid effused under the membranes is more abundant on the left side than on the right, and posteriorly more than anteriorly. The membranes lining the base of the skull do not present any alteration. The ventricles contain only a spoonful of clear serum; the central portions of the train preserve their normal colourant conflictance. The rest of the brain and completion is healthy.

a rosy colour externally, soft and crepita ' does not contain a single tubercle. Bron chial glands, heart, and pericardium, healthy.

Abdomer .. - The stomach presents some small red bands parallel to its great curve; the rest of the mucous membrane is pale. The portion which lines the great curvature is in contact with a fluid resembling wine-lees in colour, of an acid smell, and is softened; intestinal mucous membrane is stupor has become more deep. Some con- ly amore and solitarize are scarcepale, and of the natural consistence. The healthy.

> OF THE BRAIN, WITH EFFUSIONINTO THE VENTRICLES, AND SOFTENING OF THE CENTRAL PARTS.

(The " Acute Hydrocaphalus" of Abercrombie.]

Male, three years. After some days of malaise, intense headache, with bilious comiting for four days; convulsive movements of the muscles of the face; sommolence; sighing respiration; coma; renversement of the head backwards. Death the fifteenth day; seru-purulent infiltration of the pig-moter at the base of the brain, effusion into the ventricles; softening of the central parts.

Auguste Colson, three years of age, having the skull and thorax malformed, exhibited for a few days malaise, dulness, and a disinclination for movement; when on the 29th of August last, without any known cause, he was seized with very severe headache and bilious vomitings. These symptoms persisted for four days. On the 31st, some convulsive motion of the muscles of the face and limbs; obstinate constipation for the first three days. No active treatment pursued.

On being carried to the hospital, the 1st of September 1835, we observed the following symptoms at the visit of the 2nd.

Child is in a demi-somnolent state, interrupted by low cries now and then; face alternately red and pale; eyelids closed; eyeballs prominent, sensible to the light; pupils seem moderately dilated; senses of seeing and hearing intact; does not answer when spoken to; sensibility of the skin is greatly exaggerated; the least touch makes the child cry out; equally so at both sides of the body; no stiffness or paralysis of the limbs; the left eyelid contracts strongly when we endeavour to examine the eyeball; the other opens with the greatest case, as if it were paralysed; pulse slow and intermittent, 64; respiration unequal, mixed with sighs, 36; skin moderately warm; tongue natural; one copious vomiting this morning; constipation persists; abdomen supple, is very sensitive to the touch; emission of urine involuntary.

M. Guzzazyr discreationed a menine

a large blister to the head, a laxative ene- it up, it drops down deadly on the side; the

ma, and an emulcent drink.

3. The blister has acted with sufficient energy; the pulse continues slow and intermittent, 56; the respiration is somewhat more accelerated than yesterday, 40; the cerebral symptoms noted yesterday persist, and we now notice that the left side of the face is much less developed than the right, as if from retraction of its muscles; same condition of muscles of eyelids as yesterday; no strabismus; constipation persists in spite of the enema. The child appears less cross than yesterday.

Oxymel: Mustard Foot-bath; Puryative Enema; keep open the Blister.

4. The face colours brightly whenever the child is excited; the drowsy state persists; machonnement now visible; no convulsion or paralysis of the limbs; same state of evelids as before; and we now find that the right cheek is less sensible than the left, and that the right pupil is a little more dilated than the left; no acute cries; pulse is less irregular than yesterday, 72; respiration unequal, 54; the abdomen still very sensible to pressure; the right arm is less sensible than the left; legs equally so. Three stools produced by the enema; the skin is now very warm, almost burning hot. the evening an exacerbation; pulse 116; skin much more warm than in the morning of the 3rd.

5. The child is not much assoupi, as during the former days; does not evince the same sensibility when touched; abdomen not so tender as before; he sighs from time to time; skin not so warm as yesterday; pulse 112, very irregular; respiration very unequal, 32 to 36; one stool; same alternations of flushing and paleness; general symptoms the same as yesterday. In evening at four o'clock, a slight exacerbation, which lasted till five o'clock. Continue

remedies.

6. To-day the child is able to sit up in bed without support, and there was but little stupor during the night; the left cheek is now very much flushed, the other one pale; the abdomen is still slightly tender; two liquid yellow stools; pulse varies from 112 to 124, is regular; respiration quick, regular, 52; skin warm; pupils moderately dilated; we still observe the peculiar sighing from time to time.

Oxymel; simple Enema; Foot-bath; suppuration to be kept up. Diet.

7. Child lies quiet in bed; eyelids wide open; very little stupor; same alternate flushing of the left cheek only; same contraction of left, and complete relaxation of right eyelid; skin waim; puted than the no cries left when we pinch them with the nails; remember right eyelid; skin warm; pulse regular,

with of the base of the brain, and prescribed | right arm reems relaxed, for when we raise angle of the mouth seems a little prolonged towards the left side; no convulsive motions

> Oxymel; Calomel, gr. iv; Purgative Enema if required. Diet.

9. One small stool after the enema; pulse regular, 104; respiration from 34 to 36; thirst; but little change since yesterday; skin warm; not much stupor; same state of eyelids as before; no vomiting since the first one; no convulsive movement; no rigidity or relaxation of the limbs.

Oxymel: Calomel gr. vi; Purgative Enema if necessary.

Immediately beneath the above notes (which are here much curtailed), we find the following observations in our portefeville:--

" If we had seen this child to-day for the " first time, and had not known the history " of the case, or observed the symptoms " and their march very closely, we should " have found it extremely difficult to form a " diagnosis. The stupor or sleepiness peculiar to meningitis was now barely perceptible; the pulse and respiration had now become regular, and very nearly na-" tural; they were not slow; in fact there was " no symptom of cerebral disease to be ob-" served, except the constipation, the dif-" ference, so well marked, of contractility " between the two cyclids, and the difference " in bulk between the two sides of the face, " which latter symptom, besides, might very " easily have escaped notice, as it was not striking. We confess the appearance and state of the child to-day have much staggered us; however, from a consideration of what has preceded, we find ourselves " compelled to conclude, that he ought to " have meningitis, and that in consequence " the case will be fatal."

9. No cries during the night; no vomiting; no stool. When we came into the ward we found the child sitting up in the bed, without any support, and presenting a sufficiently natural appearance. The face is pale; no flushing now observed; no convulsive motion of face or eyes; some grinding of the teeth; skin cool; pulse small, sharp, regular, and equal, 134; the right arm has to-day recovered its motion,—on the contrary it feels a little stiff; child still sighs occasionally; respiration quite regular, 32; thirst; deglutition is quite easy; abdomen tender to pressure; no phenone non of motility, or change in sensibility

Oxymel ; Calemel gr. wit; Purgative Enoma. 10. To-day is

days; two steeles much so as a no cries whose

warm; pulse regular, 120; respiration quiet; much more injected than that of the right and regular, 38; some contractility of left We do not observe any granulations in the orbicularis muscle, which prevents us from examining the state of the pupil; right one, though now slightly contractile, is easily opened; no contraction or relaxation of extremities, or rigidity of trunk; abdomen neither ballonne nor retracted, tender.

Oxymel; Calomel gr. ix; a little rice. three o'clock p.m. a slight exacerbation.

11. Stupor; a little sighing from time to time; face pale; no change in its colour; both orbicular muscles to-day contract most powerfully when we attempt to open the eyelid; pupils very slightly dilated; skin cool; pulse very small, 130 to 140; respiration very irregular, 22; right arm now cannot be flexed easily, and left arm cannot be extended; three stools; abdomen tender. Remedies as before.

12. During the day, yesterday, the child became quite stiff at different times; during the day also he frequently carried his band to the head, but uttered no complaint; now lies quietly on back; lids open; eyes rolling upwards; upper extremities stiff, as also the right lower one; pupils dilated, immoveable; conjunctivæ injected; pulse very small, 140; respiration 36; face very pale; skin cool.

Death at five o'clock a.m. on the 13th.

Body examined on the 14th at nine o'clock.

The spinal marrow, which was the part first examined, presents a natural appearance. Nothing observable except some injection of the membranes at the inferior nart.

Brain examined from below upwards. The membranes covering the right side of base not more injected than natural; on the left side the whole blunt end of the middle lobe, immediately behind the fissure of Sylvius, presents, for the space of two to three inches long by a half broad, a straw-coloured infiltration under the arachnoid; here the membranes are adherent and thickened, but the membranes themselves here, or in the surrounding parts, do not exhibit the red vascular appearance of recent inflammation.

(In the upper surface of the brain the difference between the appearance of the two hemispheres was most remarkable; on the right side the injection of the vessels of the pia-mater was moderate, perhaps a little more than natural; on the left side the whole surface of the hemisphere is covered with fine vessels, and between the convolutions the trunks ascending from the base of

pia-mater.

The ventricles are considerably developed posteriorly, and contain about three ounces of clear serum. The inferior surface of the corpus callosum, the fornix, septum lucidum, &c., are very much softened, and reduced to a pulp; the floor of the ventricles is of a pinkish hue. Cerebellum and medulla oblongata healthy.

Lungs healthy-merely some tubercular matter in the bronchial glands.

Abdomen not examined.

In this last case a blister to the head was the only treatment employed; but we are not to conclude that M. Guersent has recourse to no other means. We have repeatedly seen him try bleeding, especially local purgatives, and a long-continued stream of cold water on the head (for eight days without intermission) : but as all those cases in which blood-letting was employed terminated fatally, he wished to observe the march of this affection under the influence of other remedies.

SALIVARY CONCRETION.

To the Editor of THE LANCET.

Sir,-Considering that the enclosed case of salivary concretion is such a one as is very rarely met with, I forward it for insertion in your widely-circulated periodical. and subscribe myself, Sir, yours,
T. C. Sympson, Surg.

Lincoln, Sept. 24, 1835.

Mrs. Wise, of Branston, called upon me about two years since to have a tooth extracted, which she described as being a very ugly one. Upon examination I found the two molares of the superior maxillary hone completely hidden in a growth of apparently bony substance, which projected so much externally as to disfigure the face, and possessed great firmness of attachment to the jaw, on touching it, with hardness, and the cnamelled appearance which is frequently noticed in exostosis of the jaw. The projection being outward, I told her not to alarm herself, but to call upon me every three or four months, which she did until the last three months. When she last called, it was with a very joyful countenance, to inform the brain are exotaively gorged with dark me that the whole substance, to moral the brain are exotaively gorged with dark me that the whole substance had fallen of blood; here and the whole weight previous, at support time. The rosy spots under the substance is from concretion is now in my possession. It is divided into one large and two very small places, the whole weighing 115 grains. The

is three-fourths of an inch; its length is one inch and a quarter; it is of a yellowishwhite colour, and has a rather conical appearance, the apex, when attached to the teeth, being directly opposite Steno's duct.

The only conjecture that I can form respecting its formation is, that, as the saliva had passed from the duct, an abnormal deposition of tartar formed an incrustation, thoray." Hydrothorax, in the true meaning which gradually (near six years) accumu- of the word, it certainly cannot be denomilated until it had attained the extraordinary size I have above detailed.

It is worthy of notice, that there has never been the slightest accumulation of tartar on the left side, nor from the submaxillary

glands.

CASE IN WHICH MR. WORTHINGTON PERFORMED

FARACENTESIS THORACIS.

To the Editor of THE LANCET.

Sin,-Will you allow me to make one or two observations on the case of paracentesis thoracis, which is published at page 801 of THE LANCET of September the 19th

It appears to me that Mr. Worthington has fallen into error in describing the case which he treated so judiciously as one of hydrothorax, and that he errs still more when reasoning upon it. He adduces it as an instance of primary hydrothorax, re-pudiating the opinion of Mr. Lawrence as to the rarity of such an affection. I differ from Mr. Worthington in his diagnosis, for the following reasons.

First, Mr. W. states that "the fluctuation of the contained fluid could be distinctly heard by the patient and bystanders, on succussion. It is a well-known fact that in order to render the fluctuation of a fluid in the pleural cavities perceptible to the ear, the presence of air is absolutely necessary in addition to the fluid, and that the only disease in which this phenomenon is observed is that of pneumo-thorax, of which if is pathognomonic.

Secondly. Mr. W. describes the fluid which he evacuated as being "sero-purnlent." Now, I apprehend that in essential hydrothorax the fluid must be of a serous nature. If not, whence the purulent tend-ency? It must arise as a product of inflammatory action. If in the lung or the pleura, it cannot be termed "primary," "essential," or "idiopathic hydrotherax." In chronic pleurisy we frequently have effusion into the pleura of sero-purulent fluid, but we should hardly call such an affection "primary hydrothorax."

Thirdly. In six thousand cases which came under the observation of Andral, per- Jones that afficiat us

projection of the larger piece from the base haps the first pathologist in the world, there were only five in which the hydrothorax was not found to depend upon organic disease. (Vide Clinique Medicale.)

From these facts, and from others mentioned in the history and symptoms of the case, I think Mr. Worthington would have been more correct had he denominated the case, "empyema complicated with pneumonated, and, consequently, the deductions drawn from it against the opinions of Lawrence. Audral, Laennec, in fact, of all modern pathologists, are incorrect.

In empyema the operation has frequently been performed, and occasionally with success; and I consider that Mr. Worthington's treatment of the case reflects great credit on his judgment and skill. The observations which I have ventured to offer I am sure he will receive in the spirit in which they have been made, the elucidation of truth being my only object. I am, Sir, your most obedient servant,

CHARLES ROBERT BREE. Stowmarket, September 23, 1835.

ANCIENT AND MODERN NEGROES.

To the Editor of THE LANCET.

Sir,-From a learned work, printed a short time since, entitled "Anacalypsis," and written by the late Godirey Higgens, I have made some extracts, which relate to a portion of the early history of our race, and, as I conceive, bear reference to a part of the inhabitants still existing on our globe.

This communication, although not strictly of a medical nature, yet may be deemed replete with interest, as connected with those extensive views which our science naturally embraces. Truly appertaining to the natural history of man, upon which subject your columns at various periods are pregnant with information, viewing it in its physical and moral aspects, I trust it will be thought that this article has not intruded into a quarter which might have been more lealtimately and more profitably occupied. May I therefore request its insertion in your widely-diffused periodical, in the hope that some of the scientific readers of THE LAN-CET, whose investigations have been directed towards such matters, may be enabled to adduce some arguments, or disclose some facts, tending to elucidate the apparent inconsistency, or altogether to remove the presumed resemblance?



ossessed the dominion of Asia, and held the lips, particularly the under lip, are remarkest of empire at Sidon. These must have ally thick?
Leen the people called by M. Maurice
Cushites, or 'Cuthites,' described in clarence in his journal; and Maurice, in the Jenesis; and the opinion that they were placks, is corroborated by the translators of he Pentateuch, called 'the Seventy,' contantly rendering the word 'Cush' by Ethiopia.

- 2. "The religion of Buddha, of India, is ery ancient, as is well known. In the most incient temples scattered throughout Asia, where his worship is yet continued, he is ound black as jet, with the flat face, thick ips, and curly hair of the negro. Several statues of him may be met with in the museum of the East India Company. There ire two exemplars, brooding on the face of he deep, upon a coiled serpent. To what inc are we to allot this negro? He will be proved to have been prior to the god called 'Cristna." He must have been prior to, a contemporaneous with, the black emaire, supposed by Sir W. Jones to have lourished at Sidon. The religion of this tegro god is found, by the ruins of his temdes and other circumstances, to have been pread over an innuense extent of country, ven to the remotest parts of Britain.
- 3. " Euschius stares, that the Ethiopians ettled in Egypt in the time of Amenophis; hey came from the river Indus, and planted hemselves south of Egypt.
- 4. " Philostratus says, that the gymnosohists of Ethiopia, who settled near the ources of the Nile, descended from the Bramins of India, having been driven thence or the murder of their king.

5. " Enstasins also states, that the Ethipians came from India.

- 6. " The superior antiquity of India is hown by Baily, and many other learned
- 7. " The Ethiopians are stated by Herolotus to have come from the Indus. Memion, who was sent to the siege of Troy, and vas killed by Achilles, Virgil describes as mying been a black (Lineid, lib. i), as does dso Pindar (Olymp. Od. ii; ride Diss. of bishop Hewet, ch. xiii, p. 185). That Pindar and Virgil were right, the features of the mst of Memnon in the British Museum rove, for they are evidently those of the legro.
- 8. "Mr. Wilsford, in his treatise on Egypt and the Nile, in the 'Asiatic Researches, uforms us that many very ancient statues of he god Buddha, in India, have crisp early air, with flat noses and thick lips. Nor can t reasonably be doubted that a race of neroes formerly had power and pre eminence n India. This is confirmed by M. Maurice,

nord and full is the and the in no respect do their intellectual endow-

first vol. of his Indian Antiquities, states that the figures in the caves of India, are absolutely the same as those in Egypt described by Bruce, Niebuhr, &c.

10. "Justin states that the Phœnicians being obliged to leave their native country in the East, they settled first near the Persian Gulf, and Maurice says, 'We find an extensive district, named Palestine, to the east of the Euphrates and Tigris. The word Palestine seems derived from Pallisthan, the seat of the Pallis or Shepherds." Palli in India means Shepherd. This, coupled with the Shepherd Kings of Egypt, confirms Sir W. Jones's opinion in a striking manner, respecting a black race having reigned at Sidon.

11." Sir W. Jones says, 'the Mountaineers of Bengal and Bahar can hardly be distinguished in some of their features, partienlarly in their lips and noses, from the modern Abyssinians, whom the Arabs call the children of Cush.

12. "In my essay on the Celtic Druids, I have observed that a great nation called 'Celta,' of whom the Druids were the priests, spread themselves over almost the whole earth, and are to be traced in their rade gigantic monuments from India to the extremity of Britain. What these can have been but the early individuals of the black nation, of whom we have been treating, I know not, and in this opinion I am not singular. The learned Maurice says 'Cuthites, i. e., Celts, built the great temples in India and Britain, and excavated the caves of the former.' And the learned mathematician, Renben Burrow, has no hesitation in pronouncing Stonehenge to be a temple of the black curly-headed Buddha."-p. 52.

If it can be admitted with the learned author from whom I have quoted, that the most ancient race of which we have any record, either in the pages of history, or in the gigantic cavern sculptures of the east, or in traditionary legends, were black, and in physical conformation and visible aspect similar to the race of negroes which at present exists, by what means can we account for the degraded condition of the latter? How reconcile the vast intellectual distinction between them?

I think it will be readily allowed that the negro nations, so far as we are acquainted with them, are fitted, neither by physical capabilities nor by moral attributes, to become the founders or rulers of great kingdoms. We perceive that year after year, vho says 'the figures; the Hindoo caverns and century after century, to them brings are of a very different from the no change. We observe that their habits entrace of the requirements and their customs remain unaltered; that ments appear to advance with the experi-lturies in this isolated condition, they conremained stationary from the period of their first introduction to civilized man. How, then, were their presumed predecessors enabled to assume so commanding a situation. to attain to so proud an elevation among the empires of the world? By what means did they arrive at such eminence in scientific knowledge and mechanical ingennity? In what manner did they extend their fame and influence into almost every region, however remote?

A query naturally suggests itself, Can the existing African negroes be the descendants of this widely-spread, intelligent, and refined race? Can the being so low in the scale of intellect as the negro is represented to us to be, be connected by consanguinity with this exalted people? If it be answered in the negative, where-to what countryshall we look for their continuance? Where are their descendants in skill, knowledge, and refinements, possessing the same external physical conformation?

Statius somewhere mentions that Juniter was a black deity. We have seen that Buddha was black. The Corinthians worshipped a black Venus. Osiris was described as black. The Virgin Mary of the Romish church was black, and that Christ was supposed to be black, is apparent by a reference to numerous images in most of the continental cathedrals. Here then we have strong presumptive evidence of the superior attributes and perfections of an antecedent dark-coloured race.

If the query which I have above suggested be answered in the affirmative, to what chain of causes are we to effix the great debasement of the present existing negro? To what source are we to turn for satisfactory reasons for such a manifest and striking difference in the intellectual endowments and sagacious actions of the same

people of two different periods?

Without presuming to offer an opinion, but merely to afford a hint for investigation, I would ask whether the solution of the difficulty can be advanced by the following attempt at explanation? A succession of conquests, with other political and social causes combined, forced these black deseendants of the Palli, or Indic-Tgyptian shepherd kings, and the tribes belonging to them, to emigrate progressively further into the interior of the vast continent of Africa, where at length they find a secure and unmolested haven from their toils and sufferings, unworthy of the ambition and uninviting to the cupidity of their neighbours. The intense heat of the climate, the sterility of the soil, and the unimprovable appearance of the whole face of the country, would be sufficient to ward off all intruders, whether hostile or commercial. Remaining for osn- cough

ence of years, and the most that can be tinued a distinct and unmixed race. The stated in their favour is this, that they have powerful stimuli of foreign war, of commercial intercourse, of social improvement, being absent, their minds became contracted and weak. Succeeding generations adding to the stolidity of their progenitors, became still more depressed in mental energies, and after the lapse of many ages, they reached the degraded and melancholy condition which they now exhibit. Finally, having little or no intercourse with the rest of mankind, and a very limited range for the exercise of their intellectual and moral faculties, the gradual disuse of those powers which were originally implanted in them, may have created that result on their cranial configuration and intellectual manifestations, which, under somewhat analogous circumstances, phrenologists have frequently observed. I remain, Sir, your ever-instructed reader,

T. C. Guerin, Surgeon. Islington, Sept. 19th, 1535.

INFLAMMATION OF THE LUNG

11

NEW-BORN CHILDREN.

In a late Number of the Berlin Gazette (Medic. Zeitung). July 29, 1835, we find a notice of a disease affecting children innicdiately after birth, which the author, Dr. KLUGE, is inclined to range under inflammation.

The disease has been observed from time to time in the Charity Haspital of Berlin, particularly in April 1832, when, several fatal cases occurring, it gave rise to a more careful examination of its symptoms and nature. The following abridged case will give an idea of its march :-

Louise Biclocke, 29 years of age, healthy and well formed, was delivered on the 7th of May of a healthy child, weighing seven and three quarters pounds; the child pre-sented no trace of disease, but seemed strong and lively, and immediately took the breast; about twenty-four hours after birth, the child began to exhibit for the first time, a pale colour of the skin, restlessness, and agitation, uttering short, broken, piercing cries. After the lapse of about half an hour, the skin assumed a dull-gray colour, which on the hands, nose, and about the mouth, passed into a gray-be. Symptoms of disy organs now immeorder in the regi diately see reptly became weaker,

and during which the child became very ment in the respiratory organs by several rigid. The temperature of the skin was hours; in some cases even by twenty-four diminished; the pulse frequent. A single hours. leech was applied immediately to the chest, and one grain of Calomel with two grains of Carh. Magnes. was given internally. A slight noticed as a true inflammation of the lung, remission now occurred for about half an and not as a consequence of mere congeshour, when the respiration again became tion. 1st. From the examination of the face deep blue, the breath cool, the extremities cold, and the infant died in a state of suffocation, six hours after the first appear. in its first stage), analogous to the product ance of the symptoms.

The outopsy was conducted by Dr. Fao-

RIEF, Prosector at La Charite.

The upper part of the body, down to the edges of the ribs, was of a deep-blue colour; the veins on the upper surface of the brain and sinuses were much engorged; the brain arachnoid, while the changes in the lung itself much injected, and some fluid blood was found in the base of the skull after the degree of congestion. removal of its contents. In the abdomen nothing abnormal; the veins not much dis-tended with blood. In the neck the nerves healthy, the arteries empty; but the veins SPONTANEOUS CURE OF A TRAUexcessively distended; the jugelar vein had the diameter of a large goose-quill. This excessive fulness of the venous system extended to the subclavian vein, and jugular The membrane of the trachea distended. and broughi was bluish, but not softened; heart normal; the foramen ovale open; in the left side only a small quantity of coagulated blood. The right side and the pulmonary artery gorged with blood; the duetus arteriosus open. The lungs of a bluered colour; at several points of the lung, especially inferiorly, the pleura pulmonalis was separated from the parenchyma, by a troubled brownish fluid. The deep-red portions of the lung swim in water; the darkblue portions, which are solid and not crepitant, sink quickly to the bottom.

The most remarkable symptom by which this affection of the lungs in the new-born children was preceded, consisted in a change in the colour of the skin, which from its natural red tint became pale or ash gray (as in the commencement of cyanosis), and lost its heat. As soon as this colour had been fully established, the pulmonary symptoms set in, but were never accompanied with regular cough. When the characteristic coloration of the skin was noticed sufficiently early, before the development of Ethe pectoral symptoms, the application of one to two lesches, with the internal use of calomel, was in get sufficient to save induced the author to apply six lecches the patient's life; lar period every treatment d

Dr. FRORIEP considers the disease just quicker, the skin of a darker colour, the lungs, which contained a gray-brown troubled serosity (the product of inflammation in gray hepatization.

> 2nd. From the symptoms during life, and particularly from this circumstance, that although the brain was excessively congested, little fluid was found in the cavity of the were much more remarkable under a lesser

MATIC CATARACT.

THE question whether cataract admits of and vena cava superior, while the inferior any cure otherwise than by an operation, cava and its branches were only moverately has long been debated in surgery. Many writers deny the possibility of its being removed by absorption under the influence of external treatment, while one or two French surgeons of the present day (who pass by-the-by for charlatans in the profession) oppose with warmth all idea of operating, and profess to cure cataract in all its stages by simple medical applications. The case now before us, however, seems sufficiently authentic to deserve consideration.

> In the mouth of January 1834, Dr. PAOLO Genson was called in to visit Francesco Brussi, a child five years of age, who had received a stroke from a sharp-pointed knife in the right eye. Sen two hours after the accident. The little patient presented the following symptoms: a portion of the aqueous humour had escaped; the iris was uninjured, and did not prolapse beyond the small wound in the lower part of the cornea; however, the crystalline lens appeared somewhat troubled, and the surgeon was led to conclude that it was injured, particularly as the patient saw very little with the eye, although the pupil and iris were in a normal state. The child did not complain of any pain in the orbit, and though no symptom of inflammation declared itself, the fear of secondary cataract the no unfavourable symptom appearing, the case was less to nature. At this period the

formation of a cataract was very visible. There was a cloudy spot in the eye, and soluble in water, and still less so in alcohol the edges of the wound showed a tendency to unite with the subjacent portion of the iris; an astringent collyria was ordered, to combat the opake spot, which produced an excellent effect, and after three days the child was permitted to amuse himself as usual. The parents were recommended not slightly favour its solution. Strong pulto employ surgical assistance, for the re- phuric acid turns it to a deep brown and moval of the cataract, in too great a hurry. Four months had elaused, when M. Gerson was again called in to see the patient, whose parents entreated him to undertake an operation. On examining the eye he perceived that absorption of the cataract had already commenced; there was a small perforation in the centre of the cloudy body. Extract of belladonna was now rubbed over the eyebrow, and the dilatation of the pupil permitted this fact to be established beyond any doubt. As the pupil gradually dilated, the ultimately completed .-- It File it. Sebezio.

NEW PRINCIPLES IN OPIUM.

Two new principles have been discovered in opium by M. Pelletier, who thus names and describes them in the Journal de Pharmacie for Sentember:-

PARAMORPHINE.-This substance is white, scarcely soluble in water, and very soluble in alcohol and in ether. Even in cold water it has a bitter and styptic taste. By spontaneous evaporation, it crystallizes in necdles, which adhere to the sides of the ves-sel. It is slightly soluble in the acids; the alkalies precipitate it from its solution, and an excess of alkali does not redissolve it, unless the alkaline solution is very concentrated. The solutions in acids never yield erystals; the evaporation only furnishes small yellow plates. It is not volatilized at a high temperature, but it is decomposed in the same manner as the other vegetable alkalies, yielding nitrogen compounds. It differs from morphine in its not being reddened by the action of strong nitric acid, and in its not forming crystallizable salts with the acids; nor is it changed to a blue colour by the salts of iron. It resembles codeine by its solubility in alcohol and in ether, and by its alkalinity; but it differs from it in not forming large crystals, nor forming crystallizable salts, and in its being precipitated from its solutions in acids by ammonia. It has no analogy with narceine or nicotrine. The only substance which paranicotrine. The only substance which para-morphine nearly resembles is narcotine; thigh,"—viz.depression of the corploid cavity however, the difference of the taste, of the fusibility, and of the solubility in alcohol, is sufficient to distinguish the one from the other.

PSEUDO MORPHINE.-It is but Slightly and in ether. Alcohol at 36° R. takes up a little more; solution of ammonia does not sensibly dissolve it; the solutions of potass and soda dissolve it in large quantity, and on saturating the alkalies by an acid, it is precipitated; an excess of acid seems to changes it. Nitric acid acts on it in the same way as on morphia, and produces an intense red colour, and, finally, converts it into oxalic acid. The most remarkable property of this substance is the intense blue colour which it strikes with the persalts of iron, especially the permuriate. This colour disappears when there is an excess of acid, in the same way as morphia does. The affinity of this substance for the oxide of iron is such, that although it resists the solvent power of sulphuric acid, and is disabsorption was seen to proceed, and was solved only in small quantity by hydrochloric (muriatic, acid, yet the permuriate of iron dissolves a considerable quantity of it. This solution is of a fine blue colour. When beated, it becomes of a dirty green; on adding a little ammenia, there is a slight precipitation, and the liquor takes the colour of Alicant wine, and the organic matter cannot be removed without complete decomposition. These phenomena are nearly the same as those presented by morphia when similarly treated. When submitted to the action of heat, the pseudo morphiae does not volatilize; it does not undergo complete fusion, it is decomposed at the moment it seems to become soft. Distilled in a glass cucurhite, it yields a little oil, and a little water slightly acid, but from which potass disengages ammonia. A large quantity of carbon is condensed when the cucurbite is exposed to the air.

The following is the analysis of the substances compared with morphia, according to M. Liebeg :-

Paramorphine.	Pseudo Morphine,	Morphine.		
Carbon 71.310	52.74	72.340		
Hydrogen 6 280	5.81	6.360		
Nitrogen 4.408	4.08	4.995		
Oxygen 17.992	37.37	16.299		

ANATOMICAL SOCIETY OF PARIS.

Extracts from the Bulletin of the Society. No. 1, September, 1835.

M. CRUVEILHIER announced to the se ciety "a new cause of shortening of the different

M. GURRARD presented an example "of nomenon which he has very frequently met a solitary acephalocyste of the brain." It with. The symptoms go on increasing, and was found in the centre of the middle lobe, and projected both into the lateral ventricle, and at the surface of the brain. It disease by no means so rare as is imagined. was as large as a large hen's egg; weight four ounces one-eighth; the surrounding cerebral substance was perfectly healthy. The patient had been affected with incom-plete paralysis of the limbs on the opposite side. The tongue preserved its natural mobility.

M. Fourner presented a specimen of "old hemorrhage into the cavity of the A sac formed of smooth transparent parietes was found between the two layers of the arachnoid; it contained some serons fluid, and was adherent to cerebral serous membrane, at the level of the small wings of the sphenoid bone. The patient, a man of forty years of age, entered the hospital with delirium, slight deviation of the mouth, and great feebleness of the right hand; he had already experienced similar attacks three times, from which he had completely recovered .- The same member presented a second example of hemorrhage into the arachnoid, but here the disease was more recent. The parietes of the cyst were reddish, and strongly adherent to the parietal serous membrane. The sac contained a bloody liquid. The patient had been affected with complete hemiplegia on the same side as the offusion.

M. VERNOIS presented a section of the facial nerve effected in the aqueduct of Fallopius by an old caries of the bone. The patient had been affected with complete loss of movement in the muscles of the face on the same side, but the sensibility remained intact.

M. CRUVELLHIER presented a new example of "an ulcer of the stomach cica-trized." This case was perfectly analogous to those which have already been exhibited to the Society at different times. M. Cruveilbier had at an early period diagnosticated ulcer of the stomach, and on several occasions he has been able to pronounce with certainty on the existence of this affection. The following are the chief symptoms upon which he insists. The patient has, almost always, vomiting of blood; he recovers, and has a relapse in a short time. The digestion is difficult, the abdomen is the seat of colicky pains; he also passes blood by the rectum, and the region of the comach is affected with a gnawing kind of pain, but we perceive no tumour. A symp-

the patient dies from an abundant hemorrhage. The professor considers this as a

M. BERARD presented the intestinal canal of a female, who, in an access of mania, had cut out two feet of the intestine. This case gave rise to several practical observations of importance. The ileus was furnished with valvulæ conniventes nearly down to the cacum, a circumstance by which the operator was led into an error; for, regarding the wound as having its seat not far from the stomach, he attempted to unite the gut by suture, instead of trying to establish an artificial anus.

M. Berard also noticed a second error into which he was led by following the method proposed by several authors for distinguishing the superior and inferior orifices of the intestine, viz. the greater contraction of the inferior orifice. In the present case, relying on the indication just mentioned, the surgeon had invaginated the inferior into the superior orifice, as was shown by the autopsy; though no ligature had been placed round the vessels of the epiploon, no effusion of blood took place into the cavity of the abdomen. The patient lived for thirtysix hours after the operation, but no trace was found of adhesion between the two layers of the scrous membrane placed in contact according to M. Jobert's method. A discussion took place on the presence of

valvulæ conniventes prolonged so far as the cæcum, in cases where the intestinal canal was remarkably short, as in the present one. A great many members thought that they were merely folds of the mucous membrane thrown up by the contraction of the muscular fibres. M. Rufz said that M. Maniere had seen about twelve cases of peritonitis in which the small intestine was very short, and the valvulæ were prolonged as far as the excum.

The President referred a good deal of these appearances to anatomical varieties; he had seen the small intestine vary from cleven to twenty-one feet; and in one case of peritonitis it only measured seven feet.

M. GARIEI, at the meeting of the 12th of March, read the history of the case of a young man who had fallen from a second floor, and died in a very short time after the accident. Amongst other injuries was found a rupture of the left auricle of the The pericardium contained from beart. five to eight ounces of fluid blood; and the base of the appendix of the left auriton upon which M. Cracelihier lays a good deel of stress is the end of the cutrance of the dental canal posterior of the stress of the

toid muscle, there was no trace of solution of continuity. This latter circumstance is the more worthy of notice, since Boyer has positively denied the possibility of incomplete fracture.

THE LANCET.

London, Saturday, October 3, 1835.

THE present Number of THE LANCET. although it will be dated October the 3rd. will be in the hands of the incdical students of this metropolis on October the 2nd. The 1st of October is generally the first day of the medical session, but it is seldom that the business of the session is actually commenced until the first Monday in October, and until that time arrives it rarely happens, we believe, that the students determine on the respective schools which they will attend; and their just and reasonable irresolution induces them, for a while at least, to withhold the payment of those fees which are so mercilessly extorted from them under the operation of the certificate system. This Number of THE LANCET, therefore, will be placed before them at a time when a few words of advice, relative to their immediate proceedings as students of medicine, may prove satisfactory to their minds, and valuable as to their future prospects.

The students will have already learned, from the regulations which have been issued by the incorporated medical bodies,-the self-dubbed "heads" of the profession,-that an immense number of lectures-NEARLY ONE THOUSAND-must be attended in a given time, and that the practice of some hospital or infirmary must be paid for, even if it be not seen. Now, as the law in its what is denominated "knowledge" when there can be no reason, as the money most of Sur

be laid out, why it should not be disposed of to some advantage. When a young gentleman departs from his native town, after having served an apprenticeship to an intelligent practitioner for the purpose of entering the medical schools of London, it is regarded by his relations and friends s one of the most striking events that can happen during his life; and by parents and guardians it is frequently considered, and with much justice, that the result of the trial which the youthful mind will then undergo, most determine the future conduct and character of the individual. If matters were differently ordained in our profession,- if the accursed monopolies were destroyed,-if the present obnoxious laws were repealed,-students would be left free to visit the metropolis for the purpose of being examined at once, under the scrutiny of a National Faculty of Medicine, or tif they thought proper) to bend to an inclination for acquiring such additional knowledge as our hospitals and schools could afford. The restrictions, however, which are now imposed on their conduct, with respect to the production of the certificates of " recognised" hospitals, schools, and teachers, require that a certain amount of money should be paid as the sign, virtually, that they have been compelled to submit to a double sacrifice,-a pecuniary one in the first instance, and the loss of time as a consequence. Oh! it is a frightful, a barbarous system,-a perfect mockery of the principles which should regulate the measures by which knowledge is to be acquired,-a mockery of the reward which should be afforded to scholastic zeal and industry .-- a fraud hitherto practised successfully on talent,-a bonus willingly presented to the negligent and the ignorant. Nothing but a present most odious state requires that feeling of the most paramount necessity medical students should expend money for could have induced us to urge upon medical students, in many of the proceding numthey visit this metropolis previous to their bers of this Journal the propriety of strictly examination at the College and the Hall, conforming to the college

Although the current of improvement in its maintenance to the monopolies in our medical affairs has been flowing on with considerable activity within the last few years, yet so uncertain are human events, that it has been impossible to predict with any degree of certainty when the Augean stable of medical abuses will be wholly cleansed. We again advise students, therefore, to comp'y with the regulations which have been issued by the different medical boards, because we are desirous that their introduction into the profession, as legallyagalified individuals, should not be retarded by the extortions which are practised on their pockets. A few days observation will convince them of the truth of all that has been stated in THE LANCET relative to the iniquity of the ticket and certificate system. Still, as the "tickets" must be purchased in order to obtain the "certificates," and as the " certificates" must be presented to the Examiners before the licenses and diplomas can be acquired, the student is called upon, by the obligations which he owes to his parents, and by other considerations, if not of a filial, at any rate of a prudential character, to make at least the attempt to acquire information at the schools and hospitals of which he may become a pupil. Some of our lecturers are men of industry and attainments. Moreover, many of them are stimulated by an earnest desire to exccute their self-imposed duties honourably and consistently. Of other teachers no such language can be held. Their industry often ends with the second week of October. How are the students to discriminate? This is a question most easily proposed, but not so easily answered, either by ourselves or by others; because we find in the reports which ware communicated to us by pupils, that a lecturer who may be energetic and instructive during the session of one year, is slugish and uncommunicative in the session of ther year, circumstances of conduct events, when it is & whole of the pr

chartered medical corpotations. The " certificates" must come from "recognised" schools, otherwise they are spurned by the Courts of Examiners. The student may have passed the whole of his life in the hospitals and dissecting-rooms of Paris, - he may present himself for examination with his mind well stored with a knowledge of all the principles and facts of medicine; but he would be scouted, he would be in danger of a kick from the sturdy beadles, at the doors of the colleges and halls, unless he had purchased "tickets" or "testimonisls" from men whom it is very probable that he would himself be capable of instructing.

As we have already stated, a student may have laboured with the greatest possible assiduity with a surgeon in a country town of England. Still he is subjected to precisely the same treatment when he visits the schools and colleges of the metropolis, as though he had not acquired an elementary knowledge of a single branch of the profession. Whatever, we again repeat, may be the attainments of any student in the science and practice of medicine when he reaches this metropolis, he will here find new sources open to him, which he may render available to the purposes of study. and improvement. Our hospitals are capacious; they contain an immense number of patients; and some of the schools are regulated by gifted and instructive teachers. In some of the hospitals, the medical officers attend with regularity. In others they attend most irregularly; and in some of them. all the medical officers actually attend at the same hour, in order, as it would appear, to prevent the students from having the opportunity of observing more than onethird of the practice. Having, however, resolved, a month since, not to allude specially to any one of the schools as an object of advantageous comparison with the mass which will not be regardles incompatible of those institutions, we take this opportuteled-that the nity of recommending the students to exthere arine, with the utmost care and attention as they can find time to estimate, and after ing on what conditions they pay the fees, public.

At our public hospitals no entrance fees ought to be paid. They are public institutions possessed of enormous wealth, and the public have a right to insist that all the instruction which a mere view of the cases can afford, should be presented to the students gratuitously, under proper restrictive regulations, devised in a spirit of liberality towards the medical public, and of anxiety for the welfare of the patients. Yet for witnessing the medical and surgical practice alone of the endowed hospitals, upwards of forty pounds are demanded from every pupil. And this is an imposition which the governors of our charities have every where allowed to be practised by the medical officers. Nav, in one of the old hospitals, during the last session, a sum was paid by medical students exceeding eight thousand pounds sterling. The students, however, have the full opportunity of know- saries 2545

seeing as many of the schools and hospitals for what purposes the fees are paid, and as they have leisure to inspect), the pro- what are the promises made in the hope of spectuses which have been issued from the obtaining those fees; and if they afterwards different establishments, when, on finding submit to be neglected and to be treated that the promises of the performers are with contempt,-if they allow the promises suited to their mental wants (to the wants of and pledges made to them on entering, to be the students), they have only to determine broken, and to remain unredeemed, without that those promises shall be fulfilled when insisting on the concession of their unthe fees are paid, and to take care to obtain doubted rights, why it will be allowed that for themselves at least the execution of the functionaries of our hospitals knew that those duties which the fee-takers pledge they were not treating with young men, but themselves so liberally to execute. If a with children, and that shadows instead of single class of students would but act with realities would satisfy the unreflecting spirit in this respect, it would operate with claimants for redress. Aided by the indesudden and prodigious effect in improving pendent portion of the medical press, it is the condition of the students throughout all, in the power of the pupils to remedy many the medical schools of the empire. Hitherto, of the minor abuses which still operate to the prospectuses appear to have served no the disadvantage of the latter, in the hospipurpose, after the first or second week of tals, dissecting-rooms, and class-rooms, of every medical session, beyond that of entice- ; this metropolis; and in conclusion we assure ment. But the lecturers act most unjustly them that, so far as this journal is concerned, towards the students if they make pledges the pages of THE LANCET will ever be open which cannot be redeemed, and have no to receive and promulgate their well-founded right to complain if, for their delinquency, complaints against parties who may either they are held up to the indignation of the designedly or ignorantly have attempted to interfere with the successful cultivation of their medical studies.

> THE extract in the next page is taken from the report which has been presented by the Poor-Law Commissioners to the Secretary of State for the Home Department. There will be found in this extract some curious matters for reflection. Several of the subjects briefly noticed therein, ought to engage the attention of the profession generally, and if we could be furnished with the results of their cogitations thereon, they might prove of use to us in the progress of labours.

> Where is " Mr. Sharm of Southam," and where are the "Self-supporting Dispen-

EXTRACT FROM THE REPORT OF THE

POOR-LAW COMMISSIONERS

TO LORD JOHN RUSSELL, RELATIVE TO

"MEDICAL RELIEF."

and not before published.)

medical relief. In our present Report we the chief evils of this class, and to the measures we have adopted with relation to them.

We found it a practice, in the great marishioners.

regulation the appoint

acted on the presumption that by the words of the Act (that the medical officer shall be "a person duly licensed to practise as a medical man"), it was intended to include equally physicians, surgeons, or apothecaries duly licensed to practise as such. Applications have been made to us to prescribe, as the qualification of the medical officer of any mion, that he should be a member of the College of Surgeons as well as of the Apo-(Dated from Somerset House, Ang. 8th, 1835, thecaries' Company; but as at present informed, we do not think that the public Anonger the evils which we found our interests would be advanced by confining selves called upon to remedy, was a large the qualification within narrower limits class connected with the administration of than those traced by the words of the Act, and which conform to the general practice. deem it necessary only to advert to some of With respect to the general professional qualifications of the medical men who come within the words of the Act, we have relied on the diplomas of those who are charged by the Legislature with the ducy of jority of instances, for a medical man to examining the qualifications of the candicontract with the parish for the supply to dates for practice, being assured that the the settled paneers of the parish with me-dical attendance for a small fixed sum, on and education, are such as in general to the expressed or implied condition that he render the later diplomas certificates of a should be allowed to make whatever charges degree of competency, equivalent to much he pleased for his attendance and treatment practice on the parts of those who have had of non-parishioners, under suspended or- an earlier education. Under these circumders of removal, or an order of medical re- stances we have considered that the inteders of removal, or an order of medical re-lief by the overseer. When the patient has 'rests of the public and of the profession it-recovered, he is sent home to a parish with a bill for medical attendance, including situations of medical officers in the new charges for medicines at the highest rates, unions open to the competition of the whole Against these charges the distant parish to which the pauper belonged had no aile- attempting to fix the price of the services of quate protection. The pauper was exposed the medical practitioners for the union, we to the danger of being supplied with medi-deemed it the most advantageous that each cines considerably beyond what were required practitioner should for the price of his own for his proper treatment. Instances have services, under competition. Amongst the come to our knowledge where, in large inducements to accept these appointments, populous parishes, the profits of attendance are the credit of the appointment of medlupon paupers under such circumstances cal officers to a union by a Board of Guarhave been upwards of 300% per amount dians, the wider fields these appointments The inferior officers have been feed by the offer for the display of care and skill, and medical officers to search out and give him for obtaining reputation leading to more information of the cases of this description. Profitable practice inducements differing in As a further evil of this system, we may degree, but similar in kind to those upon mention that pappers with their families which men of the most eminent skill find it have been removed from their parishes at a to their interest to give their services to the great expense, when each head of a family chief medical institutions of the country. would otherwise have preferred remaining We may be sure that the medical practitioner and seeking employment in the parish where will, in fixing upon his terms, do nothing his sickness occurred. By countenancing which he considers will not on the whole be these practices, parishes were in the habit advantageous to himself; and next, that he of creating burdens for each other. As a will consider the interests and advantage of check to this system, and to the general expense of medical relief, we have generally cessary, as a security against undue charges required that medical services should be reeven under competition, to adopt as a rule
tained by contract and open tender, including as a condition, that the medical officers
lief within the new unions, shall not exceed
should attend at the same charge, all pathen aggregate of the former exponditure for
tients on the order at the overseer, whether | medical relief in the separate parishes now the patients were partitioners or non-pa- included in the unions. Instances have occurred where the local medical practitioners of medi- have combined to prevent a competition. have The course taken in these instances for the

protection of the rate-payers, and to secure the best treatment to the paupers, has been to suspend our sanction to the appointments, and to cause advertisements to be made to throw open the office to the competition of practitioners from a distance, or of the profession at large.

In some unions, as in the Wycombe union, it has been provided that the terms of the contract should be a remmeration, at a given sum per head, on the number who receive medical relief; but with the proviso, that the gross charge should not exceed a given amount. It is stated to us in evidence, that this mode of proceeding, though adopted reluctantly by the medical profession, has operated very beneficially. The surgeon of the Amersham union states, in

the course of an examination,

"I approve of the system; but the amount in the present contract is inadequate; I think I shall lose a guinea a week by it. In some of the parishes it is at present only one-third of what I have received in former years for the same time. But I approve of the system for these reasons: it is a selfacting check upon the relieving officer in giving improper orders, or withholding proper orders; upon the applicant for medical relief, in making him feel that in receiving it he is a pauper, and causing the parish a specific charge for him; and upon the medical man, by causing an inquiry into each case, so that none can escape attention; and by that means also secures proper attendance to the patient. Indeed, the mode of contract forms a complete system of check and security in cases of pauper medical relief, the want of which was so much felt under the old system.

"Has it tended to curtail the evil of sending all parties to the parish doctor for medical relief, which was so prevalent under the cases of contract in gross ?- Yes, it has; I have many cases now that I am attending as independent patients, who used always before to come to me as paupers. One case is that of a woman of Penn; her son is a master bricklayer, with whom she resides. the cottage and garden their own. She has a daughter about thirty, a sempstress, who gets a very good living. This woman was, with her daughter, always attended by the parish. On my telling this woman that the parish paid a specific sum for her, she refused to be attended, and now pays for herself. There are many cases which evidence ing manner. this effect of the system.

"Of course, the new independent patients

pay you?--Yes, they do; they pay us at the time they have the medicine.

"Now, although you do not receive so much from the parish contract, will not the amount by these new independent patients more than make up the difference?—No, I think not; but it will go towards it."

We anticipate that the introduction of a better system will be beneficial for the destitute sick, as well as beneficial to the labouring classes generally; and that it will be found conducive to all proper interests of the respectable portion of the medical profession.

It will, however, he observed, that the change in the system has not, in many instances, been so long in operation as to acvelop the whole of the effects which may be anticipated from it, in promoting voluntary and independent associations, to provide for the casualties of sickness and mortality.

But even now the reports made to us of the very satisfactory effects of the operation of the rule, are becoming daily apparent. We cite the following passage from a recent Report made to us by our Assistant-Commissioner, Mr. Hall, as illustrative of the tenor of other incidental communications on the subject:—

"The good effects of your arrangements as respect medical relief, are showing themselves in the shape of medical clubs among the labourers. One of the surgeons of the Wallingford union told me that several were in process of formation in his district; and I have heard that elsewhere the labouring class has evinced the same degree of foresight and providence, has given the same proof that, when thrown upon his own exertions, the independent labourer can and will adopt measures answering to the necessity of the case."

Mr. Gulson states, in a recent Report from Oxfordshire.

"Medical clubs are starting up in all directions. The proceedings of the Board, as regards the medical department, have already been productive of the hest results. Highly respectable medical men are undertaking to attend all cases for an annual subscription of 2s. for a single person; and for 4s. 4d. they engage to attend a whole family, however large, so that it does not include children above sixteen years of age. At Witney, Benson, and other places, the labourers are subscribing in considerable numbers to independent medical clubs."

Mr. Gilbert reports to us, that in several parts of Buckinghamshire similar effects, resulting directly from the change of medical relief, have been developed in a striking manner.

The increase of provident institutions, as arising from the general influence of the change of system, was confidently anticipated from the marked increase of deposite in the savings banks; espoits by labourers who had previously then patients, observed in several of the particle, which were the carliest districted. The santicipation has been saved.

of the prosperity of the existing provident is assumed to be the enemy of the pupils on institutions, and by the increase of new institutions coincidently with the change of the law. Mr. Tidd Pratt, the Barrister ap-pointed to certify the rules of Savings Banks and Benefit Societies, states to us-

"That the increase in the number of Friendly Societies since the passing of the Poor-Law Amendment Act, has been very considerable as compared with the year previous thereto. From the month of August 1833 to August 1834, the number certified by me was 360; but from August 1834 to the present time, I have certified nearly 750, being an increase of 390, or more than double the number certified in the previous year. Independently of which, I am happy to say, that these Societies appear to be founded on calculations more likely to enable them to fulfil their engagements with the members, than those which were here-. tofore in existence; and this I attribute, in a great measure, to the rules and tables against even the most improbable incidents which have been printed by order of the Lords of the Treasury, and gratuitously distributed.

"With respect to depositors in Savings! Banks, the increase during the last year has that the obstacles originate in design, to make been very considerable. The accounts are made up annually to the 20th of November; and although from November 1831 to No. the acts of secresy, the dates of their occurvember 1833 (being a period of two years). the number of depositors increased during that period 44,750, yet from November 1833 to November 1834, the increase in the number of depositors has been nearly 33,000, and in the money deposited, nearly a million; and in each of the following of the "Case Book" of a public functionary counties, viz., Bedfordshire, Berkshire, Bucks, in a public hospital. Cambridgeshire, Essex, Hertfordshire, Kent, Norfolk, Suffolk, and Sussex, a marked increase has taken place in the number of the be obtained, whether of clinical clerks or small depositors.")

SEVERAL students who are attending the practice of St. Bartholomew's Hospital, state to us that obstacles are thrown in the way of their examining the Case book which is kept in Matthew's and Mary's Wards in that establishment, whenever they attempt to inspect it for the purpose of deriving information relative to the patients in those parts of the Hospital. We refrain, however, from publishing any of the communications that have reached us, because they are couched in three of indignation which, at present, we have resent to hope, are not correctly applied. The

this occasion, but that gentleman cannot be desirous of rendering such an interposition a matter of public inquiry at this juncture. The case of a medical officer who would act as our correspondents allege, would prove a bad one for the defendant before a tribunal of public inquiry, from whose scrutiny there could be no escape, and whose members were not to be blinded by any holeand-corner physician in the metropolis. What reasons for enjoining secresy respecting his mode of treating the sick-poor in St. Bartholomew's Hospital can Dr. LATHAM

However, as it is as well to be provided of an untoward character arising out of events which affect us in life, we recommend those gentlemen who may be satisfied exact note of the circumstances attending rence, the names of, and all essential particulars respecting, those with whom they may originate, or who may act as agents of the principal, or in any way abet the hidings

The names and addresses in full should nurses, and information forwarded to us relative to the extent to which the restriction may be carried, -whether the book be whelly kept back from inspection, or opened to view only at such inconvenient times in the presence of such persons, and in such manner, as to prevent students from examining the book with comfort and advantage in the pursuit of their inquiries. All these things should be especially noted, in order that the measures adopted in defence of the pupils and the public may be complete, both as regards the remedy for the evil and its effectual exposure.

THE following recommendatory "testibalties expe- monials" have been forwarded to our office for insertion in the advertising columns of THE LANCET, but as we can find a far more | much light from their researches. H. Griproper and striking place for one of them, than even the very best part of our cover affords, and as it would be extremely unfair to Mr. GRIMSTONE to give a more conspicuous position to the advertisement of Mr. BATTLEY than to the advertisement of Mr. G .. - the two being so exactly similar in character and object, -moved by these considerations, we present them both to the profession in this place :-

ADVERTISEMENT .-- Copy of a Letter sent to Mr. G .- "Dear Sir, - I here beg to inform you, that my ears, thank God, continue very strong; and I have had no defect in my sight since my taking your car sunff, although I experienced so much pain in that delicate organ, the ear, for many years prior to my using your valuable invention. Sir, I send you this as a further testimony to my last, in January, 1834. I shall be glad to give my testimony to the unexpected relief I have received from your car snuff, having tried almost all the skill of the profession, and they failed in relieving me, or giving me that substantial relief from deafness your snuff has. Yours with much respect,

" H. PLUCKWELL.
"Tottenham, Middlesex, May 27, 1835."

ADVERTISEMENT. - Mr. Battley, Chemist and Druggist, has been so successful in his preparations of the various articles of August) 103; for the bandle season 93; for the Pharmacopenia, and particularly of those the cold months (November to February) of the vegetables used in physic, that I am | 89. anxious to facilitate his introduction to the professors of the several schools of medicine in the country, by bearing my testimony to rence on the susceptibility of contracting the his merit, and I offer this with the more disease, for if we divide the ages of those confidence, as the several censors of the received into the hospital during the last 8 College of Physicians for many years past years into four groups, viz., from 18 to 30, have always declared themselves so highly satisfied by Mr. Battley's preparations,

HENRY HALFORD. President of the Royal College of Physicians. Curzon-street, Nov. 20, 1831.

WHO NEXT, WE WONDER?

Essai sur la Colique de Plomb .- These de M. A. GRISOLLE, Interne Hotel Dicu.

This essay is one of those productions which from time to time reflect so much credit on Paris as a school of medicine. It is not a simple thesis, written for the mere purpose of obtaining a diploma, but a profound investigation of a subject which has often occupied the serious attention of practitioners, without receiving too

solle is a pupil of the Louis school, and the thesis now before us is a proof of the immense superiority derived from a careful and accurate examination not only of the symptoms generally attributed to any particular disease, but of all the symptoms which the patient may present during the course of his maluly. Pursuing this method, M. Louis and his school have not only arrived at the discovery of several principles which had been overlooked, from time immemorial, from want of attention and corolleration, but they have also thrown an immense light on symptomatology and diagnosis. M. Grisolie's thesis consists in an analysis of fifty-eight cases of painter's colic observed by him with minute attention at the Hopital Bearing during the year 1834. We shall notice some of the most interesting facts which he has established.

M. Chomel is of opinion that painter's colic is much more frequent in summer than in winter, and attributes this difference to the greater activity of the works in lead during that season; but in a manufactory, where the same number of workings were employed the whole year round, the author found the average proportions as follows:for the warm months (May, June, July, and August; 103; for the taiddle season 93; for

The age seems to exercise a certain influence on the sasceptibility of contracting the from 30 to 40, 40 to 50, and 50 to 57; we find the following to be the mean residence for each in the workshops, before contraction of the disease, 65, 60, 58, and 37; hence the number of days necessary to gain the disease, evidently diminishes with the age.

Authors are generally of opinion that the red lead is more injurious than the white, but there are few or none who support this assertion by a comparison of numbers; in the absence of other facts we must accept the testimony of the author, who found that eleven workmen at Clichy could work at red lead during a period of seventy-three day before they fell ill, while the workmen on white lead at the same establishment fall ill before a language sixty-five days.

As a to to our intention to follo-

author through the whole of the laborious the symptom was so little apparent, that it of the disease, we shall merely give a resume its existence. of the symptoms which constitute the disthe parietes of the thorax, and even to the means directly addressed to the stomach. genital organs or thighs. Their essential. The slowness of the pulse is also a come on, such as bitterness in the mouth, cases where the pulse was as low as fortytestinal canal we have almost the appear-; tensity, ance of strangulation: there is a stop to the! The point in the gould organs, which are passage of stercoral, and even of gaseous more commonly situated in the traject of the matter; the nrine is secreted in less about spermatic chord than in the testicles themdance; but in the midst of these sufferings, selves, were noted in a little more than which are sometimes terrific, the pulse one-fourth of the patients. When pains remains calm, and even frequently descends existed in the extremities, it was the lower below the normal number. Finally, we which were most frequently affected (threesometimes observe, either during the disease, fourths to one-half), while in one-third of or as consecutive symptoms, various acci- the nations the loins were the seat of pains dents relative to the functions of the cerebro- i not unsimilar to rheumatic ones. The headspinal axis, as convulsions, delirum, coma, ache was always of short duration, and was general or partial paralysis affecting the noticed only nine times in tairty-seven cases. limbs or organs of sense.

constant symptoms of colica pictonum, and somewhat less, being about one-sixth. (?) that by which the commencement of the | Epilepsy is one of the most grave accidents sure neither augmented nor relieved the locentrence. pain; and, finally, in five cases the patient's The march of colica pictonum is very irsufferings were exasperated by pressure on regular, but its termination is in general the abdomen, whether moderate or power- favourable. The want of accuracy prevents

scribed as a special symptom of the colica Duchesne. In the fifty-six cases of the prethus, in forty-six cases in which the author from a sudden attack of epilepsy. The Sought this symptom with the utmost care, intestinal canal in these two was examined he found thirty-one in which the abdomen with the utmost care, but no trace was presented the ordinary volume and appear found of abnormal coloration, softening, or ance; in fifteen only he found the abdomen hypertrophy of the tissues. The cerebral natracted, and even in many of these cases convolutions were generally flattened, and

researches which he has made on all points required a good deal of care to determine

Nausea and romiting are also symptoms ease, viz., intense pain in the abdomen, con- which frequently exist. The author has stantly affecting the patient when the dis-lobserved them thirty-two times in forty-six; case was fully established; but, however, the matters ejected were always greenish, becoming exasperated at intervals, more or and excessively bitter; they bore no relation less approaching one another. The colicky to the intensity of the disease, and seemed pains irradiate towards the loins, the rachis, to be idiopathic, as they were removed by

character is in general to be calmed under symptom frequently noticed by authors. In pressure: they are sometimes accompanied the cases reported by M. Grisolle, the pulse with retraction of the abdominal muscles: varied between forty-eight and eighty-four, symptoms of gastrie derangement now soon the first few days of the disease; and in all nausen, bilious green vamiting: in the in- eight, the malady prevailed with great in-

. In the seventy-eight cases of colica pictonum The abdominal pains are among the most analyzed by M. Louis, the proportion is

disease is most clearly characterized. As to that can arrive during the course of colica the circumstance so generally noticed by pictonum, but it would not appear that it is authors, of their being relieved by pressure, a frequent one. The author observed only we find the following results from an analy-two cases in his fifty-eight. The disease sis of the fifty-two cases which M. Grisolle appeared suddenly, and carried off both has followed; viz. In forty cases the pains patients after thirty-six hours. Paralysis were relieved by pressure; in seven, pres-lalso appears to be a consequent of rare

us from giving any faith to the results noted Retraction of the belly has also been de- at La Charite by MM. Gardane, Merat, and ictonum; however, it is not a constant one: sent thesis only two died, as we mentioned,

sistence of the brain was diminished throughout, but there was no trace of injection or of serous or sanguincous effusion in any part of the nervous centres.

The treatment of the colica pictonum has been various. That employed in the greater number of cases recorded by the author was the method so universally known as "the treatment of La Charite," and which consists in giving opium with purgatives, by the month or rectum. The purgatives, however, are what we in England would call laxatives; thus the lavement most commonly administered was-

R. Decoction of Senna [5i]; Sulphate of Soda, Mercurial Honey, na. 5ij; Water q. s.

These lavements were administered alone, or combined with opium, to sixteen of the patients, of whom seven were affected with the disease in a very intense form. During the course of the disease, which on an average lasted five days and a quarter, they took six lavements, and five grains of opium. The other nine patients were affected less intensely; they were cured in four days and a quarter each, and took about four lavements and three grains of opium. This latter remedy was never administered until the constipation had been overcome, and the nationt already more or less relieved. In six cases purgatives were given at the same time by the mouth and rectum; under the latter form they produced more abundant evacuations and most relief; these patients were cured in a period of seven days and a quarter. Three different kinds of purgatives were employed, viz. castor oil, mixed with one to three drops of croton oil, and the huile d'epurge, a lead remedy. En remné the patients thus treated by the evacuant method were cured in a period varying from five days and a quarter to eight days, the maximum of treatment.

Within the last few years M. Gendrin has energetically insisted on the value of sulphuric acid, both as a prophylactic against the colica pictonum, and as a remedy for the disease when fully established. However, the researches of M. Grisolle seem to throw more than doubt on the first of these properties. Thus at the manufactory of Clichy, the mean duration of the workmen before catching the disease, is seventy six, when they have not drunk the sulphuric tisan; ductions

the anfractuorities nearly effaced: the con- | while those submitted to the prophylactic treatment of M. Gendrin, do not remain more than fifty days free. As to the comparative value of the treatment called that of "La Charité," and the acid treatment, it requires a more extensive comparison of facts than we as yet possess, to enable us to judge between them.

> The Gums, with late Discoveries on their Structure, Growth, Connexious, Discases, and Sympathies. By GEORGE WAITE, M.R.C.S.L. Longman, 1835, pp. 160.

THE principle of the division of labour has been applied to medicine from a very early period; in Egypt, Greece, and Rome, when civilization had reached a considerable pitch of refinement, besides physicians, surgeons, acconcheurs, rhizotomists, and pharmacopolists, medici ocularii and medici dentarii were found exercising their respective vocations with distinction. In the precent day, the "world of man" has been mapped out into so many compartments, that it is, perhaps, time to inquire whither the division and dispernherment is tending; whether the great connexions of the whole are not broken up; whether the general laws which govern the inside, the outside, and every individual part of our frame, are not overlooked; and whether the influence exercised on organs by each other, and by external circumstances, is not forgotten; whether, in fine, the science of medicine is not sacrificed to a great many arts. One man pays particular attention to the stomach; another watches over the biliary secretion of the kidneys or the bladder; this takes the lungs under his especial protection; that counts the beatings of the heart, or regulates the workings of the mind; Mr. Alexander takes care of his Majesty's vision: Sir Charles Mansfield Clark waits upon the Queen; Mr. C. by some strange fortune humbugs the Royal car; and Mr. D. puts in. claims to perform the same kind of office to another section of the Royal Person, "et adhuc sub judice lis est."

Interesting as an extended inquiry into the effects of the division of labour applied to medicine would to, we have here only time to point it out as worthy the attention of several iserations gentlemen whose proionally fall under our notice. want a hero, so they often want a subject, the mind. at least "a new onc."

We pass over Mr. Waite's rather fantastical application of an old doctrine concerning the four ages of man, and the seasons of the year, to the teeth, which would thus bave their spring, snumer, antumn, and Winter; as well as his illustrative quotations from Sophocles and Pindar; and shall extract his "Synopsis of the Diseases and Morbid Alterations of the Gums."

Synopsis of the Diserses and Morbid Allerations of the Gums.

"Diseases produced by proximate causes. "Infantine and puerile diseases of the

"Abscesses, tumours, swellings, inflammations, morbid affections.

"Diseases produced by remote constitutional causes are, First, those from the effects of scurvy or from scrofula. Secondly, from constitutional irritation, when neither scurvy nor scrofula has developed itself. Thirdly, from fevers, from indigestion, from catarrh, from inflammations. Fourthly, from mercurials. Fifthly, from constitutional debility, however induced, including nervous excitement and the passions of the

"1st. Diseases produced by senry are, A turgescence of the gums, with a brownish appearance of their structure.

An inordinate detention of bighly carbonized blood in their vessels, and occasional hemorrhage.

Diminished vitality of the capillary vessels. Suppuration, with purulent discharge from the mucous surfaces of the gums.

"2ndly. Diseased appearances produced by scrofula. An alteration of the glandular structure

of the guar, with disease of the capillary ve-sels.

Detention of blood in the apices of the

Morbid exudations from the surfaces.

An atonic state of their general circulation.

These diseased appearances being devoid of the brown colour perceptible in scurvy,

"3rdly. Diseased alterations from constitutional irritation, when neither scrofula? nor scurvy has developed itself, are

General heat, irritation, and redness, fungous excrescences, and hardened ridges. "4thly. Diseased alterations from mercu-

rials produce Increased glandular action and vascu-

larity. Foulness, languet. alough of the capillary vessels.

Morbid sensibility. Heart

and convince us that as poets sometimes induced, including the various passions of

Atrophy and atom of the sum.

Absorption of the socket and recession of the gum.

Languer, and the same morbid sensibility as results from the use of mercurials."

Mr. Waite's remarks on false teeth merit attention.

"Another condition in which we must consider the gums is that into which they are often brought by the unrelenting work of the tooth-maker. A tooth may early in life have been pivoted, and perhaps have gone on twenty years with tolerable comfort. This is often so when the root on which the tooth is pivoted is sound and good. The case, however, now alters: the root becomes either loose in the socket or worn by the pressure of the pivot, and it is necessary to fix it in another manner. This is effected by means of a plate of gold stamped exactly to the shape of the vacant gum and adjoining teeth, round which clasps are worked. The best contrivances of this nature which we meet with are those worked for many of the eminent tooth-makers of London by Mr. Claudius Ash of Broad-street. Those persons who profess peculiar methods of fixing false teeth, and pretend that inventions belong solely to themselves, are generally the adventurers of the town. The great secret of false teeth consists in employing scientific manufacturers."

Mr. Waite's work displays a better knowledge of general physiology than is possessed by ordinary dentists, whose ignorance is generally as prefound as their plunder is enormous.

Rust's Magazine, &c.

THE last No. (No. 2, Vol. 44) of this journal contains:-

- 1. Fragments from the note-book of a clinical lecturer. By Professor BENEDICT, Breslau.
- 2. Remarks on several of the Symptomatic Affections which coexist with increased sensibility of a portion of the Spinal Column. By Dr. Ess. (Continued from No. 1.)

3. Case of obstinate Retention of Urine, produced by Inflammation and Supporation of the Prostate By Dr. ANGERSTEIN.

4. Case of immense Lipomatous Tumour. By Dr. BKHB. (With a plate.)

Although an attempt has been made by Mr. Green, at St. Thomas's Hospital, to render some account of the medical statistics of that institution, and an announce-"5thly. Constitutional debuity, however ment of a similar attempt is made by Mr.

South, "of that lik," yet we are quite the operation, when the left kidney was certain that the creation will rarely be ful- found in a state of supportation, and the lowed, and that the stander of our public medical charities will not be made public, until the management of those establishments is in new hands, which, thank God, it soon must be. We have been frequently asked by some of the principal surgeons in Paris, to point out any work or journal in which they might seek for accurate accounts of the number of patients treated in the London hospitals, the comparative mortality of each, in short, any statistical survey of their population; but we have as often been compelled to answer, that our surgeens are in general too much occupied in making money to attend to anything not immediately connected with that absorbing object. For ourselves, being convinced of the great benefit which may be derived by amassing together these statistical details, so as at length to form the basis of general deductions, we shall not fail to gather, from time to time, the valuable fragments scattered through our foreign contemporaries, and thus in some measure supply a want which had much better have been satisfied by our own countrymen.

1. PROFESSOR BENEDICT'S FRAGMENTS.

The first article we have to notice in the present No. of Rust's Magazine, is a kind of review of the surgical clinique at the University of Breslan for the years 1528 to 1833 inclusive. The number of patients treated during that period was 5712, viz. 2812 surgical, and 2900 ophthalmological cases; however, the number of the former selected for clinical purposes did not exceed 700, to whom alone the following observations refer.

LITHOTOMY.

This operation was performed during the six years, thirteen times; once on a girl of twelve years; the rest on males, the oldest of whom had reached the age of fifty-three. All these patients were cured, with the exception of four, none of whom died immediately after the operation. Thus one of these four, a boy sixteen years of age, had been dismissed cured from the establishment, but died eleven weeks after of typhus fever. The second died fourteen days after

right one engorged. In the third case, death on the 11th day, evidenced suppuration of the left kidney, extending down to the pelvis. The fourth case was fatal on the fourth day from peritonitis. In reference to lithotomy, Professor Benedict relates a very curious case, which, on account of its termination, i.worthy of record. The patient, fifty-three years of age, who had long suffered from symptoms of stone, was received into the hospital in 1816, but left it without an operation having been performed. After a lause of twelve years the patient presented himself again, but during this time the calculus had acquired such a magnitude, that whenever the sound was passed between it and the bladder, it became locked. It was thought searcely possible to remove the stone by an operation; however, this was undertaken, and the incision being prolonged considerably towards the rectum which was not injured), the calculus was extracted after its outer shell had given way under the forceps. The stone weighed seven and a half omees, without counting several fragments that were lost. On the fifth day the patient was seized with low typins fever, without any signs of inflammation of the urinary or abdominal organs. The usual stimulants seemed of no avail, when the anthor accidentally learned, that his patient was a confirmed brandy drinker. All other means were at once laid aside, and the ratient given a lablespoonful of boundy every two hours. This treatment was followed by such happy results, that in four days the quantity of brandy could be diminished, and the patient was content with a glass at breakfast. The patient was discharged cured after some months.

LIGATURE OF UMBILICAL HERBIA.

This operation was practised twice, a.cording to Dessault's method, within the period above mentioned. Although both cases were successful, the author says he would neither recommend nor undertake it again. In these, as well as in all the other similar operations practised antecedently, symptoms of severe inflammation of the abdomen set in after the third day, and were combatted often with very great difficulty. The author has gequently removed funguid excrescences from the navel of young chil-

dren by the ligature (a disease frequently curred again. Of ninety-eight amputations met with at the Clinique), without giving of the breast, which author has perrise to any of the accidents before described. formed since the charge of the

STRANGULATED HERNIA.

in the period between 1828-33; five cases of disease returned after the wound was healed. inguinal hernia, two deaths; eleven cases of and terminated in death. With regard to fanoral hernia, four deaths. In most cases, the remaining thirteen, the author observes the fatal result arose from gangrone of the he is morally convinced that, in several intestine.

was going on in the most favourable manner, affected with scrofulous tumours, sarcoma, when he was suddenly seized on the fifth or some other innocent change of structure. day with trismus (in consequence of expo sure to cold), and died in thirty-six hours. The autopsy did not afford any result.

patient died of gangeme.

AMPUIATIONS.

Amputation of the extremities was performed twenty-five times; of the upper arm; five, one death; one case of medullary fungas of the fore-arm, cared; of the thigh if teen, cures ten; of the leg four, two deaths. The amputation of the upper arm was performed in three cases after Alamon's method (the funnci-shaped stung); in the rest with a single flap; that of the fore-arm with a single flap; of the lower leg, the single flap; of the thigh, in three cases, with the double vertical flap; in one case with the single flap; in one by the circular method; and in the rest, according to Guarfe's modification of Alauson's method.

CANCER.

The operation for cancer (not including cancer of the lips was performed thirtyeven times. However, with the exception done or two cases treated by arsenic and parently cured, a radical cure was not obtained in a single case.

Extirpation of the breast was performed three times, and under circumstances apparently very favourable; in all the charase re-

clinique, two ended fatally from exhaustion during the healing of the wound; and in all Herniotomy was performed sixteen times the rest, with the exception of thirteen, the cases, an error of diagnosis was committed, In one case of inguinal hernia, the patient and breasts were removed that were merely

The above results are worthy of serious attention, and serve, unfortunately, to confirm the opinion advanced by many sur-In a case of femoral hernia in the female, geons, that in most cases cancer is a conthe epigastric artery, which ran transversely stitutional, not a local disease. After an over the sac, was divided. The wounded investigation of a great number of morbid vessel immediately gave a strong gush of specimens of this disease, the author problood, and revealed the accident; the strict poses to divide scirrlus into three kinds; ture was divided, as the author i in the habit; viz., the lardaceous, the hydatiform, and the of doing in all cases of hernia, from below knotty scirrhus. Passing by the two former upwards, and from without inwards. The as sufficiently known, the author gives some divided artery was immediately fied, but the remarks on the latter that are not without interest. This is a rare affection, and, on account of its march, is frequently confounded with a malignant and fatal form of scrofela. The patients are generally affected with small knots in one or both breasts, which do not e alesce during the progress of the disease. After these appear the ordinary tumours in the axillæ, and at the same time we perceive ranges of small knots along both sides of the neck, tumours in the inguinal region, on the shoulders, and in several other parts of the body. Each of the knots now mentioned remains isolated, but approaches the skin, and finally becomes attached to it. The integrament here assumes a hard, cartilaginous feel, is covered with varicose veins, and terms into a single small cancerous tumour. The patients now generally suffer under pectoral symptoms, with abdominal derangement, and in all the cases which occurred to the author, death took place in less than six months.

Cancer of the lip was removed in fiftyone cases, all successfully except one, where the patient was in a state of great weakness at the time of the operation. The author, however, regards it merely as a palitative operation, as it invariably returns in some other part of the body, or in the cicatrix itself. There are indeed a few cases in

which the turning did not reappear, but here ! the hernia was strangulated for three days ; it was evidently a local sease, produced by the face was now sunken; the body covered some external cause, and not perfectly identical with the cancerous disease. As far as the author's observations extend, this false cancer is generally situated in the red surface of the edge of the lip, and does not pass beyond it, is more flaccid, and is chronic in its march; the sympathetic swellings in the neck are wanting. According to the opinions of modern surgeous, we may hope for a successful result whenever there are no tumefied glands under the jaw or in the neck; but from the author's experience, the absence of these signs does not justify a favourable prognosis. Either small soft tumours of the glands already exist, as may be discovered by a minute and careful examination of the parts in the neighbourhood; or the lymphatic system is implicated, without any actual enlargement of the glands, which does not take place until some time after the healing of the wound.

Our analysis shall be concluded in an early number.

Hecker's Annalen, &c. Vol. I. No. 4.

The last part of this periodical contains -1st. Practical Remarks on Rabies in Dogs, Horses, Sheep, Pigs, &c. By Dr. WAGNER. 2nd. Practical Remarks on the Use of the Exhausting Pump (Langpumpe) in which the following is an abstract :-Strangulated Hernia. By Dr. Kouller.

3rd. On the Literature of the Venereal Disease. By Dr. HACKER.

2. REDUCTION OF STRANGULATED HERNIA BY THE EXHAUSTING PUMP.

The use of the air-pump, as an agent in the reduction of hernia, was first noticed, we believe, by Professor Hauff in the year 1818. Hufeland's Journal for July 1832 also contains some remarks by Dr. Busch on the same subject. Finally, the No. of Hecker's Journal now before us contains several cases, which, as they are probably new to our English readers, we shall notice briefly.

Case 1 .- In October, 1833, the author, years from scrotal hernia. After some days though seconded by venesection and of a fit of indigestion the patient began to According to the account of his attendants, however the removed after a short time.

with a cold sweat; the extremities cold; the pulse barely perceptible. No stool for the last three days. The author had immediate recourse to all the common remedies, venesection, cold applications, parcetics, enemata, baths, drastic purges, &c., without any effect; the danger was most pressing, and nothing seemed left but the operation; bowever, the exhausting pump was tried as a last resource. Immediately after the application of the apparatus, which was placed over the abdominal ring, the operator began to perceive some gargouillement in the hernia; this gave encouragement, and in a short time, to his great pleasure, the parts were restored to their natural position. Alvine discharges were obtained in a few hours, the vomiting ceased, and the patient was restored to health in a few days.

Case 2 .- In January 1834, a female, sixty years of age, was affected with ingoinal hernia on the right side, and sodden femoral bernia on the left side; it was impossible to return this latter; symptoms of strangulation soon set in, and the necessity of an operation was agreed on in a consultation of surgeons. The air pump was applied. After the first application a little gargonillement; after the second, partial return of the gut; after the third, complete reduction of the inernia.

Professor Janekowski has communicated a very remarkable case to the author, of

Case 3 .- The patient, a strong healthy woman, fifty years of age, perceived the first trace of an umbilical bernia about two years before. The tumour had acquired some size before she experienced any remarkable symptom; it was then partially reducible, and the pains in the abdomen and swelling were alleviated by opening medicines. After the lapse of about a year the tumour became suddenly the seat of intense pain; there was obstinate constination for six days, which only yielded to general blood-letting and purgative ene-mata. On the sixth day inflammation set in, and terminated in abscess of the integuments. At the end of August the patient was attacked a second time with inflammatory symptoms, which now assumed so severe a character as to threaten her life with Dr. Kohler, was called to a Jew, sixty years imminent danger. The hernia could not be of age, who had suffered for the last nine reduced by any of the ordinary means of a fit of indigestion the patient began to peated purgative glysters. On the stiffer from pain in the abdomen, and the day the tumour became excessively pair hernia could not be returned even by a sur-nernia could not be returned even by a sur-geon; the symptoms were now rapidly ag-and a fatal termination; seemed almost ingeon; the symptoms were now rapidly ag-gravated, and the author on his arrival found the patient in a state of great danger. but at first moduced a great deal of pain;

and the taxis was now practicable with the ed "An Association of Common Naturalists greatest facility. In a few hours copious and Physicians," which first assembled at evacuations were produced, the symptoms Leipsic, and changing annually the place of of strangulation subsided, and three days its meeting, visited Berlin, Vienna, Heidellater the patient was perfectly cured.

In addition to the cases which we have just quoted, the author details six others, where the air-pump was employed with equal advantage, and adds that in twenty- Bonn; and they had, undoubtedly, con-three cases, the greater part of which were duced greatly to the improvement of the fail to justify his confidence; he therefore were always found the most zealous proconcludes, by expressing a hope that a remedy of such power may meet the general consideration which it descrees.

3. LITERATURE OF SYPHILIS.

This is an analysis, completely in the lahorious German style, of all that has been written on the venereal disease during the years 1831 and 1832. The works of authors which are analyzed (alphabetically arranged) amount to no less a number than fifty-seven, and the series is not yet completed. Those who occupy the aselves specially on syphilitic diseases will here find a fund of curious, and no doubt useful, information, for not one has been neglected.

FORMATION OF AN

EASTERN PROVINCIAL MEDICAL ASSOCIATION.

On Friday, the 25th inst., a meeting was held at the Guildhall, in Bury St. Edmunds, for the purpose of forming a society under the above name. Upwards of seventy gen-tlemen of the profession, from Suffolk, and the adjoining counties of Cambridge, Norfolk, and Essex, were present.

Dr. PROBART, of Bury St. Edmunds, took the chair, and said that the meeting originated in the published letter of an influential individual now present. The call had been responded to in a most gratifying manner, and there could be but one opinion as to the general utility of such a Society. Resolutions had been prepared, and he those gentlemen to whom they were enisition.

berg, Frankfort, Hamburg, and some other towns of note. These annual scientific meetings had continued uninterruptedlythe last having been held in the present month, with undiminished gratification, at desperate, the means now alluded to did not natural sciences, of which medical men moters. Numerous learned men from this kingdom, including many eminent physi-cians and surgeons, had annually attended the meeting of the German Association, and, amongst the fruits of that intercourse, we might trace the origin of The British Asso. ciation for the Advancement of Science, -a society first instituted about four years ago at York, successively holding its annual meetings at Oxford, Cambridge, and Edinburgh, and terminating the brilliant work of its fifth meeting lately in Dublin. It would seem that this Society was destined to raise the character of our countrymen throughout Europe; it had increased in numbers, and still more in beneficial results, yearly; and had, indeed, spread a fresh ardour in the pursuit of science throughout the British dominions. The proceedings of its medical section at the recent meeting, so fully recorded in the last number of the " Dublin Journal," had brought much dormant talent into activity, whilst the funds of the society had been liberally voted to physiological researches, determining questionable points, and establishing facts that come home to every well-exercised practitioner, by bearing directly on the diagnosis of certain diseases. Out of the British Association another had arisen, which was exclusively medical, but embraced a less extent of district—the Provincial Medical Association, instituted at Worcester in 1832, through the efforts of Dr. Hastings, and a valuable volume of transactions had appeared yearly from it, the fourth being now in the press, forming the only series of transactions devoted to medical topics that had ever been published in England out of the metropolis. This Society enrolled 500 members, but having originated in the West, it had failed to culist many gentlemen in this eastern and remote district, although intended to apply to the whole kingdom. should be happy to hear the remarks of The proceedings, said Mr. C., of the meeting at Oxford have been so amply reported, that pated. He concluded by reading the re- every gentleman now present must be acquainted with them. Before I attended that Mr. Crosss, of Norwich, addressing the chair, said that he wanth individual who had been induced to deal motion the simple means for bringing them together.

(Applause.) Is was easier to the them to have a dozen years ago to the full that the mean in this county having already made a fruitless attempt. Yet there is a conviction

amongst us of the necessity of taking some jone guinea be contributed by each member, such step; few of us can so far desert our avocations as to meet the Provincial Association our Eastern Association. (Applause.) In the six adjoining counties there are about a million and a half of inhabitants; yet not more than a few cases in the course of each year are turned to advantage through the press in the whole district. In the counties referred to, only a few medical men, I feel assured, belong to any Medical Association, and, judging from the effect of the associations preceding us, one in this district must bring forward the hidden experience of many, and awaken into fresh action and energy a valuable body of lahourers in the calling we profess. The medical statistics of each county will furnish much matter. Medico-legal science may be promoted by close attention to inquests. The district contains many hospitals and dispensaries, and reports of the practice of such institu-tions will be for the first time produced. Every man of experience in practice meets with something that might prove profitable, if communicated to his brethren. During my twenty-five years' residence amongst you, I have known many enlightened, able, and zealous practitioners in the most retired situations. The association we are met to form may gather a storehouse of public knowledge. Moreover, assemblies of gentlemen of our profession generate kindly feelings, promote good understanding, and console us in our solitary hours. Thanking you for a patient hearing, I leave in the hands of other gentlemen the moving of the several resolutions. (Applause.)

Dr. PROBART said the meeting was greatly indebted to Mr. Crosse for his able address.

Dr. Evans said he would only remark that the formation of such a society must prove highly beneficial to the profession and the community. He, therefore, proposed, "That a Society, consisting of Physicians, Surgeons, or General Practitioners, residing in the counties of Cambridge, Essex, Huntingdon, Lincoln, Norfolk, and Suffolk, or in other parts of the kingdom, should be and now is established, to collect useful information in medicine and its collateral sciences for publication, to maintain the respectability of the profession, and to promote a friendly intercourse and communication between its members.

Mr. Abbott, of Cambridge, seconded the resolution. The Society, he said, would pe-

to be paid in advance.

Dr. Bainn commended the alacrity with at the large towns of England; but we are which the case made out by Mr. Crosse, social and scientific; therefore must we have who had so eloquently addressed them, had been responded to; it was high time that provincial medical gentlemen should strive to become more useful to the profession. Being, generally speaking, as it were, rari nantes in aproite rasto, they laboured und r the disadvantages of a want of co-operation; but he hoped that henceforth their medical character would be reducated in the eyes of the public. He begged to propose, the Society do publish, in the form of Transactions, all such essays, memoirs, cases, or reports of public institutions, sent to them, as may be thought worthy of publication."

Dr. FISHER, of Cambridge, seconded the resolution. Carried unanimously.

Mr. Borrett, of Yarmouth, proposed, "That a general meeting be held annually at one of the principal towns of the counties specified in the first resolution, and that the first take place at Ipswich on the first Monday in June, 1836.

Dr. ENGLAND, of Norwich, seconded it, and said he fully coincided in the principles of centralization; he thought that stremuous efforts should be made to improve medicine in the eastern provinces, or, as railroads were becoming so general, we might soon expect to see patients travel by steam to consult the physicians of other places.

Dr. Fisher thought the time specified would be inconvenient to residents at Camhridge.

Mr. Crosse said it had been selected with a view to accommodate the profession in general. He thought the general meeting ought to take place prior to that of the Provincial Association, at Worcester, because a deputation could then go from the branch to the parent institution. (Carried unanimously.)

Dr. WAYTE congratulated his brothren on the object of their meeting, and especially on the opportunity that would thus beafforded of defending their rights and mivileges. He was not a general practitioner now, but he had been, and therefore could enter into the feelings of those gentlemen on this subject: their calling was laborious and ardnous, and they were often compelled to sacrifice their own health and comfort for the good of others. That profession was not only now invaded by both itinerant and regular quacks, but more recently by acts of Parliament-the Commissioners under the new Poor-Law Act, aiding the overseers grind the medical man to powder. culiarly gratify him by bringing gentlemen planes. He thought the profession just into friendly intercourse with each other from different places. Carried unanimously.

Mr. Jean-Renson of Framingham problement and he had no doubt their posed, and Mr. Peck of Newmarket seconded, "That an annual subscription of Application of the control of the contro

3.00

stars in the Eastern as well as in the Western | ries as were necessary to promote a scienhemisphere? He anticipated great good from the Society, and concluded by moving, "That a Council, composed of not more than one-fourth of its members, do conduct the general business of the Society, and meet in Norwich quarterly, or more frequently, as the business of the Society may

require."
Mr. Balley, of Thetford, seconded the resolution. (Carried manimously.)

Mr. WAYLEN, of Colchester, proposed "That a president, two vice-presidents, a treasurer, and a secretary, he annually elected, and be members ex officio of the council and of all committees,"

Mr. CHEED, of Bury St. Edmunds, seconded the resolution. With reference to a recent act of Parliament invading the just rights of the profession, he thought there was nothing to fear from that quarter. Let the physician, the surgeon, and the general practitioner, adhere to each other, and they had

nothing to fear. (Applause.)

Mr. HEADLEY, of Cambridge, believed it was not the wish of the Poot-Law Commissioners to make degrading proposals to the profession. He knew one of them (Mr. Lefevre) and had had conversations with him on this subject, from which he was induced to believe that the fault rested rather with the overseers and guardians of the poor. (The resolution was carried.)

The appointment of officers for the next meeting at Ipswich was thus fixed :- Dr. | the resolution : - Dr. Haviland, of Cam-Buird to be president; Mr. Crowtoot, of Beccles, and Mr. Builen, of Ipswich, to be vice-presidents; Mr. Crosse to be secretary (and also treasurer pro tempore).

Dr. Lynn, of Woodbridge, proposed and Mr. HEADLEY seconded,-That the council do assemble at Norwich in January next, to receive the names of members, and to consider all papers &c. which may have been

communicated to the secretary.

Dr. BECK proposed, and Mr. Mines, of Diss, seconded,-" That a committee of five be appointed to draw up a code of laws and regulations for the Society, to be laid before the general meeting at Inswich, and to make out a list of the first members of the Council."-The following gentlemen were then appointed as a committee :-Dr. Bayne, of Bury; Dr. Beck, of Ipswich; Mr. Dalrymple, of Norwich; Dr. Wayte, of Lynn; and Mr. Bailey, of Thetford.

Mr. MACINTYRE proposed,-"That a committee of five be chosen to prepare a Rea for effecting a junction of the present so ety with the Provincial Medical Associainstituted at Worcester, and to submit the general meeting at lpswich." This embraced, he said, one cashe principal objects of their association. A district like this would not be able to furnish funds suffisenagely such transactions

tific interest in the Society. By joining with the Western Association, they might effect this object, and be put in possession of the "Transactions" of that Association.

Mr. LE NEVE, of Barrow, seconded it. He conceived many advantages would be derived by the Society from an amalgamation with that at Worcester.

Dr. FISHER wished to know whether, after such an " smalgamation," this Society

would exist as a separate society. Mr. WAYLEN considered it would be an

auxiliary of the parent institution."

Dr. Evans said he understood that the two societies would be fused into one. He was a member of the Worcester Association, and he thought that members of that association, ought not to be called upon to pay two subscriptions; though, for himself, he would cheerfully pay two or more if they pleased.

Mr. CROSSE said the two societies would, in the appropriation of funds, be in common; in annual meetings they would be separate, excepting when the Worcester Association came into their district, and the same would be the case when their Society went into the other district. For the publication of all transactions and other useful purposes, the junction would be principally effected.

The following gentlemen were then appointed as a committee, in accordance with bridge; Dr. Baddeley, of Chehnsford; Dr. Nuon, of Colchester; Dr. England, of Norwich; and Mr. C. Smith, of Bury St. Edmunds.

Mr. MURIEL, of Ely, proposed "That an advertisement of the acts of this Meeting be circulated in the Eastern Counties, accompanied by an address calling the attention of Practitioners towards the support of the Society." (Seconded by Mr. Bedingfield.)

Dr. BECK proposed that at the next annual meeting, the Society should consider the propriety of engrafting a Provident Society on the Association. (Seconded by Mr. Abbott.)

Mr. MACINTYRE said that he was impelled to meet it with a direct negative. The proposition was not compatible with the objects of this meeting; appeared to be wholly impracticable; must involve an increase of subscription not at present contemplated; and in his opinion was uncalled for. In counties which it was proposed their association should embrace, there were al-

The ninth resolution was well calculated to puzzle the meeting. It seems to have been forgotten that the affiliation of the " Eastern Society" is the act of the wrong institution. Suppose the "Western Society," on whose funds a demand is to be made, should refuse to patronise the infant ?- ED. L.

ready societies existing, and some of them the poor? I will tell you, gentleme..., what —he could speak for that of Suffolk—though not so well supported either as they deserved to be, dispensing great relief. He would recommend that instead of attempting to form a Benevolent Society, those gentlemen who had not joined the excellent societies in their respective districts, should take the interest opportunity of doing so.

Mr. Abnorr said that they had no such society in Cambridgeshire.

Mr. MACINTYRE was sure that Mr. Abbott might soon have one there.

Dr. Evans concurred in the objections of Mr. Macintyre, and the sense of the meeting being against the resolution, Dr. Beck withdrew it.

Mr. CROSSE said it would be desirable that papers or reports intended for publication, should be forwarded as early as possible to the Council to be held in January next. Votes of thanks to Dr. Probart and Mr. Crosse were then carried with acclamation.

THE DINNER.

Fifty-six of the gentlemen afterwards dined sumptuously at the Angel, when Dr. PROBART again presided, having for his vicepresidents Mr. C. Smith and Mr. Macintyre. Dr. Evans afterwards took the chair. rious toasts followed the loyal ones. Dr. Evans proposed, amongst others, the University of Cambridge. Dr. Fisher returned thanks, and passed some high compliments on the present Regius Professor of Medicine, Dr. Haviland, whose absence he much regretted. "The health of Mr. Crosse and thanks to him for his great exertions in forming this Association," was drunk with warm applause. Mr. Crosse acknowledged the compliment.

Mr. Macinture said that there was a gentleman present to whom the profession were under considerable obligations, and who had been instrumental in the formation of this society; he deserved their consideration, not merely as a talented member of the profession, but for the able stand which he had made against the grinding system of contract recommended under the New Poor-Law Bill; and he (Mr. M.) was happy to have that opportunity of putting them in possession of the information which Mr. Bedingfield had collected on the subject. "The health of Mr. Bedingfield, of Stowmarket."

Mr. Bedingfield, in returning thanks, infant as peaker; but he would, with permission, say a few words. All the time he could spare from professional engagements, rehabeen occupied in defending the profession from the unjust aggressions of the Poor-Law Commissioners. The question, asaid Mr. Bedingfield, has been put to me several times to-day, What should we do love relative to the contracts for attendance on the

we have done in our own Hundred. My colleagues, Mr. Spencer Freeman and Mr. Bree, joined me in an address to the Directors and Guardians, expressive of our wish to remain in the same situation as we at this time occupy; we requested that we might not be compelled to enter into en-gagements which it would be impossible for us conscientiously to perform, and that if any parishes were added to the Hundred of Stow, other surgeons might be appointed to them. My address to Lord Melbourne was followed up by some strong observations in the House of Commons by Mr. Wakley, to whom in my opinion the medical profession is most deeply indebted. Mr. Wakley, in powerful and cloquent language, set forth not only the inconveniences to which medical men are subjected by the arrangements made under the new Poor-Law Bill, but also the miseries which would be inflicted upon the poor themselves, by that oppressive measure. Lord John Russell is reported to have stated in reply "that he had been assured by the new Poor-Law Commissioners, that they had provided the poor with ample medical attendance." One fact in my own immediate neighbourhood, shall serve to illustrate the tender mercies of these commissioners towards the poor. The Hundreds of Bosmere and Claydon consisted of thirty-five parishes; to these parishes four surgeons were attached; the Poor-Law Commissioners have added five parishes to this hundred, but they have only provided the poor with three surgeons! and so exquisitely indicious are their arrangements, that the poor of the populous Hamlet of Needham will have to go to Coddenham for their attendance, and one of the surgeons will have to rule from Needham to Debenham, a distance of ten or eleven miles, to visit his patients; all further comment upon this subject is unnecessary. I have been asked what we shall gain by opposing the com-missioners. If I am correctly informed, we have already gained one important advantage. The power of appointing and determining upon the number of the surgeons, and the amount of their salaries, is taken out of the hands of these commissioners, and is vested exclusively in the local guardians. A very interesting communication was made to me a few days ago by Dr. Rumsey, of Chesham, in Buckinghamshire, informing me that a society had been formed in Buckinghamshire, of which Dr. Rumse was President, for protecting the professi .. Here, gentlemen, is an organized comme ee ready to receive any facts that may to elucidate the oppressive nature of the ... aw Poor-Law Bill and the arrange these facts, and to submit them when thus arranged, to the consideration of the proper authorities.
Our interpretation of the proper authorities. tant business.

carnestly recommend you, gentlemen, to ating with the reporter of the Birmingham forward all the facts you can procure upon this subject, without loss of time, to Dr. Rumsey. I have put my hand to the plough, and I will not look back; but heedless of intimidation and slanders, I will still advocate the rights, honour, and interests, of my professional brethren. (Applause.)

Mr. CROSSE read an extract from a letter he had received from one of the principal Commissioners, which stated that they (the Commissioners) had no desire to interfere with, or direct the contracts between, the parish anthorities and their medical attendants

The company were afterwards addressed by Dr. England (who warmly culogized the efforts in Parliament of Mr. Warburton), and other gentlemen, and the party broke up about ten o'clock, highly gratified with the prospect of accomplishing the object which i had brought them together.

SUICIDE BY THE ADDER.

To the Editor. - SIR, -An adder was captured by me and confined very loosely in the folds of a thin lawn handkerchief, so that I might observe its efforts to escape. The handkerchief was laid with the adder on a grass plot, and after several energetic but ineffectual attempts to free itself from bondage, the animal deliberately inflicted a bite on its own body, and quickly died. Such an act of suicide has been asserted of the scorpion, but I have never heard of the like circumstance in an adder, excepting on this occasion. The circumstance cannot be attributed to instinct, a principle which might assist it in its efforts to escape, but could never prompt so unnatural an act as that which produced death. Let this fact (witnessed by two others as well as myself) be added to the number of extraordinary events which foil the philosopher in his efforts to deny the existence of intellect, unquestionably bestowed in various modifications on the lower animals of the creation. I am, Sir, yours truly,

WILLIAM H. THOMAS. Bristol, Sept. 16, 1835.

BIRMINGHAM SCHOOL OF MEDICINE.

LETTER FROM DR. CONOLLY.

w the Editor of THE LANCET.

-In your remarks on the Anniver-Sary Meeting and Dinney of the Birmingwere mentioned in the following letter, but,
ham School of Medicine, in The Lancet
work mentioned in the following letter, but,

Gazette, would be quite immaterial, but for the manner of its introduction in support of some not undeserved censure. I trust, however, you will permit me to say that I proposed no such toast. I was requested to acknowledge the honour done to myself and the other examiners; and having done so, it was my duty to name and propose the healths of the gentlemen to whom medals bad that day been awarded. The only other toast which I proposed was the health of Mr. Cox, senior, the father of Mr. Sands Cox, to whose exertions the Birmingham School of Medicine is so greatly indebted.

Although it may add a little to the length of this communication, I cannot refrain from giving, on this occasion, my sincere testimony to the proficiency, as far as I had an opportunity of judging of it, of the students of the Birmingham School. I have occasionally thought that the apprehensions expressed by some of my seniors in the profession, that the education in provincial medical schools would be found superficial, were not unreasonable. But I am convinced that they are unfounded. The utmost care seems to be taken to make the students well informed in every branch of their profession. The two students who presented themselves as candidates for the medal in Dr. Eccles's class, that of medicine, were subjected to a viva voce examination, about an hour and a half being devoted to each; and their answers were so satisfactory as to make it impossible for me to doubt that they had been well taught both in the lecture-room and in the hospital. A student's proficiency is, of course, only to be looked upon as an earnest of future diligence and usefulness; but, seeing the number of provincial schools now established, it is gratifying to believe that they will tend to increase the number of well-informed practitioners. My opportunities of forming an opinion, when in London, of the knowledge possessed by students from the schools of Manchester and Bristol, had previously inclined me to take this favourable view of the provincial institutions; and whoever looks at the rising provincial museums, must see that every year adds to their effi-ciency as places of instruction. I am, Sir, your very obedient servant,

J. CONOLLY. Warwick, Sept. 25, 1835.

LITERARY INTELLIGENCE.

MEDICAL REFORM IN IRKLAND.

of Sept. 12, it is stated that I present as a preliminary step to its introduction to the Theory and Practice design the profession, we do not know that we can furnish a better announcement than

that which the letter of Mr. Phelan be- have offered. I trust it will obtain the comes by its insertion in our columns. The favourable consideration of the medical v letter was not, we believe, designed for publication, but a very useful purpose may probably be served by letting the able and industrious author speak for himself in this stage of the affair.

To the Editor of THE LANCET.

SIR, - Hodges and Smith, of Dublin, who have lately published a work for me on the medical charities of Ireland, with suggestions for a medical poor law for their better regulation, are about to send some copies of it to London, and I have directed one to be sent to you, as a mark of my respect for the many services you have rendered the medical profession as well in Parliament as out of it.

Should you have leisure to glance over this "Statistical Inquiry," I am not without hopes that you will see in the effort an anxiety to be useful; and that the number of facts and returns which I have collected, and put on record, will strike you as tending to give a more rational view of the state of our institutions.

You will observe that all the information is that obtained by a private individual,--often got from persons most unwilling to would afford. give it, and, in some cases, after having left ing on being at home, in search of it.

But still I have endeavoured to expose errors and abuses, whilst retaining what-ever is valuable in our charities,—and by Clonmel, Sept. 22, 1835. such exposure, feeble and imperfect as it is, some good may and, I hope, will be done; power of giving effect to such opinions as I few days.

viewers in London, and, amongst them, whose influence as a journalist is so extern sive as is yours.

You have no idea of the difficulty of reforming the medical profession, or the medical institutions, of Ireland, -so great is the influence of the Dublin Colleges, and so deeply induced with the spirit of toryism are the governors of the hospitals &c., in numerous places. Nothing but the enactment of a well-digested and most searching law can have any effect in rendering our charities what they ought to be, a blessing to the poor, and a benefit, indirectly, to the rich and to the medical profession.

I would particularly request attention to the sixth and tenth chapters, and shall be most anxions to learn if the plan on which I have proposed that a combined hospital and dispensary system should be conducted, meets your approval. I also beg to draw attention to the appointment of inspectors, and to the proposal to publish a statistic medical report annually, or occasionally. In this land of jobbing the exposure from inspectors is particularly necessary, independent of the other advantages which they

Apologising for occupying so much of home, and the professional business depend- your time, I remain, Sir, your very obedient. humble servant.

> DENIS PHELAN. M.R.C. Surgeons in London.

Mr. WARDROP has in the Press a work but that entirely depends on those who are "On Bloodletting, being an account of the induced to read it, or to adopt the doctrines Curative Effects of Bleeding in the Treatwhich it advocates, and who possess the ment of Disease." It will be published in a

And the state of the case of t

METEOROLOGICAL REPORT.

(Extract from a Meteorological Journal kept at High Wycombe.

Lat. 51° 37' 44" North, Long. 34° 45" West.)

Days.	Thermometer.		Barometer.		Rain.	Wind.	Weather.
·	ll ighest.	Lowest.	ilighest.	Lowes!.	Ins. Dels.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Sept. 21	52.	49.	29.59	29.52	0.6125	W.	Frequent rain during the day
22	55.25	47.75	.28	.23	0.43125	S.	Rain at night, with thund.
23	61.50	49.75	.45	.36	0.16873	8.	Frequent rain in day & n 4
24	61.25	41.50	.66	.55		8.	Generally fine.
25	63.75	39.50	.68	.61		S.	Fine throughout the day.
26	60.50	41.50	.41	.34	0.04375		
27	64.50	42.50	.33	.22		8.4	

THE LANCET.

LONDON, SATURDAY, OCTOBER 10, 1835. Vot. 1.)

[1835-36.

LECTURE

INTRODUCTORY TO A COURSE

ON SURGERY

DELIVERED AT THE ALDERSCATE SCHOOL OF MEDICINE, OCT. 4, 1834.

By Mn. SKEY.

GENTLEMEN,-It will be my duty in the ensuing course of lectures, to point out to you the means which we employ, in either curing or alleviating those diseases which custom has allotted to the care of the surgeon.

alightly differ. The practice by manipula-

those principles, known under the term of practice or treatment; and on these two subjects I beg to engage your attention for a few minutes. By principles, we understand general rules, which, although modified by circumstances, are applicable to all similar examples of disease. The principles which govern practice are based on a knowledge of the great functions of life, both physical and moral; namely, physiology; but surgery demands the knowledge of the muntomist, by which alone we can detect deviations from healthy structure; and without which we cannot advance one step towards their removal. In speaking then on the subject of the principles of surgical practice, I return to those of anatomy and physiology. The first tells us the situation, form, relation, and structure, of every part I presume I need hardly tell you, that these subject to disease. Physiology expounds diseases are for the most part external; yet their healthy functions, and their mutual dethey follow that general rule not unexceptionably, or, rather, there exists a sort of neurice on each other: we must be contionably, or, rather, there exists a sort of neurice or each other: we must be contionably, or, rather, there exists a sort of neurice or each other: we must be continued in the continued of them, how can the man who is ignorant of the surgeon is met by the purely medical the healthy appearance of the human eye, treatment of the physician. I will not di-determine its diseased condition? How will late on this topic, because it necessarily fol- he distinguish the extent to which that lows from the present system of practice, delicate membrane the iris deviates from that the large majority of my auditors combealth, who is ignorant of its healthy or prises the future practitioners of all classes normal appearance and character? How of disease; and between myself and the ac- will he be enabled to pass a needle into the complished physician on whom devolves the interior of the globe, for the purpose of task of instruction in the department of displacing the opake crystalline lens, in camedicine in this school, there need be no taract, if he be unacquainted with the size, jealousy, no rivalry or difference of opinion, form, and connexion of that body? Look jeasousy, no rivarry or unrerence of opinion, form, and connexion of that body? Look as regards the extent or boundaries of our at the numerous forms of accidents attendarespective duty. One thing is certain, viz., ing joints, and say if it is possible that the that the ground-work is the same, that how iman who is ignorant of their natural form, ever apparently various or distinct may be, and the connexion of their parts, can dethe structure, the proximate cause of disease, termine on the one hand, or attempt to with some modification, is the same; and remedy on the other, the accidental injury the principles of treatment can therefore but they have sustained.

There are, however, doubtless many surtion is, however, the exclusive province of gical diseases, the treatment of which may be surgeon, and this includes the extensive be effected, without any immediate reference highly important department of opera- to the science of anatomy; but is there any surgery, which, if any, presents the that does not hear, more or less, immediately eminent characteristic of surgical praction that of pathology? Certainly none. Take A course of lectures a surgical science ulcer. By what means is its progress arrested? We know that in the condition of the first comprises the print to which health, the arterial circulation of a part should remain steady and unexcited; its

temperature cool and uniform. We find destruction, a new pillar is in process of it hot, red, painful, and the vessels are erection by which the diseased fabric is for-unnaturally distended with blood; they tified, and the limb restored to health and relieve themselves by pouring out matter; action! Observe the structure of artificial the skin bursts; the unhealthy condition joints, or those from which the cartilage is of the vessels remains; the surface fails absorbed; here we see the respective ends to heal, and an ulcer follows, for there of the bone or bones, carefully rounded off is a variety of ways in which such a and polished, to simulate as much as possimalady may arise. How shall we determine the treatment? We observe the chaincrease of large aneurysmal sacs; their to. reacter, whether inflammatory or otherwise; porary protection from rupture by the dense we reduce the undue action of the vessels by layer of coagulum by which they are lined; such remedical and, having accomplished! for contraction and subsequent obliteration; this, we proceed to another stage of the —the contraction of the divided ends of large treatment, which consists in urging nature; arteries;—the formation of accidental bursar, to heal the wound. In the attempt to avert for the protection of the subjacent bone, or cure disease, the importance of this whenever the skin is subjected to continued branch of physiology is inestimable; I pressure or friction;—the almost dental would say it is the ground-work of all medi-hardness of the gum, consequent on the loss cine,-in its most comprehensive sense, a of teeth, and the approximation of the teeth knowledge of the principles of life.

both animal and vegetable, with a principle wounded intestine, by which its injured sur-which cherishes growth and which presides face becomes agglutinated to the parietes over every action of which its organization of the abdomen, or to another portion of is susceptible. The same spirit, jealous of intestine, thus closing the otherwise fatal defect, controls disease, repairs injury, and aperture;—the really astonishing co-operaby its continued influence tends to maintain tion of this healing, this protecting influence, the outward physical form, as well as to re- with the hands of surgeon, in transmitting pair the inward defect of function to which the contents of the intestine, along a devious the frame is liable. It has been called the track, in artificial anus, from the upper to vis medicatrix natura. In the language of the lower opening, and the subsequent earthe Latin poet,-

" Spiritus intus alit, totamque infasa per artus Blens agital molem et magnore corpore miscet."

advance towards the surface, but for the purpose of discharging its contents without injury to the body? The liver would appear to possess discrimination in evacuating the contents of a similar disease through the abdominal parietes, in preference to the cavities of the abdomen and chest, to which it would have nearer access. In tubercular abscess, the large vessels of the lungs are as it were, incrusted with lymph, lest their rupture should be fatal to life; and this effort is especially beautiful, inasmuch as the disease itself is necessarily fatal in its termination. For here we see the contention most vividly between an irremediable disease and the unremitting effort of this "spirit of health."

In the disease of bones, how beautiful, how varied are the exertions of this protecting principle, in which a bone is destroyed by a wasting disease, arresting all chance or power of reparation,-during the process of vege

nowledge of the principles of life. on the loss of one or more;—the inflamma-Nature has endowed the organized world tory and lymph effusing condition of a nestness with which the margins of the bowel unite for the purpose of restoring the integrity of the canal. Observe the analogy in this respect of vegetable to animal life. It consists in an evident and universally Plants are provided with muscles, by which acknowledged effort on the part of nature, they open and shut their flowers, and turn to ward off disease and to preserve life. "A their leaves to the sun, even if they have been spirit of health" predominating over the repeatedly folded back from it; the turn of body, ever rejoicing in its salubrity, ever a hop plant is invariably directed towards contending against injury. Need I illust the course of the sun, and it soon dies if trate it by examples? They are endless in artificially forced into an opposite line of variety. Why does an abscess invariably growth; remove the obstacle, and the plant growth; remove the obstacle, and the plant quickly returns to its former position. When the straight branches of the honeysuckle can no longer support themselves, they acquire strength by becoming spiral; when they meet with other branches of the same kind, they coalesce for mutual support, and one spiral turns to the right, the other to the left, thus increasing the probability of their finding support by the diversity of their course. If a plant he placed in a room which has no light, except from a hole in the wall, it will shoot towards the hole, pa through it into the open air, and then vegtate upwards in its natural direction. shoots or tendrils of creeping plants, are # variably directed towards the nearest obto which they cling, and the direction o tendril may be repeatedly altered, by cli-ing the position of the object attracting them. From these, and a variety of similar evidences of spontaneity, it has been inferred that vegetation limited degree of seconds.

that when they form a part of a living sys- subversive of her most obvious intentions. that when they form a part of a niving system, they must be possessed of some additional principle, that counteracts the effects that would otherwise be produced. To the agent that thus opposes the physical powers it that for enforcing, both by his precept and of matter, and to which the body owes its by his example, the value of this all-imthe considered it to possess powers of a tion," says he, "and regulate the action of specific nature, and attributed to it a species the digestive system, and you control all of intelligence which enables it to act the controllable disease." To him it appeared part of a rational agent, and to superintend (how is it surprising that it should have all our corporcal operations. VAN HELMONT done so?) the philosopher's stone of medical

totally ignorant of. It is sufficient for our chronic disease as he. present obj. or that we acknowledge its ex-istence, observe its influence, and obey its her intentions, but do not attempt to lead

dictates.

I say emphatically, obey its dictates. We part is but negative.

Take of many diseases in a tone of arrogant defiance of the very laws which direct our proceed to the theory or principles which every step. Take a wound for example, more immediately influence our treatment. The atmost limit that the surgeon can ad- I have already stated them as "general vance to, is that of bringing the margins in rules, which, though modified by circumclose contact, and keeping its surface clean, stances, are applicable to all similar exam-and where he fails in this end, nature is ples of disease." Now there is an obvious compelled to come to our assistance, and distinction between the theory of a disease heal by new substance what with a little and its treatment. By theory we under-extra aid she would have accomplished stand the contemplation of, the reflecting or with much more ease and readiness. What reasoning upon, a subject. This one would is the extent of the boast here? That of an suppose an essential prelude to the treathumble and almost powerless assistant; ment of all maladies, but it is not really so, and thus it ever must be. We must ever inasmuch as the principles of life, or, rather, continue humble followers in the path of the views and objects which nature may nature, and dependent on her hounty.

and enjoyment, and that they have an infe- we enter on our task prepared to watch and and enjoyment, and that they have all lines to obey. Let us then study her peculiarior participation in the common allotments to obey. Let us then study her peculiarior participation in the common allotments to obey. Let us then study her peculiarior participation in the common allotments to obey. I might cite endless examples of Nature's ample. It will thus be my wish to inculcate anxiety to maintain health, by throwing off a simplicity of practice, in which consists disease or obviating deformity. Now, where the only true philosophy of the art of head-does this power reside? In what does it ing. We are the sappers and miners in the consist? The advance of time had made forces of nature. We attend her path with considerable encroachments on the eigh- the view to remove obstructions-to cleanse teenth century, before the antiquated doctrines of the chemists and mathematicians to leave her unmolested and uncontrolled. Succumbed to the more just and reasonable. If I dwell on this subject, it is because here views of the ritalists. For this revolution I would place the gravamen of a charge we are greatly indebted to STAHL, who was against those members of our profession, forcibly impressed with the difference be- who, wanting a firmness of reliance on tween the changes which the components of the authority of nature, or patience in its the body experience during life, and what application, intrude upon her path with an would occur in the same substances under unseasonable and officious zeal, perverting other circumstances; hence he concluded her energies by the application of means

vital properties, he gave the name of anima. portant principle. "Subdue local irritaapplied to the same principle the term practice; and if I express my regret that "Archens." his application of it should have been so But what are we to understand by these universal, I am bound to declare that within terms? The immediate nature of this printure of the circle of my experience no man was so ciple, or the mode of its operation, we are successful in the controlling influence over

have in contemplation in the cure of any The first part of my duty here, then, as particular disease, may not be so obvious as or instructor, is, to disabase your minds, to obtain the unanimous concurrence of all lirecting your attention to that influ-physiologists. They may be susceptible of various explanations; whence the number e is imperative; the is arbitrary; her of irreconcilable views taken by different law are imperative; the fill sustain no inlaw are immutable; the fill sustain no interference, and listed to be compromise,
their treatment was adopted on unknown
This I conceive to be the first and most
paramount concession to her to be compromise,
their treatment was adopted on unknown
or ill-understood data, and numerous theoparamount concession to her to be compromise,
paramount concession to her to be compromise,
their treatment was adopted on unknown
or ill-understood data, and numerous theoparamount concession to her to be compromise. has so ordained it, men's judgment is ordinarily defective, as their imagination or love of speculation is acute. Thus it is that minds naturally imaginative, whose flight of thought equal in celerity the movements of the playful Puck, " who could put a girdle round about the carth in forty minutes, and whose speculations cost them neither time nor labour, see through the mysteries of diseased action, trace the movements of the master mind that wills it, "and give a local habitation and a name" to the selfcreated authorities of their ill-guided imagination. It is not from men so gifted that our profession will derive much advantage or instruction. Pray you avoid them.

There is another class of men, the objec-

tion to whom is so closely associated with the preceding, that I cannot forbear alluding to them, -they are mathematical surgeons. A man's mind that has been long accustomed to direct and palpable evidence, and whose conclusions are inevitable, though the very reverse of the imaginative, endeavour to reduce the question of principle to the level of direct reasoning, who will believe nothing that he cannot explain upon the same irrefragable principles of reasoning, as lead to the positive deductions of mathematical science. The tone of mind which this study engenders, appears to me not the most desirable for a practitioner of our art, notwithstanding the immense advantages which it affords in invigorating the reasoning powers. I should be sorry to be supposed desirons of withholding my tribute of admiration for highly cultivated intellect or reasoning power; but I assert, that so long as the data are but imperfectly known or understood, and until the principles of life and the nature of their operation are brought within the grasp of our comprehension, that that man's practice must be (to use the mildest term) most imperfect, who would postpone for one hour the application of a remedy, because he could not explain the rationale or the principles of its action; and there are too many practitioners of this class.

With the action of how few of the innumerable remedies of our Pharmacopæia are we thoroughly acquainted! This may be deemed a species of empiricism, but within a certaint restraint it is essential to every practical department of our profession. You must not expect, then, that you are entering on a study, the principles of which can be reduced to a course of reasoning as certain and as conclusive as that of mathematical science. Empiricism means practice. It experience has taught us the value of, but dies

There is a natural afid well-grounded pre- | which we have obtained through anyomeans judice against what are called theorists. but those of reason. Take, for example, the The tendency of a man's mind to theorize treatment of some forms of disease of the is, ceteris paribus, just proportionate to the testicle. We find them essentially benefited activity of his imagination, and as nature by the use of emeties. What is the rationale of this? Does the disease depend on a morhid condition of the stomach? If so, a form of aperient that would relieve it of its contents in common with the whole of the intestinal canal, ought to accomplish the same end, but it does not. Local depletives, aperients, diaphoretics, are equally inefficient, and an emetic finally removes the evil. Now the stomach and the testicle have neither vessels nor nerves in common. It is referred to sympathy. Is this satisfactory? To me I confess it is not, and in the state of our knowledge I should largely prefer acknowledging my entire ignorance of the modus operandi of the rentedy, than I would mask the real difficulty by a pretended explanation, that would never be borne out by close physiological investigation. The conviction of our ignorance is the first step towards the improvement of our knowledge.

But, in the mean time, shall we withhold the emetic till we can explain the phenomena of its use? Certainly not; therefore the practice by empiricism is a necessary part of our duty. The late Dr. Gooch, the most able and most amusing lecturer of his day, was in the habit of recommending to his class some forms of medicine, which comprised a combination of a large variety of medicines in a single dose. In commenting on this " mess," as he was accustomed to denominate it, he used to say, "I combine these medicines together, because I find them answer the object I have in view; I do not attempt to explain the theory of their application; but I find them useful, therefore I employ them." With regard to this subject let me observe, that the chief object of my reference is, that I am desirous that you should not commit yourselves to an explanation of the modus operands of a remedy, unless you see its operation clearly and distinctly. Its consideration will conduce to a most important end,-that of leading you to reflect and reason, -to establish, as your groundwork, clear comprehensive premises, on which your treatment is hased; to eschew the jargon of words with which the really ignorant man involves in a mystery of technicalities the statement of his opinions. and to endeavour to trace the workings of disease by simple and concatenated steps to their ultimate termination. I attach the highest value to that instruction which teaches simple principles, -which pla before the eye of the student the first cesses of disease. I should be conterned ther, were he should to abandon in action, to place him in the path of improvement, having adopted simple and distinct, consists in the application of remedies which but intelligible views of the early stages of than I would ende

interest or his attention by vivid descriptions | whether local or general, I conceive that of extensive and uncontrollable disease. I should prefer to study nature in a case of common ulceration, in which my assistance might be valuable, to pursuing the endless ravages of a malignant growth, of the nature and source of which I may be totally ignorant, and in which the only advantage I could confer, would be sympathy for the sufferer. And here let me advert to a comnon error among students, which owes its existence to a defect in their education. - that of misnaming cases of disease by the application of the epithet " good." You hear that Mr. So-and-so has a "good case" in such a ward, or "a good case of accident has just come in; they are gone for the surgeon to cut his leg off." Gentlemen, these are not good, but "bad" cases,-bad in every application of the word, - bad as regards the patient, for his body is mutilated by the knife,-bad as regards the art, for they justly expose it to obloquy, - and bad as regards yourselves, for they afford you no knowledge beyond that derived from beholding a extensive the malady, the greater the "goodness,"-a case in which the art of the surgeon triumphs over disease, efficiently cooperating with nature in its cradication,not one in which the surgeon takes the case into his own exclusive charge, and effectually extirpates it by the amputation of the limb of which it formed a part.

Now, Gentlemen, if for the purpose of warning you against imphilosophical and unreasoning views, of exposing to you the real level of our knowledge, and of preparing you for the necessity of availing yourselves of the aid of remedies, the action of which in the present state of our knowledge admits of no satisfactory solution, I have for one moment become the advocate of empiricism, I trust that the principles of education I have subsequently advocated, will guarantee to you my conviction of its atter incompetency to advance professional knowledge. Empiricism may be employed as the refuge, without being the cloak, of our ignorance. It may prove a valuable resource, It may temporarily represent, it can never supersede, the practice of reason. We may employ it as the homage due to the unexplained mysteries of nature; but it must ever be deemed a detracting blot on the real dignity and intellectual rank of our gofession.

Having considered the principles of prac-which are so immediately founded on a ledge of the principles of life, I come to the production of almost every description to the subject of the production of disease. We cannot except from this tion of remedies. We without dilating on law even the diseases of the circulation o their various classes, whether medical or itself, which owe their origin to a defective manipulative, whether direct or indirect, | state of the nervous system. How far we

next to the knowledge of their mode of application, the most important rule I can insist on, with certain limitations, is the necessity of their being restricted to a degree of activity inferior to that of the disease they are intended to control. This I believe to be an important principle of treatment, which I can best illustrate by example. A man rises in a morning after healthy sleep, his intellect clear and vigorous, with the circulation in his brain light and free, because during sleep his brain has been subject to a fuller access of blood, by which his mental facultics have been temporarily superseded.

The return of the circulation to a part of the body that has been exposed to excessive cold, is succeeded by a degree of heat above the surrounding temperature, and productive of a tingling pain. On the same principle we are told that a warm-bath is the best protection against the intensity of summer heat. These I may call phenomena of health. The same holds with regard to discase. Headache and throbbing are frequent painful operation, which you may possibly consequences on fainting, in which the brain witness for the first and last time in your sustains a temporary loss of its circulation. lives. I conceive a good case to be suscep- and this, whether from loss of blood, or from tible of relief or cure, and then the more a shock to the nervous system, producing the same result.

If you arrest any unhealthy secretion by a too powerful stimulant, the secretion returns in quantity proportionate to the activity of the means employed.

The means usually resorted to in the acute stage of gonorrhoa to suspend the discharge, most frequently increase the disease.

If you employ moderate pressure on the surface of healthy granulations, you increase their energy and promote their growth; small doses of aperient medicines, taken at certain intervals, will tend to constipate the bowels. In like manner stimulants, whether medical or moral, are succeeded by depression proportionate to the activity of the means employed.

All this is explained on the principles of reaction,-a principle so important and so universal as to influence our treatment of almost every disease.

For the purpose of maintaining growth, and of affording nutrition to every part of the body, of invigorating it by adding new materials to its structure, and of removing those which are superfluous or old, and consequently useless, nature has established the circulation of the blood. But for the purpose of controlling its irregularities, she has placed it under the superintendence of what is termed the nervous system, connected immediately with the brain or spinal marrow. These two agents, then, concur in

may give to the nervous system an inde- | pend their natural and healthy functions by pendent authority in the production of what the period in the production of what stop to inquire; there is a difference of opinion on this subject; but we must consider these two phenomena as intimately, and almost indissolubly, connected in the performance of the various functions of life; if the circulating system be in immediate dependence on the nervous, in accomplishing the design of its creation, in no less a degree is the nervous tributary to that of the foverwhelms the drunkard, is not solely refercirculation, for its force and energy.

The term "irritation" expresses a local disturbance of the nervous system, which is generally followed by a corresponding derangement in the circulating system, and inflammation is the result. If the irritation subside, the vessels resume their natural condition. Now I may define reaction to be the rebound of the nervous system after the application of any means that have tended to excite or depress it.

Let us imagine that nature has provided this system with great dormant power, beyond the necessities of the daily functions of life, which is only called into action on great emergencies, and we shall see why this rebound exceeds considerably in degree the condition in which it was first found.

What is the explanation then of the various phenomena I have alluded to? Exposure to the cold produces contraction of the vessels, by depressing their nervous system; the cause being removed, the vessels do not return to their former condition of healthy action, but are stimulated by the unhealthy rebound of the nervous system to undue action, in which the nerves themselves participate.

The warm-bath, by promoting the cuta-neous exhalation, and raising the temperature of the surface, excites the circulation, which by the same rebound maintains a lower temperature throughout the day.

Fainting produces headache, by the reaction of the vessels of the brain, consequent on inanition. The application of a powerful stimulus to a secreting surface, excites the vessels to contraction, through the medium of their nervous system; this condition remains until they recover from the shock, when they pour forth their contents, with a violence far surpassing their degree of former condition; here I am, of course, supposing the stimulus to be considerable.

The application of slight pressure to healthy granulations, promotes their growth by simple excitement, that of a foreign body. The pressure tends to diminish them, and their increased growth is the necessary consequence: if the excitement be too great, the granulation is absorbed; and this object, where the granulations are of an unhealthy character, is often most desirable. Small doses of aperient medicines exciting in too remedies, they are either internal or exter-slight a degree action of the intestines, sus-nal, the letter being local or seneral ... We

the same principle of reaction, and if renewed at comparatively short intervals, will suspend the action of the bowels entirely. The nervous system, in its moral sense, is subject to the same laws and is productive of the same consequences, whether in its normal or morbid condition. Excessive joy is invariably attended by painful depression and distress of mind, be the stimulus moral physical. The mental anguish which able to the stings of conscience; while the furious and intractable ballucinations of the maniae, gradually sinking into exhaustion, exhibit him melancholy in spirit and powerless as a child. To uphold the physical and moral frame, and to maintain it in the condition of the fulness of health, the circulating and nervous systems must possess a uniformity of action, and an identity of power-They rise and fall together; they are indissolubly nuited. If you reduce the circulation by the abstraction of blood, to the same extent you lower the tone of the nervons system. How strikingly is the infinate and mutual dependence of the two systems manifested by the experience of every day! How entirely does the energy of character sink under the wasting energies of the bodily frame. Observe the labouring man! with limbs of giant mould, and the vigour of whose constitution and his emburance of pain appear to set at defiance the invasion of discase; subject him to the consequences of repeated abstraction of blood, or lay him up for six weeks, contending against continued irritation from a compound fracture, and his energy of character is gone, his intolerance of bodily pain is converted into sensibility the most acute; he becomes puerile, fretful, and suspicious. And will not in like manner the momentary blash of shame, or the rapid and irregular pulsation of the heart under the influence of fear, with equal force denote the dependence of the circulating on the nervous system? This intimate dependence must ever be kept in view by the practitioner. It may serve to teach us, that however extensive may be that class of infiammatory disease which warrants the abstraction of blood from the circulation. we cannot exceed the quantity which the most judicious observation would point out, without committing a double wrong.

In proportion to the excess of force in the remedy employed, will be the consequent reaction : may I not therefore with reason;" insist on the importance of that law, which edies, and restricts the activity of our which renders them efficient only whose employed with degree of force interior to-that of the disease they are destined to move?

With regard to the immediate subject of

may divide the internal remedies into those you an example: during my residence in which give vigour or frequency to the circulation, and those which diminish its force. Now in the medical treatment of disease, doubtless the latter largely predominate : of from di there, the most efficient is that of blood-letting; a remedy calculated to accomplish the greatest good, and susceptible of the great-

always at hand; certainly it is employ with great effect, and often with great ad Within a few weeks of her death, a second vantage, but that its agency is largely abused I have not the smallest doubt. There is no part of the treatment of disease which demands clearer perception and nicer discrimination, than the distinction between that condition of the circulating system, which either foretels or is actually attendant on inflammation, and that which denotes the excitement of the same system from weakness. Of all parts of the body, there is none which possesses so strong a claim on the circulation of the blood as the brain. On the abstraction of any considerable quantity, the brain appears to yield to the general amount of loss, a less proportion than any other organ or part. If you bleed an unimal to death, the vessels of the brain are found distended with blood; as though that organ presided over the body as the primum mobile of its action. Throbbing of the vessels of the brain, however violent, is naire frequently an exhibition of irritation or weakness, than of inflammation, indicating that the balance of the circulation is suspended, and that the brain is asserting its claim to a too large proportion of the residue to be compatible with its just and healthy distribution. The abstraction of a large quantity of blood cannot be justified at the hands of the surgeon, excepting for the purpose of contending against positive inflammation. I have no idea of taking blood for the purpose of reducing a patient's pulse to a certain standard. I have no idea of taking blood to avert a possible, nay, even a probable attack of inflammation; nor is that practice in any degree more warrantable, that would extensively reduce the circulating fluid, to the end of diminishing the force of muscular contraction. Unless the nervous system be cagnizant of disease, you cannot take blood with impunity; and the same quantity of blood that might be advantageously drawn, under real and positwo inflammation, might be fatally drawn without it. Nor is this principle exhibited only in reference to the abstraction of blood, but it appearains, with the same force, to y operation for the removal of a disease, ous system is not cognized. These ob-ations will, I appetchend, be found most plied.

Theseed an ope tion by Baron young woman, not of one observe, but because its position was such with regard to its neighbour, as to impair the symmetry of her foot. She suffered severely during the operation; inflammation did not succeed to an extensive Infortunately, perhaps, it is a remedy degree, but she died, apparently from the shock her nervous system had sustained. case occurred precisely similar in all its important particulars ; after being at the verge of the grave for many days, this girl subsequently but slowly recovered.

I remember to have witnessed an operation for the removal of an ignocent tumour from the shoulder of a young and susceptible woman, who, like the preceding, suffered greatly during its performance. There was something about her constitution that assured me there was danger attendant upon it. She died within three weeks of the operation, without the occurrence of any considerable degree of inflammation to

which to refer it.

I remember another patient, a female, who died after the slight operation of removing a diseased bursa from the surface of the patella. Now in none of these cases was there any pain, and little inconvenience. All these persons were in rude health, and the rude health destroyed them, because their nervous system sustained a shock for which it was totally unprepared. I might dilate on this part of my subject with advantage, but you possess the opportunity of hearing these principles enforced by his authority, to whom the profession owes much of the merit of their promulgation.

Another observation on the general subiect of remedies, is that of their peculiar action on different constitutions. Mr. Abercine is an experiment; what agrees with one man may not agree with another." We are all acquainted with the existence of certain idiosyncrasics as they are called. Some persons are severely salivated by a single grain of mercury, others are overwhelmed by small quantities of laudanum; and the repugnance to ipecacnanha is quite remarkable in some constitutions. I am myself acquainted with the wife of a medical man, who experiences a most distressing sensation whenever the stopper is removed from the bottle of that drug, oven in another room. All this tends to enforce the importance of the maxim I have endeawhich, as I have before agreesed it, the voured to insist on—namely, the importance of restricting the quantity of the remedy ap-

especially to apply to patients of shat are called an excitable nervous system, and to of applying to treatment, or the use of constant of partiageable life. Levill give remedies, internal or external, and for the

second division of this subject which yet demands our consideration, and that is the manipulative. This comprises the reduction of dislocations-the setting of fractures-the determining by the touch, or local examination, the presence of fluidindeed it includes the whole circle of operative surgery. In some form or other it must come within the experience of all of you, and though many may never possess the opportunity of acquiring the experience of operators of the highest class, yet it is impossible that you can avoid some intimacy with this important branch. Now there appertains to the public an opinion of our profession (than which none can be more erroneous), that to perform with the highest efficiency the duties of operative surgery, a surgeon should pursue his path indifferent to the wants or feeings of those whom either disease or accident has consigned to his charge. But they form this opinion, from the apprehension of an extreme of opposite evil-that of failure, during an operation, of the fortitude of the operator. Is there no medium? Is harshness or indifference the sole alternative to that unstable condition of the nervous system, which would endanger the life, or enhance the misery of our patient by failure in decision? Of the two I should deem the former the greater evil, for it pervades the whole conduct of the man. It extends to the deprivation of mental relief in no less a degree than it exhibits an indifference to his physical pain. I consider the sufferings of a patient as likely under many circumstances to obtain more probable mitigation from the sympathy of his surgeon than from his judgment. Doubtless the constant access to the exhibition of serious injuries may tend to render, in some degree, callous, the natural impulses of a sympathizing mind; but to the same end that delicacy of touch is essential to the detection of some forms of disease, so in delicacy of perception and susceptibility of feelings can the mind exhibit those endless resources which real and disinterested sympathy alone could invent and apply to the relief of the sufferer. It may be truly affirmed that the touch of the surgeon exhibits the character of his heart, and it is remarkable how striking is its exhibition.

Many diseases may be detected by delicacy of manipulation, which may really pass unobserved under a coarse and violent effort made to expose them. How often do we see men seize on a fractured leg and shake it with positive violence for the purpose of enabling the bystanders to hear the cropitus caused by the friction of the fractured ends of the bone; or, in cases of compound fracture, in which the finger is coarsely thrust into the external wound with a view to determine the direction of the fracture (a piece

most part medical. There is, however, a jof most unimportant information probably), or of scraping away with the nail any comminuted portions of bone which must escape by a later and more salutary process! Some men can never see a wound without ramming in a probe, or a director; and all these persons pursue their wanton career, equally regardless of the sufferings of their patient and of the principles of their profession. But the cultivation of this delicacy of touch is no less a matter of duty, than of policy. Its presence is, in the majority of cases, the most direct path to the confidence and to the approhation of our patient, who relinquishes his case unreservedly into our hands, persuaded that the amount of pain he may sustain no art could have dimi-nished. But it is not only as regards manipulation, but in the exercise of those numerous and highly appreciated personal attentions, the surgeon may rely with confidence that his services are esteemed, and will he liberally rewarded.

Gentlemen, at the bed-side of your patients you will learn the practice of surgery. It is not only with your finger on the radial artery that you will fully comprehend the characteristics of a full, a hard, a frequent, or an intermittent pulse,-for they are all relative terms,-or that you will discriminate the various degrees and stages of fever dependent on local injury. The practice of your profession cannot be learnt from lectures, the chief object of which is principle. What do you imagine to be the comparative advantage derived from one glance at that form of inflammatory tumour which we term a carbuncle, and that obtained from the most claborate description by the lecturer; why, in the one case the disease would be immediately recognised; in the other, the student would doubt its identity until he had referred to some more competent authority.

I remember an example of an industrious and intelligent student whose attention I directed to a case of ranula. He thought himself familiar with the disease, but with the case before him he was compelled to acknowledge his ignorance, declaring that it had little resemblance to the malady his imagination had n'c ured. The eye is the most perfect of all the senses, and least liable to imposition. It will embrace and transmit more knowledge in a single minute, than a lecturer could dictate in an hour. whizzing sound of an aneurysm, or the peculiar and indescribable sounds of a diseased heart, can only be appreciated by the ear. The condition of an abscess, the thick, ness of an aneurysmal sac, the temperatuof the skin in fever, or the peculiarities of t various and uncertain diseases of the ticle and its membranes can only be de. r-mined by touch; and what description, precise and admirable though it be, can

mig the position of a fractured leg, or the and to lay up an immense collection of iminfinitevarieties in the aspect or expression of countenance in a patient passing through the changes from discase to health. At the Lame time I do not wish to impress on your minds the belief that lectures are useless. Considering them as the only source of medical instruction, I think them useless; but they must be viewed as forming a part of truction, and a part only. Unless the knowledge there acquired be confirmed by its application, it will form but a useless compound of undigested material which could merely qualify its possessor for commencing the study of practical surgery.

I cannot conclude this introductory lecture without directing your attention (not for the first time, however, I believe) to the necessity of cultivating some qualities, without the possession of which you cannot hope, whatever success may attend your path, to possess your own self-esteem, or that of your professional brothren. It is most wonderful, how little reliance can be placed on the simple statements of professional men. They appear to see everything with a jaundiced, or at least a prejudiced eye. If he relate a successful case, its peculiarities are almost instinctively magnified, for the purpose of exciting admiration, or obtaining approbation at the success of his treatment.

All speculative men have some theory to support, or some views to maintain, to which the symptoms and circumstances of the case are made to bend. They enter not on the consideration of their subject with minds simply animated by a love of truth; or, rather, the love of truth is overwhelmed by that of some more paramount thing; but men appear desirous to obtain a fictitious importance, by identifying themselves with something wonderful, - something uncommon and beyond the reach of others; this is not honest The fact is, that the line which circonscribes the boundary of truth is perfectly defined, though easily transgressed; and so prone are we to deviate beyond it, that its barrier ceases to become an obstacle in our path, and is trampled, unheeded, underfoot, becoming more and more indistinct, until it is a positive effort to detect it. Thus truth is confounded with fiction, and the narrator can only obtain the credit of his auditors to the extent of truth, by a compound increase in his deviation from it. There is, there can be, but one course which a perfectly honourable mind will pursue, and that is neither to amplify or embellish, but to adhere to the atrict letter of truth.

This was the course adopted by one among remarkably few exceptions to the general I mean Mr. Hey of Leeds, whose single unsophisticated mind, eminently disshed for its love of truth, combined with remarkable talent for observation, afforded him the means of an unreserved stion with the progress willingsse,

portant facts in reference to their treatment. I consider his works as one of the best models of surgical literature; not elegant, perhaps, but they possess an air of truth that should be doubly cherished, because, unfortunately, they stand pre-eminent in this particular. For requisites such as there, the graces of style, and the sacrifice of truth to a well-turned period, form but an indifferent substitute.

In conclusion, gentlemen, let me recommend a systematic pursuit of study, and perseverance in its acquirement. A few cases, say three or four, are amply sufficient to engage the attention of the early student, of which notes should be taken. These notes should be made in the most condensed manner possible, but should be at the same time comprehensive, because they should embrace all the important facts which really bear upon the case, and these ouly. Practice in this part of your duty can alone enable you to give effect to this most desirable system, by perseverance in which you will possess a text-book for your future practice. Let me assure you, in the words of Lord CLARRYDON, "that there is no art or science that is too difficult for industry to attain. It defends us against all strokes and assaults of fortune. It is that only which conducts us through any noble enterprise to a noble end. What we obtain without it is by chance-what we obtain with it is by virtue."

CASE OF

ACUTE PHLEGMASIA DOLENS.

To the Editor of THE LANCET.

SIR,-The following interesting case occurred in my practice, and I beg to forward it to you for publication in your useful periodical. I have the honour to be, Sir, your obedient servant,

JOSEPH HODGSON, M.R.C.S. Spitalfieds, Sept. 22, 1835.

April 4, I was engaged to attend Mrs. Horner, of B. G., in her first confinement, which she expected would happen at about the end of June. Age 39; tall in stature; fair complexion; very irritable in temper. Says, to use her own language, that she has had so many attacks of inflammation, that scarcely an organ in her body has escaped. Desired her to pay great attention to the bowels, which were inclined to be constipated, and to keep her mind as quiet as possible.

11. Has a severe attack of pneumonia, which required three bleedings from the nauseating doses of Ast. Tart. and Ipecac., ing. Pain about the calf of the leg. Applibefore it was subdued. Blisters and expectorants restored her to health by the 28th. She went on very quietly until the

6th of July, when I was called to her at half past seven a.m., and before nine o'clock she was delivered of a full-grown girl.

7, 8, and 9. Symptoms favourable.

10. Complains of sharp pain in the uterus; lochia suppressed; pulse 120, and hard; tongue clean; bowels open. The nurse says that these symptoms came on yesterday evening, immediately after she had shown a good deal of temper about a very trifling matter. Apply Hirud. xij to the part in poultices. Hyd. Sub. gr. j; Pulv. Dover. gr. v, sextis horis sum. Encma commun. cras mane, si opus sit .- Evening. V.S. ad 3xx.

11. Rather easier; pulse softer; tongue clean; howels open; blood of yesterday cupped and buffy. Contin, medicament.— Evening. Pain returned. Apply Hirad. xx

to the hypogastric region.

12. Pain gone except on pressure; skin perspirable; tongue clean; pulse 115, and soft; bowels relieved by the enema. Apply Hirud, xij, and continue the medicine.

13. Passed a comfortable night; lochia returning; other symptoms as favourable as yesterday. Tinct. Hyoseyam. 11 xxx; Tinet. Digitalis mx; Liq. Ammon. Acet. 5ij; Mist. Camph. 5x. M. f. haust. ter in die sumend. Ol. Ricini 3ss, cras mane.

14 and 15. Going on well, which she continued to do, except being annoyed by what she called "rheamatic pains in her hips," for which some anodyne limiment was ordered. I was making my visits rather far between, with the intention of leaving her, when I received a hasty summons on the 28th. Right leg and thigh twice the size of the left; tense, and exquisitely painful in the course of the femoral vein. Says that "she felt the pain and swelling gradually proceed from the womb into the thigh and down the leg." Pulse 115, and very incompressible; tongue remarkably clean; bowels confined. V.S. ad 3xx; apply hirudines xxx along the course of the veins, to be succeeded by not fomentations and poultices. Hand. Cathart. c. Pil. Cal. gr. v statim sum.; Pulr. Dorer. gr. v; Hyd. Sub. gr. j; Extract. Hyosey. gr. v; Ant. Tart. gr. 1. M. f. pil. if, 4tis horis sum. - Evening. Blood sizy; pain diminished.

29. Pain returned; says "it is exeruciating, particularly about the calf of the leg;" pulse 120, and very firm; howels freely opened. Venesectio ad deliquium, which produced immediate relief. Contin. med. ut heri .- Evening. Pain returning: applicatur hirndines xxx. The thirty ounces of blood taken this morning were very much cupped, and very buffy.

arm, lecches freely applied to the chest, and | has slept four hours without waking .-- Evencatur hirudines xx. Med. &c. ut heri.

31. Progressing .- Evening. Slight pain in the calf of the leg. Applicatur hiru-dines xii; med. &c. ut heri.

August 1. Passed a good night; leg and thigh quite easy; swelling subsiding; May. Sulphat. 5; Infus. Rosæ 5xj; Tinet. Hyos-cyam. 111x. M. ft. Haust. ter in die sumend.

2. Leg and thigh rapidly decreasing; appetite good; allowed a generous diet. Med.

and poultices to be continued.

3. Doing extremely well; pulse about 96; tongue, as it always has been, very clean. Quininæ gr. iij; Infus. Rosæ 3iss. pain, to be succeeded by fomentations and M.f. Haust ter in die sum. Pil. Phonmer. gr. v omni nocte. Ol. Ricini pro re nata. Has nursed the whole of the time, and I am much astonished that she does not show the discipline she has undergone.

15. Patient gone on improving since the 3rd; appetite exceedingly good; bowels regulated; both legs of the same size; complains of weakness and pains in both legs; bandages to be well applied to the thighs and logs; recumbent posture for some time;

and sent into the country.

Sept. 14. I hear that she is doing remarkably well; but, as she cannot walk much, she is very irritable. I think I may say that I never had a patient with whom I had more influence.

ULCERATION OF THE LARYNX.

To the Editor of THE LANCET.

Sir,-I beg to transmit to you the following case and observations for publication in your excellent journal.

January 6, 1834. Thomas W., residing near Middleton, was affected for a considerable period with soreness of the fauces, attended with difficulty of deglutition and hoarseness, and followed by pain on pressure over the cartilages of the laryux, or when that organ was forced from side to side. During these symptoms he was tensed with a short dry cough. In this state he continued during several weeks, when the former symptoms became more aggravated, the cough being very troublesome, and attended by a fetid odour and purnlent expectoration. He had been treated by several surgeons in the surrounding neighbourhood for consumption, but without benefit. When I saw him, he was much reduced in healt1 and strength, and complaining of pain,

the larvax from pressure or motion, part larly in attempting to swallow. Degintifindeed, was very difficult, and quite in lossible if the food was solid. The cough frequently expelled fluids through the nares or 30. Limb casy; skin moist; bowels open; attemption to swallow them.

constant and profuse expectoration of fetid nisco-parulent matter, sometimes streaked with blood. The voice was nearly destroyed. the respiration hurried and difficult, and the rale sibilant sometimes produced a whistling sound. Pulse 110, small and quick; skin dry; countenance anxious; tongue loaded and furred; thirst distressing. He has some desire for food. The bowels are natural. He rarely enjoys sound sleep. On looking into the pharynx and depressing the tongue, the epiglottis can be seen ulcerated at its apex, and the surrounding tissue is highly vascular. Previous to the disease in the larynx, he had enjoyed good health, excepting on contracting syphilis a few years since, not followed, however, by secondary symp-

I directed the ulcer to be touched with nuriate of antimony, and ordered him to have sarsaparilla, broth, diet, and oneeighth of a grain of deuto-chloride of merenry daily.

Jan. 19. He thinks there is less pain in the larynx. He dozes constautly. Ordered him a pint of porter daily.

26. He this morning conglued up a portion of hone, in form resembling the right arytenoid cautilage. His respiration is rather easier; in other respects he is the same.

27. He spent a bad night; occasionally raved; cold perspiration; pulse 120, and irregularly intermittent. Since the last report he has sunk very much. The pulse is scarcely perceptible; expectoration very difficult; he frequently mutters, and lies in a state resembling an imperfect coma. At cleven o'clock this evening he complained of weight and fulness about the heart, and in two hours after, expired without a struggle.

In the translation of Lacunce's work by Dr. Forbes, Lacanec remarks, that ulcers of the broughia and larvnx are in general found in subjects whose lungs are entirely sound; but in a note appended by Dr. Forbes, the opinion of Louis is given in opposition to that of Laennec, and Louis states, that ulceration of the larynx, and more particularly of the traches and epiglottis, is peculiar to phthisis. From the cases which have occurred in my own practice, I decidedly hold the opinion of Lacance, and am opposed to that of Louis. I am in attendance at the present time on a lady residing at Blackley, near this town, who is labouring under alceration of the larynx, in whom the sounds elicited by the stethoscope indicate a healthy state of the viscera of the chest, and such was the case in the subject above-mentioned. am, Sir, your obedient servant,

EDMUND TAYLOR.
Eddleton, near Manchester,
Oct. 2, 1835.

CARBURETTED HYDROGEN.

[We received last week from Dr. Clanny a letter dated Sept. 20, in reply to the letter of Mr. Roberts which appeared in our columns. To allow this controversy to extend in The LANGET one line beyond what strict justice demands to either party, is not our intention. We are not alone influenced in this determination by the fact that the cause of dispute is not clearly known to our readers. It must suffice then, on the present occasion, for us to insert the following abridgment of the statements contained in the first part of Dr. Clanny's letter of the 26th. The remainder of that communication is published entire.]

To the Editor.—Sir,—I request that you will be pleased to insert in your valuable journal the following letter from Mr. Newman, the celebrated philosophical instrument maker, in reply to a query addressed to him by me. The statement of Mr. N. goes to prove incontestably the correctness of ail I have had occasion to write respecting the changing of the wire in my sufety-lamp.

"122, Regentstreet, London, 24th Sept., 1835.
"Dear Sir.—In reply to yours I beg to say that when your safety lamps left my house, the metal ephants which surround the wire-pante were hold in by pieces of line bears wire possing across the reliances. Part of a cell form in your lower my which was turned and the line in the research which was turned and the line in the research product of the control of the metal form the control of a could sufficient to line it, which cannot be explicitly colored were asymptoted by its rotall, enclosing the wire-game.—I am, sir, respectfully, your chedient servant. John Nawman.
"To D. Clamy, Sanderland."

As Dr. Birkbeck was not present in the room adjoining to the lecture room when J. Roberts placed the infusible piece of wire across the cylinder of my safety-lamp, he cannot with propriety assert that "it was an meckent," and that "nothing unfair took place."

I beg to mention a few words upon what I called the sanction of the honourable Chairman for my withdrawal of my safetylamps. The moment I saw Mr. Pereira drive the coal gas jet through the wire-gauze, I said (when I walked up to that part of the table on which the lamp stood), "I am satisfied that something wrong must have taken place, as such an accident as this never occurred before nor ever can again." I then deliberately used my glasses, and found that a piece of thick wire had been substituted; and upon removing my safety-lamps, I heard Mr. Upton, the partner of J. Roberts, very forwardly appeal to the hon. Chairman "whether I should not be compelled to submit my safety-lamps to Mr. Pereira's experiments." On removing my lamps, the

Chairman, Mr. Pease, M.P., put the fol- my friends, containing some "new re lowing question to me, I give it as nearly as searches upon flame;" and since mysreture tny memory permits. " Dr. Clanny, do you consider your safety-lamp as not having been tried, as it was not properly trimmed? The impressive manner in which this question was put, called me from my scat to the table, when I firmly replied, "I do so consider it." No wonder, knowing what I knew and seeing what I saw, that, to use the words of Dr. Birkbeck, "I intemperately adhered to my decision, and refused further examination of my lamp." I have a letter from Mr. Pease, dated House of Commons. Sept. 4th, at the end of which that gentleman says, "Upton and Roberts asked me whether I had any objection to state my opinion that the mismanagement of the lamp was accidental. I had no hesitation to go so far, but I stated to them that your lamp had not been tried, because it was not trimmed as directed."

As to the "Medical Gazette," I shall not henceforth read one word in that periodical, even if it ever be edited by a gentleman.

Before I lay down my pen, I beg to make an observation on the subject of experimenting upon carburetted hydrogen, or, as it is now called, "bi-hydruet of carbon," which may be of service to those who may be inclined to follow up such experiments, and which I intended to have appended to my communication, inserted in THE LAN-CET of the 19th of this month. The graduated glass-tube, containing bi-hydruct of carbon and of chlorine in noted proportions, is to be placed upon the shelf of the pneumatic trough containing water, and the whole of the tube must be covered with a cap of pasteboard, or some such substance, so as to keep out the light effectnally; but if the experiments be performed in artificial light, no such precaution will be needed. The mixture of gases must be left in a tranquil state for ten minutes, which will be a sufficient time for all the chloride of hydrocarbon, or oil-like fluid, to be formed. When we perform these experiments in open day-light, it (viz. the light) will accomplish the condensation of the olefiant gas, with the formation of carbonic acid gas and hydrochloric acid gas. This experiment appears to be an easy one, but it presents difficulties in the execution which require particular exactness. Thus it is, that if the experiment be performed over pure unmixed water, a certain portion of chlorine gas will be absorbed, which will detract from the quantity of the chloride of hydrocarbon; and if we employ water saturated with chlorine gas, the olefiant gas, in its passage, will produce a quantity of chloride of hydrocarbon, which ought not to be the case.

Last spring I printed a few copies of a small tract for private circulation amongst thought accessary, in a disease

from London I have most diligently prosecuted the subject, and find that in respect to yellow or light-giving flame ! was correct, but in other respects, having since had time to correct one or two passages, I now find no difficulty in making public my discoveries thereon. I hope in a few days to have the pleasure of transpitting to you an account of those original experiments; and am, Sir, your obedient humble servant,

W. REID CLANNY.

Sunderland, Sept. 26, 1835.

MALIGNANT CHOLERA.

To the Editor of THE LANCET.

Sin,-In the summer of 1832, when the cholera was devastating the Canadas, a tattered old man appeared in Moutreal, whom the Catholic populace were induced speedily to canonize for his successful treatment of this disease, which was at that time almost as mysterious to the population as the stranger himself. To this madern saint vast numbers of the infected were brought, who were restored to health from the most violent attacks of the inflammatory stage, as well as the worst possible collapse, even after the duly authorized medical practitioner had exhausted and relaxed his efforts The remedy consisted of a due admixture of maple-sugar, charcoal, and lard, which melange was given to his patients in large quantities after every ejection. The results were astonishing, and could be indicated in the speedy alteration of the countenances of the sufferers, and the early subsidence of voniting and purging.

We must not cry down this remedy as empirical, inasmuch as its merits appear to be effectually borne out by the employment of these agents, homely and chean as they

It is obviously improper to permit a patient to continue retching when his stomach is in a state of violent inflammation, as in cholera, without a fluid or unctuous substance being interposed between the sides of the villous coat, to prevent attrition, and afford matter for expulsion upon which the antiperistaltic action of the stomach shall expend itself rather than upon its own substance. Unfortunate in the extreme was it for the patients of those who permitted not the use of any liquid but that spirituous noi! son which added fuel to the flame. Thus lard was combined in this remedy, not cause it was the best, but the most cont lubricating agent.

Mortification and gangrage are the consecutives of inflammation; hence it was

a substance which should afford the best and most common antiseptic capable of being administered in bulk without the influence of any other qualities. This was

supplied by charcoal.

Sugar, in common with lard and charcoal, possesses powerful antiseptic qualities, combined with a stimulating property; and in the addition of this constituent the necessity of a stimulus was acknowledged by the old man, in common with the medical profession at large, who have almost uni versally admitted that principle; but unfortunately the mass of the profession (at least in North America) could not admit the axiom without taking leave of their judgment, and administering spirituous liquors to excess, and, in consequence, many hun- obtain the highest security for the miner dreds, to my knowledge, died in the same that could be obtained in a lamp. condition as they had lived, -namely, drunk. I must remark, in passing, that I consider the brandy and laudanum treatment, the one could be found that would bear the test unnatural combination of a narcotic and an of hydrogen and atmospheric air? inflammatory stimulant, to have been a stain on the intelligence of the profession, is the following: - " Had Sir H. Davy, in the disease if not of the agents themselves. Imable gases of coal-mines, found any gases The main feature of cholera is inflammation stronger than the fire-damp or light carof the stomach, for instance. I have seen buretted hydrogen, he would have no doubt no case in which congestion and inflamma- so modified his wire-gauze (without using tion of that organ have not existed. What, the objectional medium of glass), that even then, are the most proper applications to be jet: of coal-gas could not by any chance be made to it? for the stomach is in nearly the driven through it." * * * " All these exsame circumstances as those of a limb suf- periments of Mr. Pereira (therefore) go for fering from phlegmonous inflammation, nothing, as our pitman can testify." Administer substances which shall serve the with respect to this modification of the offices of fomentations, poultices, and oint-wire-ganzein the Davy-lamp, or in any lamp ments. This may be decried as quackery, on its construction, any pitman will readily but we are bound in this disease to try every testify, and with good reason, that this expedient which bears the remotest leature modification of the wire-gauze has been of a rational principle, or is founded upon carried to the full extent in all such lamus, any recognizable maxim.

I am bound also to state that at the instant of attack, a liberal bleeding, hat fumentations, Davy's own pamphlet on flame, &c., page and the administration of inecacuanha and 15, it will be found that Sir H. Davy was antimony, have been successful with my own patients. I have, ever since I lost my first case (that of a companion and friend, by the abuse of laudanum and brandy), invariably used the hot fomentation, and no circumstance has occurred to stagger my faith in its officacy. I am, Sir,

Your obedient servant, W. II. THOMAS.

Bristol, Sept. 16, 1835.

SAFETY-LAMPS AND FIRE-DAMP.

To the Editor of THE LANCET. As some parts of Dr. Clanny's letters, which are not altogether personal, repower of sufery-

quickly displayed these phenomena, to apply | prevent the ignition of that gas, I trust you will allow me, through the pages of your scientific and much-read publication, to point out some dangerous errors into which, I conceive, he has fallen. The subject is one of great interest to all well-disposed persons, and of immense importance to those who are engaged in coal miningmuch valuable property having been destroyed, and hundreds of lives lost, even within the last two years, in all probability by the prevalence of erroneous notions on the subject. I certainly do not think that the tests to which the safety-lamps in the late trial were put were too severe. No test ought to be considered too severe that could be met by any lamp then produced. One of the objects of the Committee was to they then to take lamps that were not even safe to the test of common coal-gas, when

Amongst other observations of Dr. Clanny - a practice conceived in gross ignorance of his admirable experiments on the inflamwhich will leave them in any degree useful as a means of affording light. And in Sir II. not so ill informed on this subject us has been represented. Sir H. Davy there says, " Some phenomena that I observed in the combustion of a blower, induced me to believe that small quantities of olefiant gas might sometimes be evolved in coal-mines with the carburetted hydrogen; I therefore resolved to make all lamps safe to the test of gas produced by the distillation of coal." Sir H. Davy even goes further on this most important point. At page 144 of the same pamphlet, Sir II. Davy says, " If pure hydrogen should be disengaged in any mines, the improbability of which is, however, very great, wire of a finer texture must be employed." Dr. C. says that while in town he made a promise to Mr. Pease and to Mr. which are not altogether personal, reto his own oplains of the explosive not only "an experienced," but as an "acto the fire-damp of coal-mines, and complished viewer," to analyse some of the to most explosive fire-damp of coal-mines in

has donc. Now with reference to his analy-sis of fire-damp, I beg to remark that away. No man therefore can be expected from his statement, it might be inferred, that to be attended to who recommends that this gas is naturally less inflammable than coal-gas. That it generally appears so when analyzed is true, but to believe that it is always so, is an error, which has no doubt cient, is generally attended with destruction. been productive of many of those lamentable accidents that have of late been so frequent and so severely felt in some of the mining districts; and which error therefore cannot be too speedily corrected. Fire-damp in its pure state is called "light carburctted hydrogen," from its having less carbon to its bulk of hydrogen than the common coal-gas. Consequently when in its pure state, mixed with a proper proportion of atmospheric air, personally offensive, and remain, Sir, your it approaches, in inflammability, perhaps obedient servant, nearly to hydrogen itself and atmospheric air. Happily for the miner, it is very seldoin found in this pure state, and never perhaps can be so, unless saddenly evolved in large quantities. Sir II. Davy states, pp. 30, 31.-"I mixed azote and carbonic acid in different quantities with explosive mixtures of fire-damp, and I found that, even in very small proportions, they diminished the velocity of its inflammability. Azote in the proportion of one to six of an explosive mixture containing twelve of air and one of fire-damp, deprived it of its power of exploding; and one part of carbonic acid to seven of an explosive mixture, also deprived it of the power of exploding; so that its effects are more remarkable than those of azote." Several other eminent men have shown that it is scarcely possible to get two specimens of fire-damp of the same quality. The variations of the quantities of its admixtures, which must always depend materially on local circumstances, it appears sometimes extend to at least 50 per cent. The experimentalist on a small scale is therefore frequently deceived, for he can scarcely ever come a second time to the same conclusion. Indeed he seldom gets it tolerably pure, as it is generally taken within the natural reach of the person carployed, where it cannot be otherwise than greatly contaminated with carbonic acid and nitrogen. I can, from my own experience, speak of a great difference in the inflammability of two specimens of this gas. The firedamp which was taken at a height of about twenty-five feet from a sumpt, was so highly inflammable, that its flame readily passed through a Davy lamp; while some taken near the floor of the same mine, at the base of this sumpt, had no material power on the lamp, and perhaps would not have been dangerous with a naked light. These facts show how carefully experiments, or opinions on the subject should be scrutinized. The fire-damp may come in any coal-mine, as it did so lately at the Wallsend Colliery, in a state no doubt far more explosive than it

district, which it appears the Doctor had been there for the preceding ewelve any extent of security which can be obtained, should be dispensed with where the smallest want of that which is quite suffi-

I shall close my letter, which I now do, that I may not overreach too far, if I have not done so already, on your valuable space, without taking notice of the allusion made by Dr. Clanny to the parties "concerned in uprearing a well-puffed safety-lamp;" nor to his intended insulting reference to "a pitman," "a lamp manufacturer," or other insimuations which may be considered as

GEORGE UPTON.

61, Queen-street, Cheapside. 22ad Sept., 1835.

[We have taken the liberty of suppressing from this letter every paragraph which would lead to useless and valueless controversy.-ED. L.]

THE LANCET.

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London, Saturday, October 10, 1835.

Tue very persons who possess less than the least influence in the election of medical officers in our public charities, are of all persons the most likely to be injured by a bad choice of hospital functionaries, and the most certain to be benefited by a good one. Those persons are the patients. The position which they occupy as claimants for the bounty of the charity prevents their admittance to the suffrage, excepting by a mode which must be described on another occasion. Every man, however, of a liberal and benevolent mind,-all those. in fact, who would place elections to public medical offices on a foundation which will ensure to the sick poor, efficient remedial aid, admit in theory the propriety of granting an influential voice in the choice of medical attendants to the immates of the national hospitals, for in the hands of those attendants are often placed the awful desti-

ze to the hospital patient is not in practice sible, the duty falls on those who hold reins of government in our medical crities, to substitute for the corrective ce of the most deeply interested parties, ue system of appointment which fully ognises in the object of the election the press benefit of the afflicted inmates, and ids to render subscribent to that end ery other consideration.

Unquestionably the form of appointnt should be such as will test the talents I scientific acquirements of the various ididates, and admit of a fair comparison ween the degrees of merit displayed, d provide the means for competent arbi-'s to pronounce a just decision as the reit of that comparison.

The truth of affirmative positions often ist be established by the evidence of gatives, which, unhappily, are too often thin the reach of those who would abolish uses in government, and erect in their ice sound principles of legislation. Inssantly does it happen, for instance, in edical arrangements, that the advantages a sound code of laws must be enforced exhibiting the deformities of one which imperfect and corrupt. On such a precament are we thrown in the pursuit of e object which at present occupies our tention. We shall first hypothesize a se, and then prove its reality.

Suppose that the election of a surgeon to i Infirmary is about to take place in one our county towns, and that a large body persons has assembled before the tribuil of judgment to witness the proceedings id to assure themselves that the duty hich the governors of the institution owe the poor and sick amongst their brethren the community, whom they invite to ater its walls, is strictly, conscientiously, rectly fulfilled.

et speaker rises to take his share the proceedings, and makes known to his

But since the direct concession of the suf- arena of competition. "All men would expect that the grounds of these claims should alone occupy his mind; because the right of admission as a candidate at all, requires first to be established; for a lawyer should not compete for the vacant office, nor should a soldier, nor a merchant, nor an artisan, nor, in order to prevent a waste of time, without impeding the principle of proceeding, should a known tyro in surgery. Amazement, however, surely would affect the assembly, on finding that the very proofs of the right to compete were converted at once into "reasons" for forthwith electing one particular man to the office, in preference to every other candidate. Great, surely, would seem the dereliction from a just principle, of that functionary in the election who should forthwith fill his exhortation to the electors with "reasons" based on unprofessional experience in affairs' of medical science, and immediately pronounce a decision in favour of a yet untested candidate. Say that for decency the speaker prefaces his observations by an admission of the high importance of the duties to be executed,-of the great "responsibility" which will attach to the chosen officer, and of the necessity that, for the welfare and "comfort of the unfortunate patients," none but "professional grounds" should influence the decision of the meeting. Then thus imagine him to proceed, plunging at once in mædias res :- " Friends and electors! I re-" commend to your choice Mr. Surgeon " DICKIN. First; because he has written a " very modest, delicate, and humble letter of " solicitation to the trustees. Therefore you " ought to elect him to cure the patients in " this hospital. " Secondly : because private " inquiries into his education and character " convince me that he possesses very high " natural abilities, that he has received the " very best education in the first schools of " Europe, bringing his education and abi-" lities to bear on his professional pursuits "in such a manner as eminently to fit fine the pareller grounds on Which the "him to cure the patients in this hospital." claim admission to a Thirdly: His teacher and perfeer in medi-

" cal practice, recommends in the strongest | " Gentlemen, these facts are overwhelming! a manner that he should be elected surgeon " influential with me, and I feel honoured in " to the institution; therefore you ought to " proposing Mr. Dickin to you as a surgeon "elect him. Fourthly, because six sum- "to the patients in this infirmary." " mers back he ceased to be a student, and " comes before us therefore now with years lent judge of the professional claims of a " of venerable experience on his head "Fifthly: because, since he received a li- Who would not laugh at this proceeding "cense to practise, he has possessed the very as at a scene in a farce,-or start at it as a " best opportunities of daily witnessing the mockery of the claims of the patients, " newest discoveries (numerous as drops of and a grossly unjust attempt to influence " hail in winter) in surgical treatment; while the electoral judges against the claims of "the other candidates have been kept in able and experienced men who had not "ignorance of these discoveries, by con-"stant employment in their libraries at to the "trustees," though possessed of " home, and in the sick rooms of patients in "long-established practices in this country the first European schools, - who possessed " town. Sixthly, my friends, and above all,-"weightier in the scale of his professional " qualifications even than the recommenda-" tion of his partner,-is the fact that he has " passed many years (as a pupil) in this " very infirmary, seeing daily its practice, "and getting intimately acquainted with " the habits and peculiarities of its USUAL " INMATES. Seventhly and lastly: The medi-" cal officers of the establishment, though " none of them personally interested in the " election of their juvenile half-colleague, " have declared that he ought to be elected. " It matters not that the inmates, whose " habits and peculiarities he has studied, " were patients in the infirmary several " years since. Habits and peculiarities run " in the breed of Salopian hospital inmates, " and will be the same in those of 1836 as "they were in the inmates of 1829. Mr. "DICKIN therefore you should elect. " Moreover, none of the other candidates " have obtained the recommendation of the " medical officers of the infirmary. On the " contrary, it is a very general custom for " the physicians and surgeons in country " hospitals and infirmaries, to prevent their " brother practitioners from possessing the " opportunity of witnessing the practice of " those institutions; and of course they "could not recommend gentlemen whom "they purposely avoid in the hospital.

Probably a ciergyman, an equally excelrgeon, seconds the nomination.

written "delicate" and "humble" letters " high natural abilities," and educated in no certificates from "partners," nor the privilege of admittance to the practice of an hospital where the oracular authority of the "newest discoveries in surgical treatment" was a youth of five or six and twenty,-and who had only been employed daily for twelve or twenty years in treating disease amongst individuals whose "habits and peculiarities" were not characteristic of a particular set of sick patients?

Yet from the life have we made this sketch, and such another could we draw from the life in every number of our journal throughout the year.

Let the reader judge how faithful is the illustration, and reflect on the facts which it exhibits, by perusing the following extract from the Shrewsbury Chronicle of the 25th ultimo. Well may the sounds of " cheering" and " continued cheering" which attended the exordium of Mr. Gork, have been arrested at the point of their actual cessation. Most appropriate were those demonstrations as indicated by the reporter, but for the assembly presently to withhold them, became a duty which was well observed. The sentences are transferred verbatim to our columns :--

on of a St Infin distees of this in of unwards of 300. mary, on Priday la

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in the room of Mr. Humphreys, resigned. received within its wills, but of every medi-There were as candidates, Messrs. Higgins, cal officer upon the steakinth of the Clarke, Dickin, and W. J. Clement; but unanimously ignests recommending him as the first-named gentleman resigned, and the well attended to the situation. Such recomsecond did not proceed to a poll; the con-imagdation is of the highest value in enabling

" W. O. Gorr. Esq., M.P., rose and spoke, -It has fallen to my lot, my Lords Gentlemen, to nominate Mr. Dickin us geon to this very useful institution; but before doing so, I will briefly state the reasons that have induced me. Some time ago Mr. Dickin applied to me for my support at the election, and that I should propose him. I declined; because, although I knew his connexions to be highly respectable, still I knew not enough of Mr. Dickin professionally to support his pretensions to occupy a situation of such responsibility; for I think that this election is to be decided on professional grounds alone, and not on any per-sonal, far less political ground (great cheering), but solely with an eye to the character of the institution, and the comfort of its unfortunate inmates. (Continued cheering.) When, however, I read the very modest letter which he addressed to the trustees, in which he claimed nothing, but stated his pretensions with equal delicacy, modesty, and humility, I could not resist making further inquiries into his education and character; and these inquiries satisfied me that Mr. Dickin was a gentleman possessing rery high natural abilities, having received the very best education in the first schools in Europe, and brought that education and those abilities to bear on his professional pursuits in such a manner as to gain him the approbation of all around him, and emineutly to fit him for the situation to which he now aspires. From his tutor, and partner, Mr. Humphreys, I received a letter, recommending Mr. Dickin in the strongest mauner; and as no man could possess better opportunities of knowing him, I could no longer hesitate in affording him my humble support. The testimonials which Mr. Dickin has this day laid before you, are such as few young men ever produced. Few men of his standing have seen so much hospital practice, a species of knowledge so valuable in this institution. In 1829 he received his diploma, and since that period he has been studying in Edinburgh, where he has had the very best opportunities of daily wilness. by the newest discoveries in surgical treatment; whilst the other candidates have been precluded from this advantage, by their other rofessional labours. But above all, he has used many years in this sary house, secin the practice and getting intimately focus and with its practice, and getting intimately loquested with its about and getting for the personn his addoors duties here—so diligent ad attentive — he—that he getted the person his properties of every patient things.

test, therefore, lay between Messrs. Clement you to come to a satisfactory decision. None and Dickin. of the other candidates comes before you so recommended; and no such names as Darwin, Du Gard, or Johnson, would be attached to a document, were these honourable men not aware that the person they recommended was worthy of the praise they bestowed. I therefore feel henoured in proposing Mr. Dickin to be elected as surgeon to the Infirmary.

"The Rev. Mr. Corron seconded the

nomination."

We have thrown the burden of exposing these absurd grounds of recommendation on the fictitious oration of one of the judges in this concours of friends, and, as we hear, political partisans. But the speech in which the claims of the second candidate were. urged, may obtain from us a more pointed exposure of the errors into which the system of election upon simple nomination is calculated to lead the self-appointed guardians of the public health. When Mr. GORE had concluded,

"Archdeacon Butler rose and said,-My Lords and Gentlemen, I come forward in behalf of one who was for some time my pupil; who then conducted himself much to my satisfaction, and gave the promise of those talents which his after life has so amply redeemed. But he has a stronger claim to my services than this, arising from the many and great obligations which I feel myself under to his father and himself, for the skill and attention which they have shown for many years in their professional capacity, while attending two-thirds of my family. I have seen the medical skill of the latter exercised with a happy combination of promptitude and judgment, on more than one critical occasion,-where the result has been eminently successful,-where delay would have been minous, and where but for such decision the issue must have been fatal. (Cheers.) Mr. Clement's testimonials are before you, and when among the host of first-rate practitioners you find the names of that great anatomist and surgeon Sir Charles Bell in the surgical, and of Dr. Southey, physician to his Majesty, in the medical department, and consider the terms in which they have spoken of him, I may call them not merely respectable or unexceptionable, but of the highest order; and I am sure you will acknowledge that I am not using too strong a term to describe them. But he has something still stronger than

these to produce. I mean the direct evidence of his own taken, his own experience—his own coperative skill—all of which are not only before the eyes of his professional raries in this town and neighbourhood, he of whom, in so unusually kind a manner have come forward to attest them, but of the whole medical world. Mr. Clement has given proofs of this in his Prize Essay, for which he obtained the Fothergillian gold medal in a competition open, I believe, to all Europe; and in the volume which he has published, which has been translated into other languages, and of which, though I am not competent to speak professionally, I can trust the opinions of those who are, many of which you will find annexed to his printed testimonials. From these you may learn the ardour with which he embraces his profession, and the skill with which he conducts it; the fair reward of which, I trust, he is about to reap this day at your hands. And with this hope, my Lords and Gentlemen, I shall beg leave to propose Mr. William Clement, as a fit and able candidate to fill the office of surgeon to this Infirmary. (Cheers.)"

That of these two candidates Mr. CLE-MENT was, on the ground of experience, the fittest man to fill the vacant office, we have no doubt. That either of the candidates was not an accomplished surgeon, we have no reason for believing; certainly, however, the probability of efficiency was in favour of Mr. CLEMENT. Yet Mr. CLE-MENT did not obtain the appointment, and two other gentlemen were expressly driven from the field of competition by the mode of election,-by the institution of the false basis on which the points of merit were made to rest. But how could Mr. CLEMENT, or any candidate, expect to be elected, who suffered his claims to consist of the following grounds of recommendation? First, the voucher of his schoolmaster, that he was a clever boy. Secondly, the declaration of a private patient that he was under great obligations to the father of the candidate and ble, by the addition of the claim set up by the candidate himself, for the exercise of their professional skill and attention. Where is the patient in private life, who would tenths of the professional world probably not say the same of the medical attendant never thought twice existences of his choice? Lord Ingestrie and Sir said to be open to the state of all FRANCIS BURDETT bore a precisely similar rope." The climax of testimony to the skill and attention of John time

Long, and everybody laughed at them as a couple of dupes. Why, the first exhminer of medical talent in the world could not. with all his fitness for the office, have pronounced a higher eulogium on the medical " skill " and " judgment" of a candidate for office, than fell from the lips of the archdeacon. Thirdly, Dr. BUTLER urged Che " unexceptionable" weight of the written " testimonials" of Mr. CLEMENT. Testimonials! Why, the very name stinks in the profession. The testimonials of teachers and private friends! Hardly a name of reproach is there that can be attached to scriptorial impositions, which has not been publicly given to them by this very class of testifiers themselves (when hard pressed), as every reader of the evidence taken before the Parliamentary Medical Committee well knows. Fourthly, the electors are referred to the fact that Mr. CLEMENT is occupied in a most extensive private practice, his skill in which is notorious to his professional brethren. To say nothing of the singularity of urging the election of a gentleman who is already well occupied in a " most extensive" practice, to an office in a large county infirmary, let us observe that the skill and science of a private practitioner can be but indifferently observed by his professional brethren, and are liable to present too many deceptions to justify reliance upon them from hearsay or general belief. Morcover, the "professional contemporaries" who were declared by Mr. Gone to be the best judges of the skill and judgment of a Salopian surgeon, actually gave their decision in favour of another candidate. But the error of trusting to written and verbal grounds of recommendation in medical elections is made more palpable, if possi-Dr. BUTLER, relative to the competition of his pupil for a medal, which, although nine.

Truly, puzzled are we to say. Most probably no salary sweetens the labours of the office in the Infirmary, and the just execution of its duties must actually deprive Mr. CLEMENT of part of the very income which he derives from a highly remunerative circle of private patients. A reward, then, for what, and what kind of reward would the possession of this appointment he to Mr. CLE-MENT? Archdeacon Butlen begs the trustees to double the labours of a gentleman, as a recompense for that portion of them for which he has actually already been paid! What a very finny mode of proceeding! How odd a system of reward! Had the trustees liberally attached a salary of three or four hundred nounds a-year to the office of chief resident surgeon, and then opened the post to public concours, the word "reward" might not sound so very foreign to the occasion. It might with a good grace attend the annual presentation of a check for the salary; but as matters at present stand, we certainly do not comprehend the term. We know what is meant by the "benefit" of the patients. We wish that that was better understood. Alas! it is the very weakest spring of action in English hospital elections. Yet, professedly, it is the be-all and the end-all of public medical charities. A third speech was made at the Salopian Infirmary, and in that speech was large talk of the nativats. No feelings more considerate, indeed, could have influenced the orator than were expressed in the introductory passages.

"I rise," said Mr. Bather, " to second the nomination of Mr. Clement. Mr. Gore has told you that neither favour nor effection, neither political partiality nor personal predilection, should hias our votes on this occasion; and I, on behalf of Mr. Clement, most cordially subscribe to the doctrine. (Cheers.) Most heartily do I trust that the advice thus gives will be acted upon thoroughly in our query actions of these and provided in the control of the c

that the appointment may be given as a ments and our desired, and lead us to forget "reward" for,—ah, a reward for what? Truly, puzzled are we to say. Most probably no salary sweetens the labours of the Letter. And when that gratitude is call forth by sufferings alleviated,—or before in the Infirmary, and the just execution of its duties must actually deprive Mr. CLEMENT of part of the very income which get our duty, and to remember only our gratitude! (Cheers.)"

This is cloquent and true, but how was the well-cheered theory observed in practice? Let the recommendations urged by Mr. Gore and Dr. Bather furnish answers to the questions. To these Mr. Bather added another claim, but such another as every practitioner in Britain could supply for himself by the dozen. He said,

"In this case, with all the strongest ties of gratitude wound close around us, we are freed from any terror of being misled hy such feelings, in the perfect knowledge that the skill which averted our sufferings is, if you will permit it, to be employed in alleviating the affliction of the humblest of our fellow creatures; -that the decision which averted from us the pangs of death, is proffered openly to all; and that not by the wealthy alone, are zeal, and promptitude, and skill, and talent, to be obtained, but by the poorest and most destitute those qualities may be commanded, if you will this day permit them to be accepted. (Cheers.) Dr. Butler has told you that to Mr. Clement and his father is entrusted the health of two thirds of a family, not exceeded in number or respectability, you will allow, by any in the kingdom-certainly not exceeded in any case in the care which is bestowed upon them by that gentleman's family. My reverend friend has also told you that in the humanity, promptitude, and decision of Mr. Clement he had the utmost confidence, and to those qualities he attributed much of the healthful enjoyment of his pupils: he has further drawn such a picture of what might have arisen from the want of those qualities, from less care, less promptitude, less zeal, or less decision, as must deeply have impressed your minds with their value. Gentlemen, if Dr. Butler so feelingly speaks of Mr. Clement's abilities as regards his pupils, with what depth of feeling must I speak of him, when to the successful exertion of those qualities, under God, I owe the life of my own, son; for to that zeal, promptitude, and skill I owe his preservation! (Much cheering.) Surely, then, if gratitude forces me to what my cool judgment would otherwise lead me, I cannot be far astray in following their dictates. (Cheers.)"

It was sad to see the gashes which Mr.

under the imperfect system, kept inflicting have highly lauded. The French and Geron his own throat. He could see the mate monies be borne than the united praises of in Mr. Dickin's eye; the beam in Ma the three greatest nations in Europe? I con-CLEMENT'S, obstructed his vision.

"This," said Mr. BATHER, "is essentially a case to be decided by your opinion of the comparative superiority of one candidate over another. You are bound to select the best, or you betray your trust. We can speak well of each candidate. But look at the evidence. The first class consists of proofs of those steps which enable the candidates to offer themselves as qualified to fill the situation. But we cannot permit Mr. Gore to hold forth that as a recommendation which is only a certificate. We cannot allow him to say that Dr. Darwin has recommended him in preference to the other candidates, when he has only certified that he properly attended his duties in his situation; and which certificate could equalty be obtained by any young man who properly conducted himself. (Hear, hear.) Mr. Dickin's testimonials are all to a similar effect. Great hope have the writers that he will prove in time a useful surgeon. (Laughter.) We show you the eminence Mr. Clement has already attained. Can you hesitate which you should select, if you mean honestly to benefit the patients in this infirmary? The abilities of the candidates are to guide you in that decision. (Cheers.) Yet Mr. Humphrey's recommendation must be taken with all due allowance. Mr. Dickin has been his pupil; he has now become his partner, and to him therefore the partialities of its chief will naturally incline. For see how these matters are conducted. Mr. Sandford was the original founder of the firm; he in course of time retired, and handed over the business to Mr. Humphreys, with the surgeoncy to this institution attached; and now that Mr. Humphreys is about to retire, Mr. Dickin is to succeed him, and the surgeoncy follows as a matter of course, being handed over from partner to partner, like the scalpel and the gallipot. (Cheers and laughter.) Poverty and disease are surely sufficient afflictions; let us not add to them other evils of a vet more horrid sort; let us not promise them relief, and give them disappointment. (Cheers.) If you were to throw overboard all Mr. Dickin's testimonials, the same number abstracted from Mr. Clement's would not be missed: for his experience and repute would remain; and on what other grounds can you choose an operating surgeon? What say his fellow surgeons of him? Has he not produced a list of the most eminent surgeons in the county, strongly recommending him to your choice, throwing aside all professional jealousy, and they are but a jealous and waspish generation. Mr. Clement has given to the world his "Observations in Surgery," With that tenfold honour

BATHER, as the advocate of Mr. CLEMENT | which all persons qualified to give an opinion mans have translated it. Can higher testijure you to reflect on the condition of those for whom you are acting. I ask you, not for Mr. Clement's sake, but for the sake of the Infirmary, to appoint the man whose experience and abilities best qualify him for the place."

> " Not for the sake of Mr. Clement ?"-Why, what said Dr. BUTLER, the coadjutor of Mr. BATHER? Dr. BUTLER expressly demanded the appointment for the sake of Mr. CLEMENT,-for his " reward,"-as the Doctor phrased it. And these incongruous sentiments fall from the lips of two of the most prominent and influential conductors of the election! Is there in gentleman within the sound of Shrewsbury clock who will take the trouble to explain to these worthy and most respectable gentlemen,and such they are in every sense of the words,-the conduct, object, efficiency, and security of the concours? Conviction on those points might do some good at the next vacancy.

> The meeting was evidently in favour of Mr. CLEMENT, but part of the judges were non-residents, or at any rate non-presents, for-

> "Immediately on the conclusion of Mr. Bather's speech, a show of hands was called for, which was considerably in favour of Mr. Clement. A ballot was then demandel, in order to introduce the proxice, when the numbers were announced-

> > For Mr. Dickin 221 For Mr. Clement 168

" A vote of thanks was then moved to the Chairman by Mr. Bather, seconded by Mr. Sheppard; and the meeting dispersed."

We shall pursue the matter only a step farther at present. We cannot before leavit refrain from asking how it happened that Mr. CLEMENT, a gentleman who had, probably, no need to fear the contest, said not one word throughout the period of canvage about the election by concours? that form of appointment how w weak and unworthy have your to the wall!

have been to the trustees and the public the propriety of remunerating the great skill and talent which circumstances had rendered prominent! We do not for a moment believe that Mr. Dickin would have avoided this test of his qualifications; and what an example would be have set, what fame might he have acquired, by insisting that it should be instituted! That he, at least, could have carried the point, who can doubt? If 221 friends would vote for his appointment under an absolutely worthless system of "trial," how much more readily, confidence,-would the majority of the trustees have made an arrangement for a public and an honourable concours between him and Mr. CLEMENT! He has missed a point which he may never retrieve. We hope the patients in the Infirmary will have no cause to regret the want of courage in the candidates (if that were the want) which led the trustees into the gross error they committed in tolerating another election under the old, inadequate, and corrupt system of election.

WE this week afford our readers three or four specimens of the kind of matter which occupied the attention of the medical students in the metropolis this session at the introductory lectures. Jam satis. The system is by this hour of the month in full swing. It will die at not one point of advance beyond its merits at the day of its birth.

We observe that Sir C. Bell ascribes the rise of the Middlesex Hospital School to a desire to reobtain the pupils who have been drawn from that hospital to the hospital of the London University. What a mistake remedyl revernors should have hly americ of lattruction, and then no pu-

ful competitor have entered on the duties, see that it is the North-London Hospital of the office! How manifest then would which attracts students to the University lectures? How wayward in their principles of legislation are the old folks in the hospitals!

Sir CHARLES BRILL referred in his address to his Parliamentary Evidence. He is one of the few men of his class who can afford to do so. His opinions on medical legislation, for the most part do his courage and his discrimination credit. Let those medical students who have not yet perused them, learn what a man who has deservedly risen to the highest pinnacle of professional fame in this country, solely by the aid of his own --urged by his demands, and fortified by his industry, thinks of the present system of medical education and practice in England. They will find his evidence recorded in THE LANCET of the 25th of July last, No. 621. And while referring to it, we may take the opportunity of adding, by way of postscript to our recent remarks on the study of anatomy, and on the fraudulent system of lecturing students into a knowledge of medicine, the following remarks of Sir CHARLES on those subjects :-

> "When a young man retires from his studies, and is solely dependent on himself in practice, the knowledge which he feels the greatest difficulty in supplying, is that of anatomy. In speaking on the subject of education, I wish to distinguish between lectures which require demonstration, and those which are mere discourses. Anatomy and chemistry require demonstration. These, therefore, are the most essential to be taught by lecture. The practice of medicine and surgery requires to be taught by the bed-side. Elementary courses on these subjects may be supplied by diligent reading. To crowd a curriculum of medical study with a variety of courses, would be little conducive to a good end. There is a disposition to diminish the importance of anatomy. Yet anatomy is the groundwork of all. From that science, not only the elements but the great rules of the profession are to be drawn. I do not think that there has been any advantage derived from multhe Middleess Hospital dividing professorships, and dividing and sub-dividing the subjects of lectures (into so many courses). I fear it has often been done for left its walls. Do they not the purpose of providing for individuals.

EMMENAGOGUE PROPERTIES OF ACONITUM.

In a paper by M. West of Strasbourg, in the August Number of the Archives Generales de Med., M. WEST states that aconitum is one of those remedies which after having been praised beyond all measure, like many other new remedies, is now completely neglected in France. In Germany a few physicians still employ it in some cases, particularly in phthisis and rheumatismal affections. The author, while attending the clinique of the School of Medicine at Vienna, has seen a great number of experiments with this remedy. In phthisis its action never appeared very advantageous, but always inferior to that of the other narcotic substances. Its utility in cases of rheumatism seems more doubtful. However, amongst other patients at the school of Vienna, the author observed two females on whom the action of aconitum was very remarkable. One was a stout female, 27 years of age, affected with articular rheumatism of the left arm: her menses had been suppressed for three months in consequence of exposure to cold. Aconitum joined to antimony was administered for the rheumatic affection. The latter persisted without any change, but the menstrual discharge was quickly restored.

The second case was that of a female, 32 years of age, equally affected with rheumatism, whose catamenia had not appeared for five months: she took aconitum; the pains diminished slightly, and the menstruction These cases roused the was restored. author's attention, and induced him to make further experiments. He details three examples of successful application of the remedy to amenorrhora. In the first, the disease had been established for twenty-two months: the patient was bled, and took the watery extract of aconitum for eight days previous to the supposed menstrual period. On the 5th day the pupils appeared dilated, with other slight indisposition: on the 8th day the menses reappeared, and have continued regular since that period.

In the second case, that of a weakly girl, the menses had been suppressed four and a half years, and replaced by a leucorrhocal discharge, more abundant at each period. The patient took thirty grains of the extract

in twelve days, for suppression of the leucorrhora, accompanied by pain and weight in the summit of the vagina: on the 10th day the pain had much diminished, and the

> In the third case, the girl, 19 years of age, began to menstruate at the age of 16; the lapse of a year the discharge was saddenly arrested in consequence of exposure to cold. After five months the patient experienced severe pain in the head and abdomen. These soon changed into true hysteria, the access of which came on at each menstrual period, and was excited by any moral emotion. The patient was seen a year after the suppression of her catamenia, and then exhibited the symptoms of chlorosis in the highest degree. She was ordered general and local baths, with thirty pills of the extract, to be taken eight days before the expected period. After the use of twenty grains the catamonia appeared, and were succeeded by a very fetid white discharge; from this moment the access of hysteria disappeared, and the patient gradually recovered her health.

> From these facts and several others noticed by the German writers, the author thinks the efficacy of aconitum in cases of amenorthese cannot be doubted; as to its made of action, the author thinks it may determine the reappearance of the menses, not by any specific property (for there does not exist any absolute emmenagogue), but by calming an irritation of the uterus, by which the vessels furnishing the menstrual flux are prevented from performing their ordinary function.

RE-VACCINATIONS IN THE ARMY OF THE WURTEMBURGIAN STATES IN 1833.

Professor Heim states in the Wurtemb. Mediz. Correspondl., Nos. 10 and 11, that 1683 individuals were re-vaccinated with the following results:—34 in each 100 with success; 22 with modified results; 44 without any result. The patients were from twenty to thirty years of age. Of 577 who were revaccinated with perfectly successful results, 293 showed good cicatrices, 116 imperfect and 168 presented no cicatrices at all. Of 366 re-vaccinated with prefect results, 193 had good mark. The parfect result, 382 showed good, 222 impat, and 196 no cleatrices.

THE ARTERIES IN INFLAMMATION.

To the Editor of THE LANCET.

SIR,-In the last number of the Medica Chirurgical Review there is a notice of Professor Alison's paper on the vital properties of arteries, &c. I was glad to find, on parusal, evidence, as I thought, that journal had changed its opinion regarding the state of the vessels in an inflamed part, and of those leading to the part. On rereading the article, however, I was surprised to find that there was no change in opinion, but that the doctrine advocated by the Professor had always been considered by that journal as the true doctrine. In my own mind, from what I had gleaned from the pages of the Medico Chirurgical Review, I had settled that it was opposed to the doctrine of debility of the vessels in inflamed parts; and I was sorry for it, because from its high repute and great circulation it became a powerful means of extending an mischief. Afraid that I had all along laboared under a misconception of the sentiments of the journal, I have referred to forwill briefly transcribe from its pages some blood circulating slowly is less florid than of the remarks on which rested my opinion blood circulating rapidly. In phlegmonous of its creed.

At page 498 (Med. Chir. Review) you will find the following passage:-" Every one knew that vessels leading to inflamed parts were dilated; and it is nearly half a century ago that numerous experiments were made in Edinburgh (Lubbock, Allan, Wilson), to prove that the capillaries were weakened and dilated in inflammation, and consequently that the circulation was actually slower in inflamed than in sound parts. We have always considered this as the true doctrine of inflammation, and we are glad to sec so able an advocate of the same in the person of Professor Alison."

Compare with the above the following, which you will find at page 411, Med. Chir. Review, October 1832: - "The prevailing opinion at present appears to be that the capillary vessels are weakened and dilated, (condensed from the Bury Herald). In Mr. because by reason of that weakness, they are unable to resist the ordinary force of the heart and large vessels. This has always appeared to us a fallacious theory, although we are willing to allow that it is a specious one."

Of course the journal could not but admit of a dilated state of the vessels, but I am not aware that it ever until now admitted, that transls in acute inflammation were in a oc. of the decident of the dec ry, is i says, "should teach us

that inflammation in not always the same, that acute inflammation is remedied by what empties and relaxes the large vessels and the small, that certain forms of chronic ingives tone to them. Who does not know that phlegmonous inflammation is best treated by depletion, local or general, or both; and by the application of warmth and moisture, agents especially calculated to relax? We think this instance sufficient to upset the doctrine which makes inflammation consist in debility of vessels."-Med. Chir. Rev., October 1832, p. 414.

Is there not a change of opinion also as respects the velocity of the circulation in the inflamed part? We now learn from the the inflamed part? journal that it has always considered this as the true doctrine of inflammation, viz., weakened and dilated capillaries, consequently circulation actually slower in inflamed than in sound parts. Witness how the reviewer expresses himself in October 1832, p. 412. "An inflamed part, if formerly white, becomes more or less red, and, error which has occasioned immeasurable if previously red, it is rendered redder. This arises, of course, from the greater quantity of blood which is in it. But we must not stop here, venous blood and arterial differ in mer expressions of these sentiments, and colour, and, for precisely the same reason, inflammation the colour is vivid, not only because there is much arterial blood in the part, but also because that arterial blood is frequently renewed; in other words, because it is circulated with rapidity." I remain, Sir, authenticating my communication privately, your obedient servant,

Oct. 7th, 183

EASTERN MEDICAL ASSOCIATION.

To the Editor of THE LANCET.

Sir,-May I request that you will do me the favour to insert in your next LANCET & correction of an erroncous reference to myself in the report of the " Formation of an Eastern Provincial Medical Association" Bedingfield's speech I am called Dr. Rum. sey, and am said to be president of the Bucks Medical Association. I disclaim, however, both these honours, being only a general practitioner, and holding no office in the Bucks Medical Association, of which, nevertheless. I am a member and a sincere well-wisher.

The mistake doubtless arose from my having mentioned to Mr. Bedingfield that I am secretary to a committee appointed by the Provincial Medical and Surgical Association, held at Oxford in July last, for inays, "ahould teach us quivy into the present state of parochial research to the parochial attendance, &c. &c. In this capa-

city I shall be happy to receive all the in- the previous injury to have been the cause formation which my medical brothren in the country can afford me; and I take this opportunity of gladly thanking you for the zeal with which you have, both in your editorial and parliamentary capacity, advocated the cause of the country practitioners, in their opposition to the disgraceful proceed-ings of the Poor-Law Commissioners. I have the honour to be, Sir, your obedient servant.

H. W. RUMSEY.

Chesham, Bucks, Oct. 5, 1835.

WITHOUT EVIDENCE.

To the Editor of THE LANCE !.

ticulars of a coroner's inquest which lately took place in this neighbourhood, and to which I was summoned as the medical witness. I do so for the purpose of enabling you to decide whether my conduct was legal or not in refusing to open the body without possession of a written order from the coroner. If I had opened the body without such order, could I have successfully supported a ing been opened: "Died of inflammation of demand for remuneration in a court of law; and against whom? You would greatly oblige me by answering these questions, as I have to make my appearance at the Old Bailey on the trial of the husband of the deceased. The subject of remuneration to medical men at inquests, being now of peculiar interest to the profession, you are at liberty to insert the following in the next number of your valuable Journal.

A woman named Sarah Goodlad game of the Western General Dispensary on the little with an injury which she said she are received from falling on a pail. I examinate side (the part affected, and believed to the contract of t there was a fracture of one or two ribs. treated her accordingly. Juflammation of the lungs came on in two or three days afterwards, and in spite of the most active treatment she died on the 19th ult. An inquest was held on the body, as it had been reported that her husband had beaten her (indeed she stated to a neighbour that her husband had been the cause of the injury). This came out in evidence before the jury, and it was stated that he had thrown a loaf of bread at her. It seemed to me from this that there was sufficient evidence of injury inflicted by the husband to account for the fracture, but most of the jury did not think so. They had heard evidence respecting some slight accident which happened about a month before I saw her, and it would seem from their verdict, that they partly believed without remuneration. En

of the fracture. Three of the jurymen, however, were not quite convinced on this point, and I was asked if a post-mortem examination would make the matter any clearer. I said most undoubtedly it would. The coroner (Mr. Stirling) therefore asked me to open the body, which I told him I would immediately do if he would give me a written order by means of which I should obtain remuneration for the trouble. This he refused to do, saying that he never had done such a thing. His clerk (who really was the chief man on this occasion) then told the jury that there would be no difficulty about the matter, though I had refused REFUSAL TO OPEN A BODY AT AN INQUEST, to open the body, for he would write to a WITHOUT REMUNERATION. - VERDICT VESTIVINAN of the parish who would send one of the house-surgeons from the parish infirmary to do it.

The inquest was accordingly adjourned to the rext day at three o'clock, when the Sin,-I beg to transmit to you some par- jury met, and waited for some time for the evidence of the medical man who was to have opened the body; but it appeared on inquiry that the body had not even then been opened; neither did either of the infirmary medical officers attend the inquest. The patience of the jury being now exhausted, they made up their minds to deliver the following singular verdict, the body not harthe lungs, brought on by fractured ribs, but by what means the fracture was accasioned there is not sufficient eridence to prove!"

Now, Sir, if the public will allow verdicts to be passed in such a manner as this, they deserve to suffer from the consequences. It certainly was not a just request to require a professional man, whose time and knowledge were his property, and whose reputation as a witness was at stake, to make a post-mortem chamination, without the least renuncration, and perhaps with insult. My motive for refusing on this occasion to open the body, grose chiefly from the feeling, that by complying with the direction of the coroner, I should be doing injury to the profession through an injury done to myself. Besides, I object to be even a partial means of continuing the present unjust system. Whether I acted according to law I beg to be informed, and remain, Sir, your most obedient,

WILLIAM ROBINS, House Surg.

1.0

Western General Dispensary, New Road, October 1, 1835.

. The only question of Mr. Robins to which we need reply may be thus answercd:-He was not liable to the institu any proceeding at the any penalty, for refusion

THE SYSTEM OF LECTURING.

To the Editor of THE LANCET.

SIB.—The truth of the remarks in the leader of a recent number of your invaluable publication, on the impositions of the legture system, must be acknowledged by every one who has been compelled to doze over the wearisome and uninstructive discourses called lectures, which are paid for on compulsion, at such an exorbitant price. What intellect can master and retain the matter of six or eight of these lectures delivered in one day? Thanks, however, to the untiring exertions of The Lancer, the system is tottering.

For my own part I have often considered that the lectures which a student hears, obstruct, instead of assisting the student, in obtaining a knowledge of the mode of perberming operations, for instance; the directions for conducting them are generally conveyed in the most vague manner, or the student is intimidated and prevented from attempting them, by alarming statements of the difficulties to be encountered. I am not the advocate of rash attempts, but I dispute the propriety of frightening students from attempting operations of any kind that near hereafter fall into their hands, instead of fully instructing them in their performance. I fear that the alarmists bear in mind on these occasions the effect of fully informing embryo practitioners on those points which hospital teachers and operators take especially under their own care as "pure" surgeons. Let the lecturers say what they like in favour of the lecturing system, I am sure that the pupil, especially when he is out of the pale of their influence, and with calm and dispessionate mind looks back on the system, will feel and acknowledge the entire truth of the remarks which The Lancer has lately made on the subject. With an expression of matisfaction that you have drawn yet further attention to this system, and fully assured that when the system has been thoroughly purged, its insufficiency and unworthiness will be admitted by every one, I remain, Sir, your obedient servant,

Medicus.

Worcester, Sept. 29th, 1835.

MIDDLESEX HOSPITAL SCHOOL.

c. C. Bell, in his introductory address comming of this school, remarked that it before the first the firs

informed of the fact, han they enthusiastically came forward and supplied the funds necessary to institute a medical school in connexion with the hospital. Sir Charles spoke of his connexion with the London University, and stated that the Council had refused to allow him to lecture on particular parts of the subject, alleging that it would not be just to other lecturers that he should have the privilege of lecturing on a "higher" branch of the science. He had contended, however, and still contended, that there was no such thing as a "higher" branch of anatomy, all parts of it being equally high and important. He considered that it was a bad plan for the University to have a professor and a demonstrator of anatomy, and this he told the Council at the beginning. The pupils, he said, would be more intimate with the demonstrator than the professor, and would regard the latter as too great a personage to be troubled with questions on anatomical points. Consequently the professor would be of hardly any use to the pupils; he would be a mere form, a name. Anatomy was not to be learned without the constant presence of the teacher in the dissecting room, and he thought that the proper plan was for the teacher himself, the "professor" or the "demonstrator," whichever name they chose to give to the teacher, should put on the sleeves and apron, and demonstrate in the dissecting-room, as he (Sir Charles Bell) had done. Sir Charles spoke of the little influence he had possessed in the Council of the University, and said that everything he had proposed was rejected. Amongst other errors of the Council he placed the circumstance that the Council had wished to purchase a German museum of anatomy &c., at the price of 30,000/., a measure which he opposed,-the Council, after the proposal had postponed for a short time, finding that they had been about to bargain without Receive the money to pay for it. Sir Charles then spoke of his evidence before the Par-Baurentary Committee, and repeated his helief that knowledge was more rapidly acquired under disadvantages, and the mind more fully strengthened by having difficulties to overcome, than where the student had abundance of money to pay under the certificate system, and plenty of apparent facilities for acquiring knowledge. He cautioned pupils against expecting, under the existing system of medical government, to be rewarded according to their merits and industry. The greatest men, he said, had died poor, and some were even persecuted for their real eminence as scientific men, who having prosecuted their inquiries faither than the drones of the profession, had met with injuries instead of reward.

BLENHEIM-STREET SCHOOL.

THE lectures commenced at this establishment on the 1st of October, with an introductory address from Mr. King, the teacher of surgery. After examining the nature and intent of medical knowledge, and asserting its claim to be ranked as a science, Mr. King alluded to the importance of practical observation and strictly logical deduc-" If medical science," he observed, is founded so essentially on observation, docs it not tollow that the great requisite in the medical student, is a mind capable of careful, minute, and patient inquiry, and of sufficient logical power to draw correct inferences from the facts observed? The habit and, I may add, woral physiology and parthology, must be unable to detect the cause, and apply the remedies, of a very extensive variety of human suffering." Mr. King referred to the influence of public opinion upon the medical profession, and the change gradually made to render examinations for a diploma more complete. "In requiring the healing art. The legislature should also clastic in some parts and firmer in others; in the protection and encouragement they two inches in breadth; the general extend to those who devote themselves to of the tumour is hard give berless instances of meritorious men, disheartened by the little reward they find for with the acception of their ardnous and sometimes perilous exer- which is supposed to be

tions. Many a man has been heard to say, - Why should I toil; why labour through the long and dangerous researches of my avocation, to win the knowledge that does not allow me to live? Why penetrate the foulest adyta, why hang with idolatrous fascination over some mass of decomposision? Why make disease and all its loathsome characters the food of my soul, the friend and companion of my life, ave, the poetry and witchery of my most ardent enthusiasm, to pine neglected, unnoticed, and forgotten, while some ignorant charlatan is the object of popular favour and support?" Mr. King concluded by exhorting the pupils to be zealous and industrious. "It," said he, " we make ourselves well acquainted with medical science, we shall stand in the same relation to other classes of society, that and capacity of right and rapid reasoning is And can there be a higher science than that so necessary in the application of the rules which confers the power of preserving life of treatment to individual cases, that I and freeing it from disease? Can there be a would particularly insist on the necessity of nobler avocation than that of protecting cultivating logic and mental philosophy, and rescuing from pain and deterioration Without these no man can be a good practour follow men? I know of no greater intitimer. It is the misuse of evidence at the men? I know of no greater intitiner. It is the misuse of evidence at the bod-side as well as in the hall of justice, that is a fruitful cause of suffering. A medical man should be skilled in detecting the first passage as well as full full and advancement of that interest, fallacious reasoning as well as false facts, is second to none of his species. He stands Patients are apt to deceive both themselves upon the prondest eminence upon which a and their doctor. Errors are constantly man can stand; and commensurate with arising from the confounding of cause and his usefulness ought to be the respect paid effect, from confounding the symptoms, to his character. It is an eminence obtained which are effects, with the disease which is only by much labour, by long perseverance, the cause of them, and from attending to and through some danger; and proportionthe cause of them, and through some many only, instead of regarding the late to these should and shall be the reward having been sufficiently trained to admit of having been sufficiently trained to admit of the designing it. Yes; should be as far as the recompense can be conferred by society; its grasping in one conception the entire and shall be, because that recompense thuman organism. Besides, the exercise of the intellect to accurate reasoning and the intellect to accurate reasoning and the nature of his services, the practitioner denature of his services. understanding of mental phenomena, are the rives from the conscientions exercise of his more incumbent, as the mind exercises, both useful, his heneficent, his almost divine in the healthy and diseased state, such an influence, that a man unskilled in mental, influence, that a man unskilled in mental, by power can give, and which no earthly

ST. GEORGE'S HOSPITAL.

INGUINAL HERNIA.

THOMAS WILLMAN, aged 25, was admitguarantees for the security of the public by ted into the hospital March 3rd, at 4 p.m., examinations which will test high qualities under the care of Mr. Walker. There is of mind, a thorough practical knowledge a tumour in the groin in the usual situa-should be indispensable for the exercise of tion of inguinal hernia, of an eval shape; imitate the governments of other countries about three and a half inches in length and conti of it if ofter,

scrotum. The pain of the tumour is not in the morning. He feels easier. very severe, even when roughly handled. He states that he has always had a small tumour in the groin, and which he supposed was the testis. About three months since, whilst riding on horseback, he was thrown with some degree of force against low; pulse soft; less tenderness; no pain; the pommel of the saddle; this was followed by the appearance of a tumour in the groin (of nearly the same size that it is at present), which, however, subsided upon his lving down in the horizontal position, and this tumour did not return until about four days since, when, after using some free from pain, except when firm pressure undue exertion, it suddenly reappeared, and he has not been able to remove or reduce it since. He has taken several doses of aperient medicine, which have rather tended to aggravate the pain than otherwise. The swelling has not diminished, and he was bled (without effect) to two pints

before his admission. There has been constant sickness since yesterday morning, and no alvine evacuation for the last three days; pain and tenderness over the whole abdominal region, and a dragging sensation about the unbilicus. Pulse 100, small and weak; skiu hot; tongue furred. On his admission he was put into the warm-bath, which produced syncope, and attempts were made by the taxis to reduce the swelling, but without effect. Ether was applied over the tumour, ! but no benefit resulted; the sickness and hiccup increased, the pulse rose, and the abdominal tenderness greatly increased.

Under these circumstances Mr. WALKER determined upon operating immediately. On laying open the sac a mass of dark thickened omentum, with a narrow nock. was exposed; beneath this was a small knuckle of strangulated intestine, and to the outside of all, the testes and spidldymis were seen. Some little difficulty was experienced in dividing the stricture, from the chord lying in the way; this, however, was removed, the stricture was divided, and the intestine returned easily. A ligature was placed around the neck of the mass of omentum, which was then cut off, a pledget of lint was introduced into the wound, and sutures, strapping, and compresses, were applied.

10 p.m. He has had no sickness since the operation; pain in the abdomen less; but considerable tenderness remains; pulse 108.

Sedative Solution of Opium 111 xx; Spirits of Nitric Ether 3ij; Soluof Acetate of Ammonia 338; when Misture 31; to be taken tor-Oil injection to advery six hours els tre epen.

which he says has never descended into the times during the night, and he slept a little The abdomen somewhat full, but less tenderness present; pulse 110, sharp and compressible; skin cool. Mutton broth for diet.

8 p.m. The howels have been relieved several times during the day; spirits rather tongue less coated.

R Aromatic Confection gr. xv; Tineture of Henbane Mxv; Camphor Mature 3iss; every six hours.

5. He has passed a very good night, and is is made upon the abdomen. The tongue is cleaner and moister. The skin cool, pulse 80, and soft. The bowels have not acted since yesterday afternoon.

Towards the evening he complained of some pain on the left side of the abdomen, which was increased by pressure. The skin is hotter; tongue whiter; pulse 80, and sharp. The abdomen is distended, and the bowels have not acted for twenty-four hours. Twelve leeches to be applied to the abdomen.

- R. Carbonate of Potash 10 grs.; Sulphate of Magnesia 1 drachin; Sirup of Poppies 1 drachm; Distilled Water 10 drachms. The draught to be taken every six hours.
- 6. He did not sleep much until this morning; there is less pain and abdominal tenderness, but some little irritation about the wound. The tougue is cleaner; pulse softer, 84, and jerking.
- 7. He is quite free from pain; skin cool; tongue moist; pulse 80, and soft. dressings were removed for the first time since the operation; the upper half of the wound was found to be united by the first intention, and there was a little pus in the lower part of it.

 B. He continues quite free from pain, and

is doing very well in every respect.

10. He is doing very well. The wound has nearly healed, except at the lower part, where the ligature comes through, which is attached to the omentum. Mr. WALKER endeavoured to remove it, but failed. bowels have generally acted twice in the twenty-four hours. Repeat the draught every six hours.

16. He has continued steadily improving since the last report; the wound has been dressed every day, but the ligature had not separated in the least until to-day, when it came away very easily in the dressings. The only part of the wound now open is that through which the ligature came.

21. The wound is quite healed.

26. A truss with a circular pad in the centre to admit the testis was applied, and keeps up the hernia extremely well. He have been relieved seven was then discharged quite well.

SCLERBTITIS.

James Slight, zetat. 41, was admitted on the 28th of March, under the care of Mr. WALKER. From the facts which could be gathered in connexion with the previous history of the case, it appeared that on the 10th of the month, whilst employed in cutting wood, a chip flew into the right eye: severe pain ensued, which lasted for two days, at the end of which time he went to a surgeon, who ordered him a lotion for the eye. This did not abate the pain and suffering. On the 24th there were great rest lessness and great heat of the skin, with increased pain in the eye, and a copious watery discharge.

On his admission into the hospital, the sclerotic coat was highly vascular, and its minute vessels were extensively injected; the cornea was less transparent than natural, and a minute ulcer could be perceived in the onter and middle part of it, into which, in consequence of its convexity, the iris appeared to protrude slightly. Around this alcer could be seen a thin nebulous line of about one line and a half in breadth. There was great intolerance of light, with pain over the right rance of light, with pain over the right temporal region. His general health has always been good, and is not disturbed at present. Tongue clean; howels not open; bulse 64, full and soft; skin cool; sight of WALKER, under whose care he was always to the soft of the soft

R. Calomel gr. ij ; Powdered Opium gr. ss; every night at bed time. A Senna draught to be taken every other blister behind the right ear; extract of Belladonna over the right eyc.

March 29. Eye very painful during the night. A saturnine lotion to be applied to the eye.

30. Twelve leeches to be applied to the

April 1. To be cupped on the nape of the neck to twelve onnces. A 3ij Senna draught to be taken directly, and repeated in two hours, if necessary.

3. Continue the medicines.

4. There is still much remaining inflammation of the sclerotic, and much intolerance of light. The cornea is not more nebulous than before. The pupil is not quite circular, the external edge being depressed, as though the iris had become slightly detached from the ciliary ligament. At the inferior edge of the pupil there is seen a prominent opake surface resembling lymph, which extends nearly to the inner surface of the cornes. Pulse is natural; skin hot; thirst and headache. Continue THOMSON. An L the medicines; omit the lotion.

the man can see very well; the sclerotic to which act she

and conjunctival coats are much less injected than at the last report. The iris appears in its natural state. The pupil is small but regular in its outline. The cornea isquite clear, and at the inferior border of the pupil in the anterior chamber there is seen an opake body, which is the capsule of the lens. There is no pain in the head; he sleens well, and the appetite is good. Continue the medicines.

16. The capsule of the lens is now seen to be adherent to the inner surface of the cornea, occupying a small portion of its central and inferior surface, and the inferior portion of the iris is, in consequence, drawn forwards. The lens appears rather opake. There is not so much sight in the eye as before. There is still a circular zone of the bloodvessels to be seen around the lower edge of the cornea. He complains of no headache or intolerance of light. The general health is improving. The appetite is

Phonmer's Pill gr. v every night at hedtime. Half a pint of the Alkoline Infusion of Sarsaparilla to be taken daily. Ordinary diet.

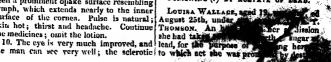
- mitted, passed a needle behind the iris into the posterior chamber of the eye, with the intention of depressing the capsule of the lens, which had become dissolved morning; eight leeches to be ap- in the aqueous humour by the rupture of plied behind the right temple; a the capsule at the time of the accident, and it was by this means removed as much as possible out of the immediate sphere of vision.
 - R. Saline Draught 3iss; Solution of Tartarized Antimony mxv; Sulphate of Magnesia 3i; every six hours. Twelve lecches to the right temple.

May 13. He is very much improved, and can see distinctly with the eye; there is neither pain nor intolerance of light; the pupil is still small, and is slightly opake; general health good. Continue the medi-cines. Ordinary diet.

18. Discharged cured.

NORTH LONDON HOSPITAL

POISONING (?) BY ACETATE



tion. She thinks that the quantity of ace- salts of lead. "When the acetate or sub-Sulphate of Magnesia to a drachm.

pain. Continue the medicines.

weak.

clean; the strength returning.

30. Discharged cured.

the only poison among the

ste of ledd was about an ounce. She dis-sate of ledd was about an ounce, She dis-solved it in a cupful of water, and after "there is diways a conversion of the salts solved it in about on the step of a door into the carhonate and inasmuch as the or its effects. In about a quarter of an subacetate is more easily converted into the hour violent vomiting came on, which at- carbonate than the acetate, so it is more tracted the notice of two men, who inquired likely to prove poisonous, a fact which exof her what was the matter. On being told perience has corroborated. Several inshe had taken poison, they brought her to stances are recorded in which death has the happital. Mr. Taylon, the apothecary, resulted from swallowing Goulard's lotion immediately gave her half a drachm of the by mistake; and even of paralysis having sulphate of zinc in solution, which was soon followed its external application to large after repeated; this renewed the vomiting abraded surfaces, but in all these cases the (which had almost ceased) as violently as deleterious effects could be traced to the ever, and after continuing for upwards of conversion of the sub-acetate into the caran hour, very dilute sulphuric acid was adbonate." The administration of an emetic ministered, and she was put to hed. She after the vomiting that occurred, Dr. T. complained of slight burning pain in the did not regard as absolutely necessary, but stomach, which, however, did not prevent had no vomiting taken place, then the sul-her from passing a good night. Mr. TAYLOR phate of zinc was the best emetic that ordered her in the morning a draught come could be administered, because it decomposed of sulphate of magnesia, half a drachm, poses the acetate of lead in the stomach, and an onnce and a half of water, to be and converts it into an insoluble, and, contaken every second or third hour, which sequently, into an inert sulphate, whilst the acted slightly on the bowels; she then com- acetate of zinc, which is also formed, is as plained of weight in the head, some dim- active an emetic as the sulphate of zinc. ness of sight, and pains shooting through The administration of the sulphate of magthe cychalls on closing the lids firmly, nesia operates, also, by decomposing the The tongue was clean, or nearly so; the salt of lead; and the acetate of magnesia pulse sixty and small. There was more that results from this decomposition, carries pain in the stomach on the following morn-the insoluble sulphate out of the bowels. ing (26th) than before. The following treat- The food which is ordered in these cases. ment was ordered:-Twelve leeches to the should be of a kind not likely to generate epigastrium; one grain and a half of the carbonic acid in the stomach, and it is a Extract of Opinim at night; increase the good thing to order vinegar as an article of diet, for two reasons, namely, the lessening 27. There is tenderness on pressure all of the susceptibility to decomposition of over the abdomen, but especially at the the acctate, owing to the presence of the epigastrium, where it causes her severe surplus acctic acid, and the formation of a portion of it into the sulphate, by the small 28. There is now no pair or sensation of quantity of sulphuric acid which all vinegar heat in the stomach, and she can take food for domestic purposes contains. On this without uncasiness. The tongue remains account, however, when the acetate of lead somewhat white. The pulse is 80 and 1s ordered in cases of internal hemorrhage, the distilled vinegar, not the common vine-29. She feels quite well; the tongue is gar, should be given at the same time. There is a case at present in the hospital, in which paralysis of the wrists was caused Dr. Tuomson pointed out to the pupils by working with white lead, which is a carthe features in this case which prevented it bonate, although no colic had preceded or from being regarded, in the strict sense of accompanied the paralytic affection. The the word, as a case of poisoning. The patient is a painter. This local influence of vomiting which occurred was the effect of carbonate of lead is not confined to paintquantity; the salt acting in the same man-ers; it is experienced also by compositors in ner as a large dose of common salt, from its printing-offices, and porters in lead ware-irritant quality, and not from any real poi-houses; and in both cases, the deleterious sonous property belonging to it. In small cause is the carbonate, which forms on the doses, namely, under ten grains, Dr. Thom- types after they are washed, and which son had never seen any deleterious pro- affects the compositor in distributing the perties arise from the accetate of lead, unless types to their proper places in the cases. tines in which case, the acctate room by the combined action of air and the carbonate, which is moisture, the latter being often freely supmoisture, the latter being often freely sup-plied, to cause adhesion at certain times be-tween the types.

ST. BARTHOLOMEW'S HOSPITAL.

MR. STANLEY'S INTRODUCTORY LECTURE.

Ma. STANLEY delivered an introductory lecture to his sessional course of anatomical used to assemble in the theatre of this hosconstituents of the human body, in order, as he said, to secure the attention of his audimedicine. With much novelty he adverted to the skeleton as the basis upon which the soft parts were constructed; the cranium, by its arched and conical configuration, affording a beautiful protection to the delicate brain; the ribs forming an important sustaining the weight of the body, and holdthe foot, by its arches, admirably did the duty of a foot—the whole skietchin january trations of every valuable discovery that WOUND OF THE INTESTINES FROM EXTERof a foot-the whole skeleton yielding illus-He referred to a section of the femur, to show the difference between external and necrosis of the long bones. The absorbent contents, consisting of pus are vessels, however, he observed, were so observed, where so observed, were so observed, were so observed. The absorbent contents consisting of pus are vessels, however, he observed were so observed. stinate, as to entertain an objection to re- Mr. EARLE HOW move some description of matter, such as the abdominal a vermilion and charcoal, which, when in-serted beneath the cutis, remained indelible.

Nitrate of silver afforded another confirmation of this fact. The subject of feetal gradation was handled with no less ability and originality. The fortus, it was observed, in its progressive gradations, bore a close analogy to the gradation upwards of various lectures, on the first of October, to an species of animals. As to the variations audience not quite so large as that which from natural appearances which occasionally arise, these with singular ingenuity pital. He commenced with a sketch of the were said to arise from an interruption in development, as in the hare-lip. Mr. STAN-LEY concluded by enforcing the absolute tors, and in consequence of the intimate necessity of studying surgery thoroughly, connexion of the subject with the study of in order to understand it thoroughly, the utmost diligence and enthusiasm of students being necessary under the existing system of instruction, which Mr. STANLEY said nothing to depreciate. No hiatus in fact, he added, should exist in his (the lectu-rer's) assiduity to impart information, and enclosure for the thoracic organs; the pelvis he doubted not that his efforts would be successfully repaid by the unremitting ating structures of vast consequence; while tention of such a class as he might have the honour of obtaining.

NAL INTERS.

JOSEPH SHAW, at. 17, was admitted into internal osseous structure. The powers Harley's ward, St. Bartholomew's Hospital, thatacted on the bones, namely the muscles. were, he observed, exceedingly interesting EARLE, with an injury in a situation mid-to the student. Their force was actually way between the crists of the illian and the astounding Dr. Young computed muscular false ribs on the right side, inflicted by the power to be equivalent to five hundred shaft of a cart thrusting him in contact pounds on each square inch of its acting with the wall. He complained on admissubstance. The celerity of motion of the sion of severe vomiting and faintness; the muscles was no less remarkable. Haller urine exhibited a bloody tinge; there was asserted that he could articulate fitteen hundred letters in a minute. Immensely im- cality of the mischief, with a central depres-portant also was the nervous system, so in- sion. Mr. EARLE considered, from the seat timately concerned as it was with the reaof the brighty, that the kidney or color might
soning faculties. The senses were really all have been involved, but he was more independent on the nervous system. Yes, clined to ascribe it to the former, on account
sight, sense, touch, and hearing, all resulted, of the sanguincous character of the urine. from a peculiarity in the function of parti- Considerable tenderness in the affected part cular nerves; the senses acted as monitors becoming evident, twenty leeches were apagainst danger. The human eye differed plied, and he was cupped on the loins. The from that of the brute by indicating intel-central depression having become more evilectual feeling, whereas in the latter its dent, Mr. Earne was led to form an oninion expression merely denoted a desire to that the abdominal muscles in that situation gratify appetite. Physiologists have ob- had undergone rapture, and that a portion served that in proportion as one sense is of intestine had thereby become protruded; impaired, the remaining senses increase in the latter part of his prognosis was further acuteness. A blind man, for instance, has confirmed by a gurgling sensation commuascertained his proximity to objects by nicated on the application of the hand, and the reverberation of the air on his ear. The by the swelling receding under pressure; vascular and absorbent systems were next from this view of the case he entertained an reviewed, in an equally new and striking idea of employing a truss, but was exceed-manner, as means of reparation, especially ingly surprised, after a lapse of two or three in the osseous reproductions that succeed days, to hear that an abscess had formed, iss

salvation was purely dependent on the in-jury not implicating the cavity of the abdo-interesting, incommend it exhibits a provimen, commonly so called; the ruptured in- dent effort on the parts of nature to repair testine being uncovered by the serous inrestment, precluded the extravasation of feces into the peritoneal sac, which (had it occarred) must inevitably have been at-tended by fatal results. Mr. EARLE observed that there were many exceedingly interesting details to be found in the Memore of the French Academy, where sharp instruments, such as swords, had perforated the intestine, and nothing unfavourable had resulted. This Mr. EARLE considered very probable, especially when the intestine was in an unloaded state, and where no effusion had supervened; but the case differed widely in which the intestine had been actually ruptured from severe injury. The course of treatment that had here been adopted was to dilate the openings to permit of a freer egress of purulent and feculent matter; this procedure it was thought there would be a necessity to repeat; the lower bowel was daily relieved of its contents by means of a clyster, with a view, as it were, to invite the feces to their natural outlet; this plan had been so far successful that although some excrement passed through the aperture, yet a considerable quantity had already resumed an ordinary route. The ensemble of the patient seems to augur favourably.

ANEURYSM OF THE SUBCLAVIAN ARTERY.

A case presents itself in Darker's ward which is well worthy the attention of medical practitioners and students. The subject is a man whose name is Joseph Webb, at. 42, who was admitted into the hospital on fact, the bones were literally denuded of the 24th of August with a large aneurysmal tumour projecting from beneath the right clavicle, and extending outwards; its mag-uitude approximated to that of a child's head, and it was adjudged by Mr. LLOYD, under whose care he was admitted, to be an anenrysm of the subclavian artery. At some little period from his admission a day was appointed for performing an operation (that of tying the subclavian artery); but its postpon-ment was announced at the expletory measures have been resorted to with favourable results. Digitalis has been used has been employed, and its employment repeated; the strictest quietude has been enjoined; and under this pallistive mode of treatment the patient has manifested proprovement; his aspect has be-

organic lesions, when aided by the employ-ment of remedial treatment. The foregoing report was taken on the 27th Sept. 1835.

AMPUTATION BELOW THE KNEE .- Thomas Trott, æt. 58, a waterman at a coachstand, was admitted on the 21th of June with a severe injury of the right leg, consequent on ejection from a cab, the wheel having passed over the inferior portion of the limb, on the internal surface of which there appeared a slight ulceration, to which succeeded crysipelas of the entire member. Leeches, and saline medicines, with tartar cinctic, and other means calculated for the preservation of the limb, were employed in vain, and amputation was decined absolutely necessary, the operation being performed on Tuesday the 25th of August. Previous to the operation some doubts were entertained as to whether fracture really existed in the vicinity of the ankle joint. Mr. Earle commenced the flap amputation six inches below the knee-joint; the flap was then completed, and the catling was used to divide the muscles and interesseous ligaments, the sharp upper ridge of the tibia being sawed off previous to the divi-sion of the bones. The rest of the operation was conducted in the ordinary manner. An claborate dissection of the diseased joint was afterwards made, but not the slightest evidence of fracture was discovered. All the cartilages covering the tarsal bones had undergone absorption; in cartilage, a circumstance which, in the opinion of the surgeons present, resulted from inflammation consequent on the injury, the constitution of the patient being a bad one.

HYDROCELE.-Mr. STANLEY performed the operation for hydrocele on a man who had suffered under the affection for three months. The quantity of fluid evacuated was considerable. The injection used was a in consequence of circumstances occurring mixture of port-wine and water, but Mr. connected with the patient's general health, STANLEY observed that he had known instances where the re-injection of the evacupected period of performance. General de- ated fluid, or even the introduction of pure water, had been attended with eminent suc-cess. The most unexceptionable and defibut for a very limited period; venesection nite form of injection, however, consisted in a solution of the sulphate of zinc, a drachm to a pint. The nature and quantity of the fluid injected were immaterial considerations; but it was of paramount importance that the injection should be brought serful; the size of the tumour into innuediate contact with the morbidly ble diminution, and secreting surface, the time of its retention evenience, except | varying with the peculiarity of the case, the production of a certain amount of irritation of a certain amount of irritation that no farther idea of openindicated by a certain amount of pain. In

the present case secould be judicious to the right lung allows the entrance of less with a view to the per somewhat sibilus. Pulse more full and hard, computation (which here fad been somewhat sibilus. Pulse more full and hard, computation (which here fad been somewhat sibilus. Pulse more full and hard, computation of the Acetate of Ammonia. Points in operating for hydrocele west. 26. Better; but slight permeation through first, to avoid puncturing the testis; and, the right lung. secondly, to select carefully the part for the introduction of the trocar instrument, obviate the liability of wounding one of the large veins traversing the scrotum, as in ingression. the event of such an accident the blood would become effused into the scrotum, and what was at first a hydrocele would then be converted into a hæmatocele.

Acute BRONCHITIS .- Patrick Thornton, ætat. 30, was admitted into Matthew's ward, on Tuesday the 21st of July. On the day of admission the following were the symptoms :- Countenance dusky ; lips parched ; the temperature of the surface augmented; no cuticular transndation; pulse 124, and compressible; tongue covered with a thick tion, and lies on his back; the alvine excretions are daily induced by medicine; anorexia and much nausea; the urine high-coloured and scanty; no cephalic pain; perfect absence from abdominal tenderness; sleep considerably perturbed. A small quantity of blood was this morning ejected from the mouth; the expectoration has a frothy and a streaky aspect. He had enjoyed tolerably good health previous to last Friday, when, after dinner, he was suddenly seized with a pain in the chest, accompanied by difficult respiration; his skin then became hot and his bowels constricted. He applied to the parish surgeon, who prescribed some purgatives, and a sinapism to the chest. Auscultation ascertains more air to enter the left lung than the right; crepitation mingled with sibilus and ronchus is evident in both lungs, anteriorly and posteriorly, but more especially in the left lung, as this admits of more permeation than the right. Ordered twenty leeches and an emetic; and calomel with James's powder every second hour.

22. Four ounces of buffy blood were taken from the aim by venesection, half an hour after which the ingress of air into the right lung was more free, the pulse quickened, and the respiration was easier. Cupping to four ounces beneath the right scapula; a blister;

a grain of calomel every hour.

23. Thoracic pain entirely gone, and the patient in all respects better. Some sibilus still audible. The medicines to be discon- introductory remarks

tinued.

24. Lips more livid; ronchus and sibilus has given on a second the left lung admits less air than yesterday; them the authority of a national second livid lung admits less air than yesterday;

permit the patient to the patient to the ward air in front than the left, in which often with a view to the occurrence of the crepitation is mixed with rouchus and

the right lung.

27. No pain on effecting a deep inspira-tion pulse computes 120. Little air caters in left lung; the right permits of a liberal

28. An increased quantity of air permeates the left lung, accompanied by ronchus. Ordered the Hydraryyrum cum Creta.

A free passage of air 29. Mending. through both lungs, together with ronchus. Administer the Effervescent Draught.

August 3rd. Sibilus is still to be discerned in both lungs, especially at the inferior pos-terior portion. Patient says he feels quite

well.

10. Crenitation is audible over the whole posterior division of the left hug during inspiration, and likewise beneath the clavicle; white fur and rather dry. He complains of in which last situation he complains of pain a short cough attended by great pain, ex- on a deep inspiration, coughing, or lying on tending from the third to the sixth rib of the his side. The light lung is apparently right side; he cannot effect a deep inspira- quite healthy. No cough, expectoration, fever, or sweating.

11. The crepitation so diminished that none can now be detected. Discharged

BOOKS RECEIVED.

Remarks on the Theory and Treatment of Scarlet Fever; with brief notices of the Disease, as it prevailed epidemically at Bridlington, in 1831. Highley, 8vo, pp. 48.

A popular Treatise on Diet and Regimen; intended as a Text Book for the Invalid and the Dyspeptic. By W. H. Robertson, M.D.

pp. 251. Tilt.

Leach's Selections from, and Translation of those parts of Gregory and Celsus, which have been fixed upon at Apothecaries' Hall, for the Examination of Candidates. pp. 332. Highley.

WE shall next week make known some of the plans for adding to our usual mass of information, which we have formed with a view to the increased interest and instruction of the readers of THE LANCET, in the ensuing yearly volumes of this journal.

CORRESPONDENTS.

We have usofully availed withheld the pract

THE LANCET.

Vot. I.

LONDON, SATURDAY, OCTOBER 17, 1835.

F1835-36.

In the present Number of The Lancet will be found a guide to The Medical School and Hospitals of Instruction in Paris, for the Session commencing in November 1835, and ending in August 1836.

THE

RESPIRATORY APPARATUS IN OLD PERSONS.

THE Archives Generales for August contains an article entitled "Clinical Researches into the Diseases of Old People, conducted at the Hospital of Salpetricre, Paris; by M.M. HOWMANN and M. DECAMBRE, internes."

THE diseases peculiar to persons advanced in life have hitherto been sketched in a very slight manner by a few authors, rather than examined with that degree of care which they really demand. It would seem as if physicians thought the lamp of life at this period was too feeble to require any fostering attention, and that all that was necessary to be done was to allow it to burn out quietly without any attempt being made to prolong an existence, which, in the order of things, must very soon arrive at its termination. We do not want for treatises on the diseases of the infant state, or childhood: the maladies of adults have given rise to works without number, but we possess little clear knowledge, either on the modifications impressed by age on the texture of our organs, or on the functions connected with them.

The object of the authors of the memoir new before us is to supply this deficiency, and they commence with diseases of the respiratory organs, which, though frequently the constant of the co

triere, whose ages vary from 60 up to 90, or beyond 90 years.

Let us first notice a few anatomical circumstances peculiar to the respiratory apparatus of old women.

Thorax.—The thorax in aged females presents two states, very different from one another, which deserve to be examined.

The first is a case of exception, and found in aged females who conserve a considerable share of the freshness of youth; the mammæ are voluminous and still consistent; the whole thorax is covered with a layer of fat; the muscles are well-coloured, and the costal cartilizes retain their suppleness. However, the ensemble of the thorax has undergone a peculiar change belonging to old age; the superior part is flattened laterally in such a way that the antero-posterior diameter is considerably increased at the expense of the transverse one. This change is commonly accompanied by a gradual enlargement of the thorax towards the inferior part, which then represents a pyramid with a large base, whose apex has been somewhat shortened.

The second type is much more frequent. Here the cavity of the thorax is remarkably modified, and the lateral flattening above noticed may be carried to an extreme degree; in some cases it produces an angular form of the thorax, exactly like that seen in rachitic persons. This disposition of the chest is important to study, for it brings with it several changes in the relation and conformation of the subjacent viscera, which have not as yet been noticed by writers. Thus the liver is considerably pushed down from its natural position, and frequently bears the marks of pressure exercised on it by a narrowing of the inferior portion of the thorax, in females who have worn stays. In these cases also, the right lung is clongated, and follows the displacement of the liver into the abdominal cavity. The sternum is, as we mentioned, always carried forwards, but

H

the xyphoid cartilage of pushed backwards, some cases even constitutes the posterior and even sometimes completely concealed behind the cartilages of the last true ribs. The Hence a pneumony of the summit may longitudinal diameter of the thorax also undergoes a remarkable change in old persons. This circumstance has been noticed by all writers. Sometimes the intervertebral cartilages disappear completely. Fischer* re-lates one case of a man aged 100, in whom nine vertebræ were reduced to one solid piece, and Boerhaave + mct a similar alter-

ation affecting the whole spine.

The vertebral column however is not only shortened, but becomes flexed forwards, and that often in a permanent manner. In consequence of the weakness of the dorsal muscles, the pressure is most felt anteriorly, and here the bodies of the vertebræ are most intimately united. This inflexion usually occupies the last cervical and first dorsal vertebræ, and is often carried to an extreme degree; in some of the old women at Salpetriere it is so marked, that the posterior surface of the scapula becomes superior, and the cervical region makes nearly a right angle with the dorsal. The changes just pointed out in the external form of the thorax, must necessarily occasion correwithin its cavity, or connected with it. The diaphragm is thrown into folds, which in some cases leave their mark on the liver, and this viscus is pushed down into the cavity of the abdomen several inches below its natural level; the tissue of the ribs thomselves is much rarefied, but (contrary to the asser-tion of authors) in a very few cases only do we find an osseous incrustation of the cartilage of the ribs. The costo-vertebral cartilages generally conserve their mobility to the most advanced period of life.

Lungs. - Before we pass to the pathological examination of an organ, we should possess; corect notions of its structure at the period to which our examination is limited, for the former cannot fail to receive special characimportance to study the structure and peculiarities of the pulmonary tissue in old per-With respect to their external configuration and appearance, the lungs of old persons may be ranged under three classes.

In the first, the lungs preserve nearly their normal aspect, and differ very little from those of the adult; however, in all cases where the chest presented a lateral flattenng to any considerable degree, the authors vascular apparatus is less numerous; the found a peculiar disposition of the interlobulur fissure. This becomes vertical, in such a way that the two lobes of the left lung are opposed to each other, one directly forwards, the other backwards; while in the right lung, the middle lobe, directed downwards, is surmounted by the inferior lobe, which in

sently have occasion to see.

in the second class, the peculiarity consists in the smallness of the lungs. organ is light, and little susceptible of being infasted by the greatest force. They are constantly bathed in the cavity of the chest by a limpid serosity; when compressed, their crepitation is more diffuse than in the lung of the adult.

In the third class the lungs present a mass unequally thrown up into eminences, and are bathed in a much greater quantity of finid; they are flaccid, livid, and have altogether lost their conical form. The division of the lobes is not less remarkable; the latter are merely united by a flat, thin pedicle, which leaves them as it were floating in the thorax; they are extremely light, and give a most peculiar sensation to the touch; the heart is smaller, and often in a state of complete anemia; the thorax is excessively emaciated.

Intimate Structure .- M. Magendie, who has made some interesting researches on the structure of the lungs in old people, lays it sponding alterations in the viscora contained down as a fundamental rule, that the air-cells are increased in magnitude, giving rise to a considerable diminution of their specific gravity. However, the exaggeration of the cellular structure is only perfectly seen in those persons who present the traces of old age in a very high degree. The lungs of aged persons were examined by our authors nearly in the same manner as by M. Magendie, but they had not recourse to insuffla-tion. They arrange the lungs, considered as to structure, under the three classes above enumerated, viz.

1st. Case. "Lungs voluminous, filling a thorax well developed, and whose soft parts are still free from emaciation, or even fat." A thin cut of this lung dried gives a number of holes perfectly round, crowded together ters from the latter. Hence it is of great like the meshes of lace, and presenting a diameter of about a quarter of a line. (Fig. 3.) The cells are here perfectly regular, and everywhere independent.

2nd Class. "Lungs of regular form, but small, bathed in scrosity; thorax contracted; soft parts emaciated." A thin cut of this lung dried, shows a texture somewhat similar, but differing in many respects. The cells are no longer round but elliptical, and the cells, however, are still limited by a regular circumference, and are independent. (Fig.4.)

3rd Class. " Irregular form of lung, which is withered-looking, and applied to tebral column ; the thorax is con reduced to an extreme Here the pulmons any distinct form verted into # sort of s croscope distinguishes a

occupy the inferior lobe, as we shall pre-

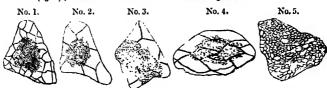
Tractatus de Senjo ejusque Gralibus et Morbis † Prælect, tom, ili. p. 725,

ches, and there is no trace of the lobular subdivision. This latter condition of the lung, which is always found in persons presenting the characters of old age in a well-marked form, is a species of natural emphysisms, which is well worthy of attention, but his necessary not to confound it with marbid lesions, properly so called.

If we compare the relative size of the pursonary cellules in the infant, the adult, persons; in a second and the aged person, we shall find a remark-able progression as we approach senility. This has been proved by the author, in frequent experiments. Thus the dried cells of the infant lung are only a twelfth of a line in diameter (fig. 1); those of the adult about and interesting facts.

one-eighth or one-sath (fig. 2); finally, the dimeter of the air-cell fin the aged (fig. 3), presents a diameter of one-fourth of a line. Hence the law first pointed out by M. Magendle, that the pulmonary tissue becomes rarefied directly in proportion to age.

Such is a brief anatomical history of the structure of the thorax and lungs in aged persons; in a second memoir the authors propose to take up the physiological part, and treat "on respiration in old patients." We shall not fail to follow their observations, which promise to bring to light several new and interesting facts.



Explanation of the Engravings.—The aircells may be supposed to occupy the entire surface of each layer.

No. 1. Layer of the lung of a child four years of age.

No. 2. Layer of the lung of an adult female.

No. 3. Layer of the lung of an old female and fusion of the cells.

(first type). Commencement of rarefaction in the lungs; cells round, but quite independent.

No. 4. Layer of the lung of an old female (second type). Second degree of rarefaction; cells elliptical, but still independent.

No. 5. Layer of the lung (third type). Extreme degree of rarefaction. Irregularity and fusion of the cells.

REFLECTIONS ON

INFANTILE REMITTENT FEVER.

By JOHN ALEXANDER, M.D., Manchester.

(Continued from page 411.)

Case 2. May 21st, 1832 .- Thomas Wood, ætat. 4, from Queen-street, admitted a homepatient of the General Dispensary for Children, presents the following symptoms:-Extreme emaciation with a rough dry skin; tickling cough, with little or no expectoration; tumid abdomen, with bowels irregular, though generally constipated; total loss of appetite; much thirst; great irritability; constantly picking at his lips, nostrils, or other parts of his face ; cervical glands enlarged; tongue reddish and dry; pulse 120. The boys spinal column presents a double the scapular and dorsal rehim to have been have taken worm in an sening, with carional delirium during

I have directed a domestic enema immediately; four grains of Dover's powder, with three of calomel at bed-time; and the tincture of iodine in camphor mixture during the day.

23. The enema was followed by one dejection, tolerably copious, of clayish-coloured scybala; but the bowels have not since been moved. The boy has had two very restless nights and an increase of delirium; his ancices are to-day observed to be swollen; pulse 140, and very weak. He refuses his mixture and all food, is unwilling to answer any question, and is obviously sinking. Recommended an occasional repetition of the enema, and the application of a blister to the nape of the neck.

25. Child died last night; permission to inspect obtained.

Sectio Cadaveris.—Body most strikingly emaciated, with the exception of the tamid abdomen. Skin of a dry, shrivelled, yellowish appearance.

Chest.—About an ounce of serous fluid between the pleurs, with slight adhesions, apparently recent, on the left side. The lungs here and there studded with groups of phaseles some in a softened, but most of them in a hard the root of a child, and reputed insensibility (com-of one of the left pulsarity lobest a small paratively speaking) of the liver, are perhaps vomica containing scarcely half an orange of best accounted for by reference to the spepurulent fluid.

Abdomen .- Great distention ; liver siderably enlarged, of a darkish hat,

usual. quent to find in those who have died from the slightest exertion." infantile remittent fever, clusters of tuli-ra very natural opinion amongst pathologists, that a strumous diathesis is the most frequent remote cause of infantile remittent fever, as it assuredly is of tubercular

phthisis. It will also be remarked, that the liver was found enlarged, of a darker colour than usual, and exceedingly lacerable. Reflecting on the general symptoms of the disease under consideration, it would by "a priori reasoning be natural to expect, that more or less affection of that important viscus would present itself on autopsy. And, this is the case; for in the majority of fatal cases of this malady, when an inspection was not declined, alterations in size, colour, or structure, have almost invariably been observed by the present writer; and, on that observation, he has naturally been led to found his high opinion of the remedial influence of mercury in the complaint.

It is scarcely two months ago since I inspected (with the assistance of Mr. Walker, a scientific surgeon of this town) a boy about nine years of age, who had gradually sunk under infantile remittent fever in its most chronic form. After observing the ordinary appearances consequent upon the complaint, we were somewhat surprised to find the whole distal portion of the right lobe of the liver converted into a rac containing several ounces of purulent matter, and the parenchyme of that viscus quite lacerable: two evidences of advanced hepatic disease, which, considering the simple habits cific strumous virus above alluded to.

CASE 3 .- June 13th, 1835. Master Aunusually lacerable. The mescuteric glands atamine, residing at Astley, near Leigh, are more than double their usual size; some broughs to Manchester this day by Mr. of them contain a cheesy sort of fluid, whilst Newton, an intelligent practitioner of the others appear to be filled with pus. There former place, who states as follows:—The is no evidence apparently of recent inflam- boy has been delicate from infancy, but mation in them; intestines much filled with more particularly of late has been losing air, not offensive on evolution; and contain- flesh in a marked manner. ... has been, ing, in the colon particularly, a considerable on one or two occasions, treated for worms, quantity of the same scybalous whitish feees but has never been known to part with any, ejected during life. In the ileum, on its or to benefit by verminative remedies. His mucous lining, are observed several small nights are very indifferent; he has great ulcerative patches about the size of a six- thirst, little appetite, no action of the pence. The other abdominal viscera appear bowels without medicine. On examination tolerably healthy; the peritoneal envelope I find the boy extremely emaciated; his considered thicker and more opake than countenance pallid, with dark areola around the ever; tongue whitish, with red clon-Remarks .- From the appearances noted gated papilla, numerously prominent; abwithin the thorax, this boy had evidently domen hard and tunid; pulse 118. Mr. laboured, previous to my seeing him, under Newton adds "that there is a febrile exaceramore or less severe attack of pleuritis, bation each evening with succeeding mornconjoined with some tubercular inflamma- ing chilliness, and has been for some weeks, tion. It is, however, anything but infre- and that the boy is indisposed to any, even

We have directed him to have a warmcles under various conditions in the pul- bath on reaching home; ferrum tartarizamonary parenchyma; and hence has arisen, turn with soda at bed-time, and easter oil each morning; his diet a milk one.

19. Mr. Newton writes, "I regret to inform you our little patient is much worse. the symptoms being considerably aggravated. On visiting him this evening I observed as follows :-- Pulse quick and weak; tongue rather red at the tip and edges, and coated at the centre and back part with a white for; bowels still irregular, and feees scybalous; urine high-coloared, but in fair quantity; thirst still great, and no appetite; skin moist; he refuses his medicine; is much reduced." The child's father adds, "that, in consequence of a pain suddenly arising in the boy's howels yesterday, four leeches had been applied, and a domestic enema used."

20. Visited Master A. this day, in consultation with Mr. Newton of Astley, and Mr. Pendlebury of Leigh. The abdominal pain has been mitigated by the leeches, but is still complained of, aggravated on pressure; the hoy's general appearance very unfavourable, from sallowness of complexion and great emaciation; pulse 112, weak; urine scanty and high-coloured; appetite none; thirst very great; tongue coated but moist; the bowels very much relieved by copious dejections of clay-colours after the enema of yesterda previous :-

Applic. Respect. Repet. Enema domestic Habt, gr. x. Hyd. c. C. 26. "The abdominal uneasiness," writes Mr. Newton, "was much relieved by the blister, and little or no pain is now complained of on pressure. The bowels cos tinue very inactive, and the character of the evacuations unchanged. The tongue how ever is cleaner and moist. I attempte addition of a little ipecacuanha to the witen. ing powder, as we had agreed upon, but its nameous taste prevented the hoy's taking it. His pulse is somewhat reduced in frequency." Desired to continue the treat-

July 10. The child improving. Bowels still torpid, but the motions tinged with bile. A little appetite, less thirst, and able to sit up in bed. Recommended an addition of a 69, Fenchurch-street, single grain of calomel to the evening powder, the latter and enemata being persevered in.

24. Much improved; abdomen lessened and soft; strength returning and fever colony. Directed to have small doses of the sulphate of magnesia rendered palatable by nitric acid.

vourably.

25. Convalescent.

difications of diet were tried, such as stewed previously. Again; this boy took, as may possibly be remarked, an extremely large quantity of incremial medicine, upwards of three hundred grains of the hydrargyrum cum creta, independent of the calomel, and yet no perceptible affection of the salivary glands was induced by it! It has indeed, in several examples of infantile remittent fever, and in a few cases of acute rheumatic fever, been matter of surprise to the writer, how little the mouth has seemed to be affected by this useful mineral; whilst, in some other diseases, the reverse condition cannot have escaped remark : for example, during the decline of measles, wherein I thewn the exhibition of a couple of of calomel, followed by concal to the health of on of the pracAPOPLEXY.

the Editor of THE LANCET.

SIR,-The following case of pulmonary apoplexy happened in my practice at the City Dispensary; it presents some symptoms of very rare occurrence, which you may probably deem worthy of record in I am, Sir, your useful Journal.

Your obedient servant, R. ROWLAND, M.D.

Oct. 12, 1835.

CASE .- Sept. 21, 1835. Thomas Holloway, aged 50, a porter, had been subject to gone; stools still figured, but of tolerable cough and dysping for several years, but he was able to work at his business until about two years ago, when the "shortness Aug. 15. Our patient progressing fa-, of breath" obliged him to discontinue all active employment. In general the cough and expectoration were trifling, but they Remarks. - In the above case several mo- were frequently increased from slight causes.

About a week ago, after exposure to wet primes, outnieal with treacle, ripe fruit, and cold, he was attacked with an aggravabuttermilk, &c., with a view to induce tion of all his symptoms; the cough became liquid evacuations; but the bowels, al- severe, the dyspnou urgent, and the expecthough so supplied and daily stimulated by toration copious, but without any admixture enemata, continued torpid, and the feces of blood. The respiration was inaudible figured, up to the period of convalescence; a over the right lung, and was bronchial, with circumstance somewhat unusual, consider- sibilant and mucous rale over the left; the ing the dejections had in a great measure heart's action could be readily distinguished recovered their bilions hue for some time over the whole anterior portion of the chest. On Thursday, the 17th of September, I received a hasty summons to visit him. During the previous night he had vomited an enormous quantity of blood, some of which was coagulated. I found him lying on his back; the pulse was quick, jerking, and wiry; the respiration exceedingly laborious; the countenance anxious, and of a leaden colour. He answered questions coherently, and chiefly complained of difficulty of breathing. On the following day he rallied a little; the sputa were still bloody. and mixed with mucus, but the blood had not appeared in large quantities. He remained nearly in the same state on Saturday and Sunday. On the latter day the patient called my attention to a pulsating movement of the veins in the back of the right hand, which I also observed, although less distinctly, in those of the left. This symptom was more remarkable after each expiration, when the veins became elevated, but a very evident quivering pulsation occurred also during inspiration. Neither of these movements was synchronous with the arterial

MR. BUCKLAND'S EXHIBITION OF IRON.

pulse. When the veld was pressed, the pulsation ceased below the part where it was employed, but continued in the portion of the vein nearest to the heart; the jugular veins were prominent, but no paleation could be observed in them. Early on the day morning the bleeding returned, and the

patient almost instantly expired.

Sectio Cadaveris .- Monday evening. The right lung adhered firmly to the ribs, and could not be separated without laceration. It was thickly studded with tubercles. And excavation of about the size of a hazel-nut was discovered beneath the clavicle. The left lung was also bound to the ribs, but less firmly than the right. It was emphysematous, and was completely gorged with blood tected in it.

The heart was pale and flabby; the right auricle and ventricle were greatly dilated: the parietes of the latter were about their healthy.

probable that it was occasioned by the sud- touch. den effusion into the left lung, causing an blood, the right lung having been greatly a gentle aperient every second night. blood, the right lung having been greatly paroxysms in a few days became less vio-condensed from previous disease. I offer lent. The dose was then gradually increased this opinion with much diffidence, as it is contrary to the theory of Laennec and other celebrated pathologists, who attribute venous pulsation to regurgitation of the dose were, entire loss of appetite, and ex-

I have been led to the above explanation of this remarkable symptom, from a consideration of the character of the pulsation. which was a gradual elevation of the vein following each expiration, but was not synchronous with the arterial pulse; and the absence of the atethoscopic signs, which indicate either regurgitation or valvular derangement, and also the remarkable condensation of both lungs, which the postmortem examination disclosed. The fluttering irregular pulsations which occurred during inspiration were probably the result of the auricular contraction, and perfectly coincide with the observations of Dr. Hope on that subject.

SUPERSULPHATE AND SUPER-ACETATE OF IRON.

To the Editor of THE LANCET.

Siz. I have sent you an account of the effects which have almost uniformly resulted in the undermentioned diseases, from the internal exhibition of the solutions of the supersulphate and superacetate of iron. I am, Sir, your obedient servant,

J. PELHAM BUCKLAND. 84, Watling-street, St. Paul's,

Oct. 13, 1835.

The colour of the solution of the superin a fluid state. No tubercles could be desculphate of iron is dark-brown; the taste is exceedingly rough; it dissolves sulphate of quinine, and is decomposed by the same preparations as the sulphate.

Case 1 .- I was consulted in April 1832, natural thickness. All the valves were by a gentleman who had been subject for a considerable time to periodical returns of Remarks.—I was at first inclined to attribute the venous pulsation in this case to terruptedly for three months previously to the diminution of the column of blood oc- his consulting me, and during the whole of curring simultaneously with disease of the that time had taken the subcarbonate of right side of the heart, of the existence of iron in large doses. The paroxysms had now become very severe, and at each intermission the part was the part was the control of the control of the paroxysms had now become very severe, and at each intermission the part was the control of the paroxysms had now become very severe, and at each intermission the part was the paroxysms had now become very severe, and at each intermission the part was the paroxysms had now become very severe. upon further reflection, I think it more der, that he was unable to bear the slightest

I commenced my treatment by giving him obstruction to the free transmission of the Mx of this solution three times a day, and to half a drachin three times a day. He was completely cured within a month.

The effects produced by the increased cessive dryness of the skin, which the patient described as being drawn too tight upon the body. The secretion of urine was very small, the heat of the skin rather diminished. These symptoms arising from the too large dose of the medicine, were entirely removed in a few days by the daily use of warm cathartics. Since this case I have never given it in larger doses than ten minims three times a day. Early last spring, this patient had a return of the complaint, when the liq. ferri supersulphatis was given in smaller doses with success, and without any unpleasant results.

CASE 2 .- I have give several cases of h heneficial effe standing were complet were nearly so, the stre greatly increasing.

De 1

CAR 3.—Night perspirations arising from general debility are very soon checked by its use. In one case I gave it to a geutleman who had been taking sulphate of quinine with sulphuric acid for two months without any benefit. In about ten days from the time of his commencing to take this preparation the perspirations had entirely ceased. This was in 1833, and he has not since had any relapse.

Case 4.— Paruria Mellita, a person residing in Wiltshire, who has had this complaint for two years, took during the first eightteen months, among other remedies, various preparations of iron, the sulphate, tincture of the muriate, ammoniated iron, but did not receive the slightest benefit from either of them; for the last six months, during which he has been my patient, he has taken this preparation in doses of ten minims three times a day. He felt great relief from it within the first month, and is now gaining strength and flesh every day, and losing the other symptoms of the disease.

Remarks.—The medicinal properties of the solution of the supersculphase. It is similar to those of the supersculphase. It is much pleasanter to the taste, and is readily taken by children when mixed with sirup and water. I give this preparation with much hemeit in mesenteric diseases. From one to three drops three times a day in sirup and water, is the dose which I generally prescribe for children of from one to three years of age. In weak chlorotte patients also, this medicine is of great utility. The dose for an udult is from five to ten minims two or three times a day.

Every practitioner is aware of the nunerous complaints in which iron may be exhibited with advantage. In all of them which have as yet fallen under my care, I have found these preparations to agree better with the patient, and occasion less nansea, than those generally used; I therefore have not considered it necessary to occupy more space in particularizing their effects in other instances, the above being quite sufficient to afford a general idea of their properties.

An Hersivorous Man.—Anthony Julian, a native of Var, fell suddenly into such overty during his youth, that he was compelled to eat plants. That which was at trat painful food soon became an object of holos; and although in a few months his was altered, he continued to live which he could which he could be a parted, and his health acrossed in an extraordinary

de Sc. and Arts of Varr.

System der Chireryte von Ph. Pr. von Walther der Philosophie, Medicin, und Chirurgie Doctor de. de. (A System of Surgery) Dy Banos Walthers, I vol. Berlin, 1833. Reimer, pp. 418. (Imported by Schloss.)

WALTHER is one of the truly great surgeons who do honour to his father land, and his works on Physiology and several detached papers on Practical Surgery in the Journal published by Gracfe and himself, have greatly contributed to the progress of the higher order of medical science in the northern states of Germany. To his lectures, he himself, however, attaches more importance than to his writings; they have been delivered regularly ever since 1802, and, enriched with improvements supplied by the entire range of medical literature, and by many years of meditation and experience they have arrived at a state of high maturity. At the medico-chirurgical school of Bamberg, the University of Landshut. Bonn, and Munich, he speaks with a becoming pride now, in his riper years, of having had for auditors many of the most distinguished German surgeons of the present

The volume before us is the first of a series intended to present the whole of his course and system of surgery. It develops the general principles of surgery, and constitutes that to the succeeding volumes, which general does to particular or topographical anatomy. The Professor has, from the first step in his professional career, followed the leading ideas that medicine not only reposes on natural philosophy, but that it is itself natural philosophy. This position being firmly embraced, he cannot admit that its practice as an art, or its utility to society. admits of its division. In every point of view, Walther's System of Surgery merits that name better than any other extant. Those who prefer natural grouping to the A B C arrangement, or who, like Gibbon, "can never digest the alphabetical order." will find in this logical and purely rational system, many charms, and some consolation, for the present form of medical writing which prevails in England.

The forms of disease treated in surgery are divided by the Professor into five classes. To the first belongs inflammation, its terminations and sequelæ (phlogosen); to the 2nd, wounds, solutions of continuity (frammen); to the 3nd, DISPLACEMENTS of

organs, changes of configuity (ectopieen), parations of the cohesion of organic ttructo the 4th, MALFORMATIONS, producing de- tures. They are examined according to struction of function and deformity (pseudo- their form, and the part or tissue injured,morphen); to the 5th, FOREIGN BODIES, penetrating from without or generated within (allenthesen).

In the first chapter, that on inflammation, the adaptation of the treatment to the different forms of malady, is strikingly felicitous. The modifications of treatment, according to the character of the inflammation, where the habit of body is catarrhal, fheumatic, scrofulous, syphilitic, arthritic, or according to the tissues or systems suffering, will be best appreciated by those who have had most experience in practice, and have seen on what slight causes success or failure depends. The indications for bloodletting in inflammation are thus stated : -

"Venesection is indicated with an urgency proportional to the intensity of the inflanmation, the importance and vascularity of the organ, the danger of entire destruction or breaking up of its function,-to the phlegmonous character of the inflammation, the earliness and activity of the stage, the acuteness and tendency to spreading, the freedom from any dyscratic combination,-to the violence of the accompanying fever, the strength of the constitution, the richness of blood, the habits of the patient

with regard to loss of blood.
" Redness of the face, the fulness, strength, and hardness of an incompressible pulse, high-coloured urine, dryness and heat of the skin, are indeed subordinate, but confirmative of the indications. Chronic inflammation frequently requires bloodletting, also dyscratic (scrofulous &c.) inflammation, if it assumes a dangerous appearance; only, in these cases, blood-letting cannot do all that is required; it can only cut short one element (the inflammatory) of the disease; the other (the dyscratic) element is not by that means arrested, but rather furthered in its development.

" Erysipelas, also, particularly of the face, bears and requires bleeding, keeping at the same time in view the origin and character of the fever, and the complications and likelihood of its return.

Also in children a little advanced in age, venesection is necessary in dangerons inflammation. Menstruation, the lochial discharge, hemorrhoids, are by no means invariable counter-indications.

Suppuration and the other terminations philosophic reasoning and kinds of inflammation are afterwards surgical science examined in the most comprehensive man- surpasses any work lately ner, Wounds are defined as violent se-

in the skin, the muscles and tendons, vessels, nerves, and hones (fractures). Cuts, stabs, bruises, laccrations, gun-shot wounds, poisoned wounds, inoculated wounds (chancres, hydrophobic wounds, &c.), are treatul successive chapters.

General and ingenious ideas are occasionally met with like the following, in the first chapter of the class of "displacements," the value of which will not be fully appreciated by every reader:-

" The organs of the human body are fixed in certain predestined localities. They can neither be developed, nourished, nor grow, and rightly fulfil their functions, unless they are placed in that precise local relation on which their insertion in the vascular and nervous systems, and their relation to the neighbouring organs,-by which they are supported in their functions,-in great part depend. As families of plants are confined in their geographical distribution to particular zones, to various degrees of latitude and longitude, to a definite elevation above the level of the sea, to certain climates, so is there for the organs of the human body a topical arrangement and normal position. Therefore, viewed in their totality, similar organs in the different classes of animals, always live in the same or corresponding places, and every displacement is also a correlative loss of dignity and destination for the dislodged organ."

Intussusception, hernia, prolapsus uteri. dislocation, paraphymosis, belong to this class.

Malformations of every kind, harelip, cleft palate, imperforations, strictures, ectasies, anemysms, varices, anemysms by anastomosis (telangiectasie), curvatures, and clubfeet, form, in separate chapters, the fourth division (pseudomorphen).

Further remarks on this work are unnecessary. The reader must have seen sufficient to enable him to understand the author's arrangement. Without extracting more than our limits will admit, it would be impossible to give a just notion of its trinsic value. For condens

On the Power, Wisdom, and Goodness of God, as manifested in the Creation of Animals, be and in their History, Habits, and Instincts. By the Rev. WILLIAM KIRBY, M.A., F.R. S., &c. Vols. 1 and 2. London, Pickering, 1835. byo.

THE author commences his work by remarks on the opinions of the two wellknown French philosophers, La Place and Lamarck, but more especially on those of the latter, as being pre-eminently the works of naturalists. Although we cannot agree with many of the ideas started by the latter in his " Philosophical Zoology," we nevertheless think they deserve the consideration of inquirers after truth. His main hypothesis of the gradual conversion of the lower into the higher order of organized beings, by the influence of external circumstances, assisted by "the lapse of ages," is not satisfactorily made out. He has certainly produced a few facts to show, that when an organ is not used, its power gradually declines until it may be said not to exist; and, rice rersii, that when it is much used, what may be called its "natural" state is rendered more perfect. This is matter of common observation, and has been long known Lamarck, however, has considered it more particularly than have the generality of physiologists; and although he has made some ingenious ileductions from it, and some that are correct, we still think that every impartial man who has attended to the subject, will so far agree with Mr. Kirby as to nerceive, that the French philosopher has by no means yet brought forward a sufficient number of facts to establish his main hypothesis. Lamarck perceiving that change of circumstances, assisted by time, will to a certainty produce some variety in the arimal species, has conceived, that such change of circumstances, aided by an incalcutable extent of time, may have produced all the varieties which we see in the organized world. The hypothesis is plausible at first sight, because it is not altogether unsupported by facts; but when examined more closely, it is obvious that by far the greater part of it, though not altogether " irraas Mr. Kirby calls it (page 24), has in observation, exthat at best it can of a bare poswing this point of the rance may be called to the

fact. that Meckel has shown that our life in the womb first resembles the life of an egg or an animalcule, and next that of a fish or a cold-blooded animal, which has only a single heart, till at length, as the time approaches for our appearance in the open light of day, our vitality assumes the character of the warm-blooded species, and we appear in the world with a double heart. Considering these facts, Meckel supposes that he perceives something like a tendency of matter to rise from the lower to the higher forms of existence. We do not think he has added (as he might have done), that not until long after birth does the child acquire what may be called the " true prerogative" of its species,-reason. This,not exactly, as some have said, "built un from the external senses,"-is still something superadded or developed after the animal has risen to the top of the organic scale, and become warm-blooded. Animalcule, reptile, dog, its master. Such seems the ascending series.

Sir Charles Bell, in his "Bridgewater Treatise," is opposed to these ideas of Lamarck and Meckel. He considers the lowest animals to be as perfect in themselves as the highest. This is an argument that deserves consideration from those who engage in these difficult inquiries. The ant and the bear, and indeed some reptiles, such as the crocodile, seem often to have given proofs of sagacity which should make us hesitate whether it is right to consider those animals which will be low in Lamarck's and Mcckel's series, as so ranging in reality. The world is one vast piece of mechanism (some may say), every part of which is so arranged, as to fulfil the intentions of the incomprehensible Artificer; and it is absurd to consider one part to be higher or lower, more perfect or less perfect, than another. With regard to Meckel's above-stated observation, it seems to be the sole instance that we at present have of life beginning at what we call the "bottom" of the scale, and gradually ascending to the top. Conceiving it to apply not only to the human species, but to all the warm blooded species, it is still to be remembered that this all takes place in the body of the parent, and not out of it. There is, properly, at present, so far as we know, not a single example of such a tendency of

after death becomes gradually changed, as decomposition advances, into myriads of animalcules, which again pass into vegetable and thence into animal forms of existence. And this may be the fact, so far as that animalcules are produced by decomposition, and that these, by their death, or, possibly, by their life, may contribute, rising among the vegetable juices, to the vegetation of the seed, by affording it nutrition, or stimulating it, assisted by air and water, to action. But it is not the fact (so far as we at present know), that each animalcule is changed into the seed, or even into a part of the seed. Much less is it a fact, that the lower orders of vegetables are changed into the higher, or into any form of animal life. True it is, that the vegetable, when dead, may,as it were, after another death, - after chemical decomposition by the animal fluids,become changed into a part of the animal again alive. But this is a very different thing from a vegetable actually growing into (changing into) an animal; or an animal of the lowest species changing into an animal belonging to a higher class in what is called the scale of organization.

Again, if it be said,-" But animalcules, which are living matter, are obviously produced from the fermentation of animal or vegetable infusions which are dead matter, and hence display the existence of a disposition in matter to rise from death to life,from a lower to a higher state of being,"we may reply, "That has been questioned." Spallanzani conceived the eggs of the animalcules to float about in the air and elsewhere, and only to be hatched (so to speak) when they accidentally fell into a proper nidus. Such he conceived decomposing infusions to be. Knowing that some of the animalcules may themselves be kept for many years (as the wheeler for instance), and yet show signs of life on being moistened, it seems by no means impossible that

matter as that which is supposed by Lamarck the eggs of those animalcules may float and Meckel, existing out of the parent about in a dry state in the air, perhaps for animal.* Tiedemann, indeed, in his late hundreds of years,* and yet not lose the work on physiology, supposes that our body power of becoming living animalcules, should they chance to fall into an infusion suitable to produce such change. seems to be the less improbable, because these animalcules often propagate by Livision, like vegetables, and the seeds of which we know may be kept dry without injury for years. Lamarck, however, and some other naturalists, seem inclined rather to believe that animalcules are actually generated by decomposition. But there is strong analogy against such a supposition. We have proof that no other insects or animals are so generated. At least such a phenomenon has never yet been discovered in others.

It seems, therefore, to follow from what has been said, that when the visible animals originated, some cause was in operation which is not in operation now; and the same may be said of the transmutation of the lower into the higher forms of existence, if, indeed, this was the order of creation.

We select the following observation with regard to life from Mr. Kirby's Treatise. It affords a specimen of the original views which are frequently to be met with in the work.

"Thus much, however, may be predicated of life, that both in the vegetable and animal, like heat, it is a radiout principle, showing itself by successive developments for a limited period, varying according to the species, when it begins to decline, and finally is extinguished: that sometimes also like heat, as in the seed of the vegetable and egg of the animal, it is latent, not manifesting itself by development, till it is submitted to the action of imponderable fluids conveyed by moisture or incubation. -р. 40.

The reverend author thinks that the hypothesis of Mr. Mantell, viz., that the saurians were the mighty masters of the creation before the existence of the human race, is not altogether satisfactorily made out. "The supposed extinct animals all exhibit a relationship to those that we find now existing and many of them evidently fill up th vacant spaces in the general system. therefore there is no cause to a were originally separa

^{*} Nor does there exist evidence that such a tendency has ever existed. " There are no fossil remains in the lower strata of the earth, of vegetables and animals, of oaks and lions, in ministers ereatures with organs half formed; while in the upper strain they are found in a state of greater per faction." Be "Allan" Discourses against Athelan," Discourse 4, p. 186. This work was not known to us until after the present article was written.

[#] It is not ! floated from the

brought forward in favour of the notion that extinct animals were created at the same time as those which are at present in existence.

In chapter II. a great many ingenious arguments are advanced to show that America may have been stocked with men and animals from the old continents. Land connexions, subsequently swallowed up by the ses, "floating islands of matted wood," similar to those observed by Captain W. H. Smith &c., are urged as possible modes of transmission. The author, in the Appendix to the first volume, and elsewhere, has endeavoured particularly to make geological researches accord with the Mosaic account of the deluge. In aiming at this as a general principle, he is doubtless serving the cause of Scripture; but in urging the existence of coincidences to such an extent as he has attempted to carry them, we doubt much whether he has not overshot his object. This error the traveller committed who, in proof of the transmutation of Lot's wife into salt, announced that he had found the pillar in the desert. The expression relative to the sun standing still, and others of a similar description, show, that however plausibly we may interpret to the letter some parts of the most ancient records, we cannot do so in all. And if we cannot do so in all, to labour at parts shows our anxicty to be more prominent than our wisdom, for partial success must lead to rejections which the interpreters will not desire.

We leave the perplexing subject to make some remarks on the chapter " On Instinct." "An ingenious and acute writer, Mr. French (says the author), is the author of the hypothesis that instinct is the action of some intermediate intelligence employed by the Deity upon the animal exhibiting it,-an hypothesis (continues our author) which appeared in the first number of the Zoological Journal." It seems by another quotation, that Mr. French conceives "these intermediate intelligences to be good and evil, but acting under the control of Providence; such agencies act by impressions us nature, but unperral or intellectual remarks on common phraseology e intelligences would be

to their ellows." We do not, however, ob- called "Angels and Demons," the former serve any new or striking arguments being the cause of the beneficent, the latter of the ferocious instincts of animals. "It is further obvious, (he continues,) that Mr. French believes that the same animal is subject to the agency of both these powers; since, he has observed that in the phoca ursina species, the males manifest the most singular tenderness towards their young progeny, and at the same time a savage and persecuting disposition towards their females."-p. 233.

> Mr. French might have gone farther, and said that as an attraction to the centre and a tendency to motion (the centripetal and centrifugal forces) seem to pervade all inanimate matter,* in like manner two onposing powers, benevolence and malevolence, selfishness and generosity, seem, though in different proportions, to pervade all organized animal matter. We say in "different proportions," for it is obvious that in some animals (man included) the benevolent principle is the stronger, in others the malevolent. Were we called upon to make two grand distinctions on this subject, we should say that herbivorous animals were inspired more particularly by the benevolent powers, and carnivorous by the malevolent; at the same time admitting that even the herbivorous are sometimes actuated by the malevolent influence, and the carnivorous by the benevolent. + There is little that is new in this opinion. Plutarch says, in his Essay on Isis and Osiris. that it was entertained by Zoroaster and the Egyptians. It was the opinion of Plutarch himself-if not in its details, at all events in its outline. It was the opinion of Bayle. Further; it is an opinion that prevails more or less among all educated nations even of the present day. The " Devil" we are sold entered the serpent " in the beginning," and the serpeut has since retained venomous and malignant qualities.

But the reverend author does not coincide with Mr. French in his opinions on in-

^{*} Mr. Kirby bas a remark somewhat similar to this as regards instinct and intelligence, which latter is considered a " principle of limitation."-P. 27, wal. v.

t Having no space for details, we have said nothing y riaving in space (or decisies, we have said nothing) and fate, necessity, or the obstinacy (or opposing power) of matter, suggestions of Plate; yet dues Paley indirectly, in accordance with striplural ductrine, admit the genery of one at least of these. We do the same, and in this way show how the benevolent is stronger than the antagonist power.

stinct. The former mys, It never can be because the treatise of Mr. Kirby does not admitted," that the bee in collecting honey is actuated by "the good angel;" and in efforts of vengeance by stinging is excited by the evil spirit. Suppose, however, instead of saying the "good angel," we say "the good power in its nature," and rice versa. This power or "agency" (as Mr. French calls it) may be inherent in the animal or insect, or not. In conceiving it so to be, we perhaps alter somewhat Mr. French's meaning. Certainly it is difficult to conceive that the spirit, angel, power, or agency, exists out of the bee. Its abode must be in the insect. Its dependence on peculiar structure presents another question for discussion.

Mr. Kirby says that he has sometimes seen the flesh-fly deposit her eggs upon the blossom of the carrion plant, evidently mistaking this plant for carrion itself. " It is obvious, he observes, in this instance, that the insect was led by its sense of smell to make this mistake,-fatal to the young, which must inevitably perish from hunger.' With regard to the error committed in this case and others, (where the insects and animals act upon their instinct, and the fact that in this particular instance the sense of smell directs the insect,) Mr. Kirby thinks that the proximate cause of instinct is for the most part physical. (pp. 240 and 266.) We may agree with the rev. author that it is probable that the instinct depends on a physical cause in the case he has brought forward, and yet not entertain an opinion that is inconsistent with the doctrine already advanced, relative to benevolent and malevolent powers or agencies. Mr. Kirby himself does not pretend to account for "the wonderful sequence of actions and manipulations exhibited by the beaver, the bee, the spider, and the ant," on physical causes (page 276). He admits the difficulty in these classes, and as he offers no such satisfactory solution of it as in the case already mentioned, we are at liberty to believe that in many cases instinct may depend on what he calls metaphysical. or at all events mixed causes.

We might fairly be more solicitous to hold the opinions advanced with regard to benevolent and malevolent powers pervading all animal life (and, probably,-as we may attempt to show hereafter, - all vegetable life), ment is only partial, and hence of

(nor, in conjunction with it, does that of either of his colleagues) present more than two or three rational and successful arguments in addition to the evidence furnished by Paley in support of the doctrine of "Divine Benevolence." Yet the work of Mr. Kirby professes especially to be devoted to proofs of "the Power, Wisdom, and Goodness of God,"-subjects on which the Earl of Bridgewater particularly requested works to be "written, printed, and published." We have already, in our observations on the Treatises of Drs. Kidd and Roget, described this opinion, and we now repeat it, at the same time confessing an humble belief that the hypothesis of antagonist Benevolent and Malevolent powers, offers the more satisfactory solution of the difficulty which besets this point of "Natural Theology." But to discuss the various bearings of this proposition, and to show how, amidst the seeming disorder and injustice which in the view of some seem to prevail among the objects and functions of creation, an Universal Spirit of Benevolence may still be ever in operation, is not our present object.

In reference to the different kinds of food by which animals and vegetables are nourished, our author well observes, "The animal does not become the nutriment of the vegetable till it is chemically decomposed; whereas the latter becomes the food of the former either in its green or in its ripe state." This may suggest the remark, that it is doubtful whether plants should be considered higher merely as living beings than animals. The rose takes putrescent matter for its food, and converts all that is disgusting both to the sight and to the smell, into much that is delightful to two of the senses, into what is exquisite to the vision and sweetly odorous to the smell. No such power exists in animal matter. Though many birds and animals are beautiful, fragrance they possess not, and none of them that are fair to the eye, can subsist on a putrescent mixture of organic with inorganic matter; but all carry more or less of such mixture within them, though they take it not from without.

It must be admitted, however, has one argument on the manufaction. In stating the suderation. In stating the ou each other, he says blooded animals as warm-blooded, asimals (Page 378.) Probably this

Not so the rose. The queen of flowers is the passages are successively and succinctly biess, and retaining comeliness and whole- and French synonyms. into inoffensive dust. The queens of birds and of humanity perish into odiousness.

Quaint enough is the following erection on criptural theory :-

" It is singular that two classes should be placed in opposition to each other, seemingly so opposite in their character and most of their qualities, as the reptiles and birds-the one the most torpid, doleful, and hateful of animals, symbols of evil demons, - the other vice versa.

But in spite of this apparently striking contrast, a real affinity exists between birds and reptiles (in their general form &c. &c. of course is meant, each too being oviparous); and when we recollect that demons are fallen angels, we may apprehend why God has placed their symbols in the same series."

(Page 441, vol. 2.)

To conclude. Though we differ from the author in some of his opinions, yet we acknowledge the work to be one of merit, and calculated to afford considerable pleasure in the perusal, to thoughtful readers. Many of the observations which it contains are at once original and judicious, and if the pursuit of truth does not always satisfy the reader by its success, the path at least af fords food for meditation. The materials for thought are certainly supplied in his pages, which can rarely be said of "new books" in this age of literary vampation; and in casting yet further abroad a little of the seed which he has therein strewed, we shall probably cause some to alight in a soil that will afford it growth which it would not otherwise obtain.

The Principles of Ophthalmic Surgery; being an Introduction to a Knowledge of the Structure, Functions, and Diseases of the Eye; embracing new views of the Physiology of the Organ of Vision. By John WALKER, Surgeon to the Manchester Eye Institution. London: Taylor, 1834. pp.

THE title of Mr. Walkers work is suffily explanatory of its nature. The strucdiseases of the cyclids, of the the eyeball, the corhoppid, the retina, chamber, the posterior bit, the lackrymal gland, and

perhaps the most accomplished of chemists, discussed. A vocabulary is added, explanaduring life converting corruption into sweet- tory of technical terms, with the German This is exceedsomeness even after death, falling slowly only ingly useful, nay, indispensable to the student, who will readily admit the fact when he finds that there are more than one hundred distinct diseases of the eye, each characterized by some hieroglyphic forged out of Greek, by the laborious wit or the dulness of the Germans. Three hundred technical terms are already employed by the ophthalmologists. In the name of common sense, and on behalf of the verbal memory of their hrethren, we now entreat them to desist from further neological creations, which. instead of diffusing light, threaten us with the perplexities of chaos again. Let our translators resolutely resist the German verhiage. None sooner than ourselves are willing to acknowledge German genius whenever it appears: but we caution our countrymen against giving currency to the piles of lucubrations which are retailed at the Leipsic fairs. A German Professor is an author, often a nomenclaturist, ex officio; and the dense stupidity of a German dunce surnasses any thing of the kind in nature.

The examination of the physiology of the iris, in which Mr. Walker comes to conclusions differing from those generally held. will afford a favourable specimen of his method of reasoning in physiology.

"It has been usual to refer the motions of the iris to a supposed connexion with, or dependence upon, the retina. Many facts may be advanced in proof, that the changes of the pupil are independent of the retina. They have no communication with each other-their nervons supply is totally different, the sensibility and mobility of the iris depending upon the ciliary nerves;-the rctina communicates only with the optic nerve. In many cases of paralysis of the retina, the iris is perfectly active. The onposite condition is also frequently noticed of dilated and motionless pupil, without loss of vision. Either of these conditions is perfectly irreconcilable with the idea of the motions of the iris being dependent upon the retina: both form such an insurmountable objection, that they cannot be got over.

"In the most densely opake cataract. where very little or no light can get to the posterior chamber, the pupil, instead of being proportionally dilated to the unexcited state of the retina, is as active and as much contracted as ever, which could hardly he the case if that activity depend upon the quantity of light sent to the retina.

"To explain this more clearly, we will

adduce two filtrances, jawhich the facts will found that after cutting away the eyelids in speak for themselves. 1. A.B. is affected birds, the contraction of the pupil accomwith cataract of both eyes. The lenses are so opake, as to allow of scarcely any light getting to the retina, consequently he is unable to discern any object but very indis-tinctly. His pupils will be as much contracted as those of any other person. 2. C.D. has no cataract. His vision is perfect. He is placed in a darkened room, where there is so little light to affect the retina, that he is unable to discern any object but very indistinctly. His pupils will be widely dilated. In these instances the retina is similarly situated as to the stimulus of light; and yet contracted in the other. The inference to be drawn from these facts is, that the exthe light, and that the contraction of the pupil is the result of that action; and, con- birth, both these membranes disappear tosequently, that the latter is not influenced by? the quantity of light sent to the retina.

"In the state of sleep the pupil is powerfully contracted, whilst the retina is unemployed, and in a state of complete repose.

"By means of the lenticular ganglion, which gives off the ciliary nerves, the iris is connected with the palpebra, by the third and fifth pairs of nerves; and all its relations seem to be with the cyclids and not with the retina. It is very common to find them both simultaneously affected with discase: - thus, if there be paralysis of the third nerves, the levator palpebræ and the iris are both motionless. In the experiments of Magendie, when the fifth nerve was divided, in dogs and cats, in whom the arrangement of these nerves is the same as in man, the iris was paralyzed, and the cyclids could not An Introduction to Hospital Practice in he closed. I have seen disease, in which the eyelids and iris were both in a state of continued spasmodic action, a constant twitching and closure of the eyelids, and a corresponding rapid contraction and partial dilatation of the pupil, owing apparently to irritation affecting the fifth pair of nerves. Instances of this affection cannot be considered as by any means uncommon, since it is particularly noticed by Beer, to whom it could therefore be nowise strange.

"By reference to the facts of comparative anatomy, this view of the relation between the palpebræ and iris is strengthened and confirmed. Insects are devoid of either. In fish we find the iris perfectly formed (as a portion of the optical apparatus), but motionless and no eyelids. In the amphibia the iris is also present, with a feeble languid motion; and here we have the first rudiments of cyclids; these consist of folds of the common integument, with which the animal occasionally covers the eve, placed anteriorly and posteriorly, and resembling the third eyelid of birds and the mammalia. In birds the eyelids are perfectly developed, and the iris exceedingly active. Keiser the superintending care of o

panied every fruitless attempt to close the lids; so that it would appear that the motions of the iris are voluntary in them. Carus, from whose 'Comparative Anatomy' these facts are taken, asks, 'Does not this consonance of motion in the eyelids and iris, as well as the development of mobility in the latter at the same time with the first appearance of eyelids, go far towards proving its muscularity?" It may be taken equally as a proof of their mutual action and relation.

"In the mammalia we find the same strikwe find the pupil dilated in the one case, and ling analogy between the eyelids and iris. Before birth, as in man, the pupil is sealed up with the papillary membrane, and the terior of the eye and iris are acted on by eyelids are closed by a similar membrane; and in those animals which are blind at gether.

"From all these remarkable and striking agreements, it is not too much to draw the inference I have done, viz., that the sympa-thies and relations of the iris are with the paipebræ and not with the retina. I challenge the advocates of the latter opinion to bring forward such a string of facts in support of that view."

We recommend Mr. Walker's book as a very meritorious performance; every subject which he has discussed is treated clearly and with good sense.

Various Complaints : being a Clinical Report of Fever, Gant, Rhenmalism, Cholera, Jaundice, Erysipelas, Insanity, &c., and Discoves of the Chest and Heart, with Remarks on their Pathology and Treatmen!. By C. J. B. Aldis, M.A., M.B., and L.M., Inceptor Candidate of the Royal College of Physicians. London: Longman, 1835. 8vo, pp. 125.

Periodical medical literature can render no much greater service to medicine than must result from the publication of carefully-observed and well-digested reports of hospital cases. Physicians and surgeons in large private practice can only present us with general conclusions, leaving us, too often, in ignorance of the facts and observations upon which those conclusions have

been founded. It is for advance or young physicians, spend some hours hospital, to call facts which occur from

"the evidence," of which the more experienced practitioner can only report to us the "summing-up." In the hospitals the medical officers should themselves set the juniors to work, and arrange and complete the mate. rials collected, the independence and honesty of the collectors being the guarantees for the finelity of the reports. If they will be at no pains to perfect the documents produced, at least should they afford every facility to enable others to perfect them. However, there seems to be so much reason for the preservation of secrecy in British hospital practice, that there is no hindrance or obstacle which, with few exceptions, is not thrown in the way of reporting cases honestly and impartially, in the national medical charities of this country. In France, a greater compliment cannot be shown to an hospital medical functionary, however high and eminent his reputation, than to report his cases in the public journals.

There are sometimes, however, followers in the wards of our hospitals on whom the physicians and surgeons can depend,-us a lord can depend upon his amanuensis, or a prince upon his little foot-page; and now and then we have these attackés issuing reports or brochures of cases, " selected," judiciously selected, and fitted for publication with the grand name of the hospital affixed to the title, and an equally grand name in the dedication. Yet such publications must contain much that is veritable, and ought, imperfect though they may be, to present us with much that is valuable.

Dr. C. J. B. Aldis is neither a foot-page nor an amanuensis. He is an M.A., an M.B., an L.M., an I.C.O.I.R.C.O.P.L. aud a D. to his M. E. M. K. W. the 4th, P. and P. to St. George's H., and of all N.I.'s,-which latter series of initials being interpreted, means that Dr. Aldis is a Dedicator "to his Most Excellent Majesty King William the Fourth, Patron and President of St. George's Hospital, and of all noble Institutions .-What a simple thing is science! What grandiloquent personages are some of those gentlemen who follow in its wake! We will furnish our readers with a specimen " which Dr. Aldis has

tion to " the pa-

to lay before the public a full account of tained of engaging him at a reporter at St. George's, notwithstanding the fact that he has been there for a " series of years" learning the occupation. Suppose his most gracious Majesty had met with the following case in our columns, which position it has missed, occupying, instead, a place in page 32 of the "Introduction to Hospital Practice,"-a work which is designed " to prevent numerous valuable facts from sinking into oblivion."

" Case of Infantile Remittent Fever.

"Charles Wellington, æt. 31, admitted December 7, 1831. Pulse 120; skin warm and moist; bowels open and motions dark; urine clear; abdomen rather swelled; emaciated; voracious appetite; coughs and expectorates thick phlegm.

" Had the measles three months ago, which were of an irregular character, and

he has not been well since.

" R. Hydrary. Submur. gr. ij; Pulr. Jacobi gr. j. o. n. Haust. Senna 388, omni mane. Haustus Cetacei 3ss, sextis horis. Diata Lactea.

" 9. Prolapsus ani.

" Enema Aquæ Frigidæ 3ij, quotidie, P.

" 14. P.

" 25. The prolapsus ani has ceased; the injection has consequently been omitted; no

" P. c. Hyd. Submur. et Jalap. alt. nocte. Haust. Sennæ posteris diebus mane.

" Jan. 2, 1832. Cured."

This is verbatim. It constitutes case 17. Does Mr. Aldis seriously present it either to King William or the profession as an hospital report; or does he think himself privileged, as an inceptor candidate, to publish what the merest tyro in the profession, who possessed the same opportunities for observation in the hospital, would be ashained to own? Look at the previous history of the case-" measles of an irregular kind three months ago." How precise! "Has not been well since." How clear a description of the premonitory symptoms and previous state of health!

The report of the 14th day is unique in medical records: " 14th .- P." Probably Mr. Aldis shook his learned head as he wrote the algebraic fact of " P." A shake of the head stood for much with a dramatis persona in His present the " Critic," and may have been equally exthly induced us to pressive here. But then we do not see it. tion we may have enter. Perhaps the printer, to whom the notice of the significant metapose of the head wasbroadside against hemiplegia, paraplegia, new in "composition," omitted "a chake of amaurosis, nervous indigestion, the doulouthe head" after "P.", in ignorance. At any reux, and neuralgia. Like the production of rate it would prove p. of the propaga-line Dr. A. B. and C. D. Turnbull, the presentwork to Dr. Aldis, to obtain the k is not, -Oh, fellow countrymen!-a

thor describes as "cynanche trachcalis," is dismissed in a single case, which occupies three-fourths of a page, while the sum of information on the spasmodic form is contained in the following extract, which embraces every word contained in the article under that head.

" Spasmodic Croup .- This is opposed to the former, which may be termed inflammatory croup. It usually attacks patients suddenly in the night-time, and is unaccompanied by the symptoms of pyrexia, which commonly distinguish the former. There is often an intermission of the disease. The warm bath and antispasmodics compose the treatment.

several works, British and foreign, on dis- the relation of some very obstinate cases eases of the heart. We beg the authors of will prove." These cases are very clearly, those works to consider how absurd have and we have no doubt very fairly, related. been their labours, when they learn that The work is, indeed, one of the best yet Mr. Aldis has discovered that the diseases published on strychnine, and goes as far to of the heart consist simply of hypertrophy verify its efficacy as can any book which and ossification, and that we could print relates to successful cases only, and does not every word which he has to say on the subject of the former in one page of our journal, the latter being concentrated in the following three lines, immediately after dismissing the cases of hypertrophy.

" The remaining diseases of the heart consist in ossifications, which may be palliated by medicine and repose, and life may be prolonged by avoiding excitement."

And it is to give encouragement to such piddlers in cases as Dr. Aldis, that our hospital doors are almost closed against the reporters for the public press!

Practical Observations on the Nature and Treatment of Nervous Diseases, with Remarks on the Efficacy of Strychnine in the more Obstinate Cases. By GRONGE RUSSELL MART, M.R.C.S. L. London. Churchill. 1835. pp. 185.

THIRTY-TWO more miracles performed by strychnine! Mr. Mart has come from Poor Linton H.M. Ship Recoon to the assistance of Dr. was considered an inc Turnbull, and discharged a very destructive "The treatment was co

gagement on the periodicals.

The greater part of the cases reported the same description. That the intains only a catalogue of the same description. That the intains only a catalogue of the same.

The recting who used to escape from shipwreck offered gifts to Neptune, and the temple of the Ocean God contained many proud trophies of his power, which the priests exhibited with immoderate elation to the devout stranger: "Where are the memorials of those who perished?" was a question which overwhelmed them with amazement." We ask Mr. Mart, and we shall continue to ask all the proclaimers of new medicines-" To how many patients did you administer your drug without producing the least advantage from its employment?"

The author of the work on strychnine has " for many years successfully adminis-We have seen, within the last few years, | tered strychnine in paralytic complaints, as pretend to ascertain their duration. The following extract affords a favourable specimen of Mr. Mart's cases :-

" Case 7 .- Thomas Linton, aged 42, had been two years in the Racoon Hospital, in Portsmouth Harbour, before the date of the author's appointment thereto. He was tall, thin, and had a sallow complexion, and was the most intelligent patient in the ward. He stated that he had not quitted his bed for twenty months, except on favourable days, when he was carried on deck for fresh The cause of the palsy was a blow on air. the loins by a fragment of stone, attended with considerable pain at the time, which in a day or two passed off. Sometime afterwards he became alarmed by a feeling of numbress extending along the thigh, and a sensation as though strings were tightly bound round the legs. These symptoms increased, and at the end of three weeks the man was deprived of stotion of the became unable to stand. cure were tried,

ministering some blue pill, and doses of considered to be the only one that is received purgative medicines; the state of the second calculated to aid the student in his inquiries cretions required previous treatment. Afterwards, one-eighth of a grain of strychning was ordered in the form of a pill twice a day, and a dose of a mixture containing diluted sulphuric acid taken at the same time. On the second day the pill was regradually increased to a grain in twenty-four hours. When the treatment had been continued a month, no amendment occurred; but about this time a blister was applied over the part where the blow was received. On removal of the skin, one quarter of a grain of strychnine was applied twice a day. The blister was dressed daily in this manner till it healed, when another was applied in the vicinity, which was dressed with half a grain of strychnine sprinkled over the denuded surface twice a day, and also mlministered internally in pills containing a quarter of a grain four times a day. Six weeks from the commencement, the patient began to improve; convulsive jerks were felt in the legs, and a sense of pricking and other old sensations were experienced; the toes would move involuntarily. An erect posture had been attained several days; the patient sat in a chair, and moved the legs in every direction. He continued to improve in various degrees, but the amendment was always more rapid after blister-This treatment was continued four months, when he was so far recovered as to be discharged from the Hospital Ship, and had light work assigned him. Finally the cure became perfect, and he performed the duties of an able-hodied man.

Practical Anatomy of the Nerves and Vessels supplying the Head, Neck, and Chest, &c .-By EDWARD COCK, Demonstrator of Anatomy at Guy's Hospital.-London, 1835. Schloss. pp. 240.

THE preface to this little work contains an apology from the author for adding one more to the long list of existing "manuals" of anatomy. The excuse, however, is unnecessary. The work is well executed, and we especially approve the plan on which the anatomical researches in the regions displayed is conducted.

There is no occasion for us to enter into a public examination of the contents of the volume, or to analyze its details, which are mirely anatomical. Mr. Cock does not preave made any discoveries; he tion for the manner in wascular and nervous necks and the thorax. d which we have always

in the dissecting-room. Instead of commencing with the large trunks of the arteries and nerves, the author takes them up point where dissectors must commence) at their terminal branches and then follows them to the more deep-seated parts, and intersperses his descriptions with a variety of remarks and directions for dissection, which none but a practical anatomist could have given, and which will render the greatest assistance to the student while he pursues this difficult portion of anatomy, scalpel in hand. In short, the author makes his work say that which the demonstrator would describe riva roce, with the parts before him, and in the same order as that in which the parts present themselves under the knife; and this handy volume may be conscientiously recommended to all those who desire to lay that sound foundation for medical knowledge which can be derived only from a practical acquaintance with the structure and relation of the parts coinposing the human body. The work is issued with the usual extreme neatness of Mr. Schloss, whom we may take this opportunity of recommending to students as the publisher of some excellent and valuable plates of anatomy by Weber, especially his Anatomical Atlas.

THE LANCET.

London, Saturday, October 17, 1835.

THE remarks which we have recently offered to the profession and the public, on the fraudulent lecture and certificate system. have produced, it appears, the desired effect on some of the most guilty of the delinquent parties. There is no trusting them to discass this question, except in favour of one side. As all the arguments, therefore, are with us; all the calamnies, all the falsehood, or, to speak plainly, all the lies, are to be found in the columns of our opponents. It is pretended by our veracious adversaries that we advocate the apprenticeship system, and that we contend for the proposition of totally abolishing the practice of lec-

public and private medical schools; | tion, know well enough that THE LANCET -that therefore, we large enery surgeon should be supplying his pupil with a con ledge of every branch of medical ad that the pupil should derive no other with respect to instruction in medicine, that that which can be furnished to him by the gentleman to whom he is articled as an apprentice.

It is not in our power to present any specimen to our readers as a refined mode of lying, because nothing more gross, more truly gross, in the shape of falsehood, was ever presented to the observation of intelligent men. What we have been seeking to establish - and this is as well known to our shallow-pated opponents as it is to the profession-is a system of education in medicine, which has its foundation in principles of justice,-a system which will necessarily confer on all practitioners of medicine, the privilege, when they are competent, of supplyabuses which arise out of the certificate ever, this self-same student makes his apsyslem, enforced and sanctioned as it is by pearance in the metropolis, with the avowed the rulers of our colleges and companies.

rations and falsehoods, we derive the greatest culated to give satisfaction to the share of satisfaction; for of what use is it to student, to the public or to sur apply the lash, unless we can make the apothecaries, whose are galled jades wince? The adversaries of a unceremoniquely in just and rational system of medical educa- in the "recogni

that has ever been opposed to a compalsory system of instruction of any kind, other than what is demanded by the capacity of pupil to undergo a searching public ination. To this extent our advocacy have not some a single step. The system of compulsory apprenticeship, instead of being lauded in this journal, has been denounced by us, as well also as has the disgusting humbug of "recognised" courses " "four months" and of "six months" duration. It has ever been the object of our labours to set both practitioners and students free from such odious and pernicious trammels, as far as may be necessary to suit the interests and conditions of persons against whom the "recognised" system may operate-if not as an institution of extortion, at any rate as a provision which must be attended with great disadvantage. By the Apothecaries' Act of 1815-a meaing their apprentices or pupils with a com- sure which has called forth so many pages petent knowledge of the theory or practice of eulogium from the pen of the hired hack of the science of medicine. Hence, on a of the corruptionist—the student in medivariety of occasions, we have felt it to be our cine who desires to practise as an apothebounden duty, in justice to the public, and cary in England and Wales, must serve an in justice, too, to surgeons who are engaged apprenticeship to an apothecary for a period in private practice, to expose the enormous, of "not less than five years." When, howobject of obtaining his license at Apotheca-But the exposure, it seems, is a source of ries' Hall, he is required to commence his grievous annoyance to certain of our empty- studies de noro, and certain rules are preheaded lecturers. We are glad of it. We scribed for his adoption, a compliance with had no desire to please them, and quite cer- the terms of which requires a residence of tain are we that, if our criticism on that nearly three years in London. In short, subject had been consolatory to their feel- had he been articled to an attorney—had he ings, a better proof could not be furnished been apprenticed to a carpenter or a fishthat we had sacrificed the interests of the monger, he could not have been subjected profession. When, therefore, our opponents to a more degrading, a more expensive orare most liberal in giving utterance to vitupe- deal. Is this a state of things which is valWhy, we ask, if the private practitioner be endowed with sufficient acquirements, and be gifted with an adequate share of industry, to convey to his pupil an admits knowledge of the various branches discouraged from pursuing a companies of the individual who is placed under his charge?

And pray, who are the practitioners whose abilities are spurned by the Colleges, and whose acquirements are made the subject of vulgar ribaldry by MACLEOP and the rest of his ignorant clique? It happens, strangely enough, that they are gentlemen who have endured all the tortures and the costliness of the certificate system, and have been proclaimed by the ruling authorities to be perfectly qualified to undertake the duties of medical practitioners. And who are the lecturers? Why, persons who, in point of legal professional qualifications, possess no higher, no better claims on public confidence. Yet in the one case, a "certificate" of three months' attendance on oral discourses, delivered daily, during a single hour, is "recognised," is received as entitling the candidate to possess the license or the diploma; whilst a testimonial of attendance during "five years" at the bedside of the sick, in the dispensary, in the laboratory, and in the botanic garden, of an able surgeon-apothecary engaged during the five years not only in the ordinary duties of his profession, but in conveying instruction to the mind of his industrious pupil, is rejected with contempt and scorn, and the hospital and "recognised" functionaries command such dirty miscreants as their toad-cating hack MACLEOD, to hold up and exhibit the private practitioner to the public, as a person sho has not a sufficient knowledge of his to instruct a pupil in the mere of medicine. Notruly extortion-

of the system of "cer-

Mon ." and is th it a single benen a tendency to counteract thle disadvantages. If the gobre of our colleges and medical companies had been stimulated in the performance of their duty by a generous desire to make the path of study smooth and easy to the student,-to afford to the surgeon in private practice a just reward for his assiduity in cultivating the minds of his pupils, and to maintain the public health on a secure basis .- every encouragement and inducement would have been held out to surgeons and apothecaries, to excite them to undertake, with promptitude and perseverance, the labour of giving the best instruction to all those students in medicine who might be placed under their roof, or within the limits of their control. If lecturers, by the mere habit of lecturing in a slovenly and formal manner, can acquire in the course of years a knowledge of the science of medicine which is not enjoined by persons similarly engaged, surely common sense would suggest the propriety of adding to the greatest possible extent to the number of teachers, and of widening the surface whereon they might exercise their beneficial labours. It is not our object to contend that A or B is qualified to instruct a student adequately in the whole vast field of medical science; but we contend that every private practitioner should enjoy the right of obtaining for his pupil an examination before those men who have been empowered by Parliament to protect the public against the evil practices of incompetent or unqualified practitioners. When our dastardly and contemptible opponents can show that such a privilege as this ought not to be placed under the control of surgeons and apothecaries engaged in general practice, it is possible that the revilers may cease to disturb their virtuous feelings, by discontinuing a practice with which they have long been so familiar, that of a wholesale traffic in falsehood.

It is, however, after all the conly amusing but delightful to witness the shifts to which the corruptionists, their abettors, are driven to sustain their tottering cause even for only a few months longer. All their sade deavours, however, will prove unavailing the flat of public opinion has gone forth against the extortioners. The entire system of corruption has been exposed. Within a few months from this date it will disappear for ever, and,—

" Like the baseless fabric of a vision, Leave not a wreck behind."

In the parish of St. Clement Danes, a smart contest is now existing for the office of parochial surgeon. There are two candidates for the situation, Mr. Cosgreave, who has held it for nine years, and Mr. DUNN, a surgeon who offered himself as a candidate on a former occasion. The claims of Mr. Cosgreave are founded upon past services; those of Mr. Dunn rest on the principle that the office of parochial surgeon is one of honour, and not one of emolament, and that it should not be permanently held by one individual, whatever his merits. -whatever may have been the value of his labours. From this doctrine, which is advocated so zealously by Mr. DUNN and his friends, we dissent entirely; nor can we conceive that one more injurious to the interests of the poor, or more derogatory from the character of the profession, can be advanced by a medical practitioner. We take the question, therefore, between the two candidates-regarding both of them as eligible in point of medical rank and skill-to stand simply thus, -that if there be no wellfounded complaints, no instances of culpable neglect, no charge of want of ability in the treatment of the sick poor, to be sustained-proved-against Mr. Cosgreave. that gentleman, upon every principle of equity, of justice, and of good policy, ought to be reappointed to the vacant office. On the other hand, if accusations, such as we

ference. Is it, we would ask, to be tolerated, that the sick poor of our parishes are to be made the mere stepping stones to easinence or wealth? Are they to be made objects of sport for the gratification of ambitious feelings? Really, on reflection, Mr. DUNN must himself perceive that he has advocated a doctrine which strikes at the very happiness and well-being of the poor, and that he himself, at the end of a year of excessive labour and devotedness to the cause of the afflicted applicants for parochial aid, may be made the victim of a principle which we are certain he has thoughtlessly advocated in the present contest. If Mr. Cos-GREAVE is to be rejected in the absence of sustained complaint, why is any other officer to be permitted to continue in his post? If fidelity of service be no security for permanency of occupation, then, indeed, we have mistaken reform for change, improvement for alteration. It is said that the contest is a party one, and that Mr. COSGREAVE is supported by the Tories. The medical treatment of the sick poor, a party question! The announcement is too frightful to dwell on. Humanity and faction have no sympathics in common. If the reformers of Saint Clement Danes are desirous of proving that their love of alteration is more ardent than their desire for emendation, they will support Mr. DUNNin the absence of established complaints against the claims of Mr. Cosgrave. But if, on the other hand, they are auxious to sustain their character for humanity, and of showing the public that they are determined to promote the well-being of the suffering poor who are committed to their charge,that they are above all considerations of angry party politics,-they will, at the poll, support that medical officer who, during nine years, has discharged his dut parish and to the afflicts manity, industry, and

ACCOUNT OF THE

PARISIAN INSTITUTIONS FOR MEDICAL EDUCATION.

SESSION OF 1835-36, COMMENCING IN NOVEMBER 1835.

THE LANCET for the present year, we gave, of containing from 1500 to 2000 persons. according to our annual custom, an account! The instruction of the medical youths in

place amongst them every year. In Paris' tique, there is but one school of medicine, the

In the first number of the Volume of faculty are delivered, and which is capable

of the different schools of medicine attached, Paris is confined, in a great measure, to the to and near the London hospitals. The twenty-four professors who compose the approach of a new session in the school of school, no private teacher being permitted Paris, now induces us to lay before our read- to lecture, without express permission obers a review of the inclical institutions tained from the minister on the recommen-which are devoted to the instruction of stu-dation of the dean of the faculty. Dissecdents in the French capital, for the benefit tions are not permitted to be prosecuted of those gentlemen who may intend to visit in any part of Paris, except in the two esthat capital for the purpose of completing tablishments devoted to anatomical purtheir professional education as physicians or poses, which are attached to the justitution of the faculty. However, the authority to In London the number of nuclical schools teach is granted readily to any respectable is at once very great and extremely per-imedical man; and students, as we shall plexing. With each hospital is incor- have occasion to notice by and by, may reporated a school, and near to it are nu- ecive abundant private assistance in their merous teachers possessing theatres or anatomical studies, at the two immense estarooms for lecturing extensive changes taking ; blishments of Clamart, and the Ecole Pra-

'Faculté de Medecine de Paris," This body! The medical session in Paris commences is composed of a dean, two assessors, and on the first of November, and terminates on twenty-four professors, who are all chosen the first of September. It is not divided, as by concours. The locale of the faculty is a in London, into Winter and Summer Sesnandsome quadrilateral building, which con- sions, but the greater part of the professors mins a museum, a library, cabinets of botany, continue to lecture during the whole season. surgical instruments, and every other require The following is a list of the professors of site for instruction, and an immense amphi-; medicine, and the subjects upon which they heatre, in which all the lectures of the lecture &c.

FACULTY OF MEDICINE-SCHOOL OF MEDICINE.

(M. Cruveilhier (physician to Salpetriere, and) I	cctures delivered
Anatomy	gratuitously to
Anatomy)	the audience.
'hysiology M. Berard	Ditto.
Jedical Chemistry M. Orfila	Ditto.
dedical Physics M. Pelletan	Ditto.
lotany M. Richard	Ditto.
harmacy M. Deyeux	Ditto.
Ivalène M. Desgenettes	Ditto.
M. Andral (physician to the Hospital La) Pitie) and M. Dumeril	Ditto.
M. Marjolin (surgeon to the Hospital Beau- ion) and M. Gerdy (surgeon to the Hospi- tal St. Louis)	Ditto.
M. Richerand (surgeon to St. Louis)	Ditto.

-	T	Contract Co.	T automor J.N 1
	Medical Pathology and Therapeutics.	M. Broussais (physician to Val de Grace)	gratuitously to the audience.
	Legal Medicine	M. Adelon	Ditto.
	Midwiferv	M. Moreau (accoucheur to the Maternite)	Ditto.
	•	MM. Fouquier and Bouilland (La Charité) 7	
	Clinical Medicine {	MM. Pouquier and Bouilland (La Charité) MM. Chomel (Hotel Diese) and Rostan (Ho- pital Clinique)	Ditto.
	Clinical Surgery {	M. Cloquet (Hopital Clinique), M. Velpeau ((La Charité), M. Roux (Hotel Dieu)	Ditto. 3
		The fourth professorship is yet vacant, hav-	
		ing become so by the death of Dupuytren.	
		The last seven-named clinical lecturers do	
		not "profess" at the Faculty, but at the sc-	
		veral hospitals to which their names are at-	
	Clinical Midwifery	M. Dubois (Hopital Clinique)	Ditto.

Clamart, near the Jardin du Roi, situated about twenty minutes walk from the School of Medicine. This magnificent establish- courses of lectures on operative surgery, ment is composed of four distinct buildings, which last for four or six weeks. or dissecting-rooms, each being separate perform each operation at least two from the other, very lofty, and possessing pay only one pound for each every accommodation that is necessary for Having already given the purposes of dissection. Each room contains (as well as we can remember) about notice such particular twelve tables, and there is abundant accommodation for between two hundred and fifty and three hundred dissectors. Pupils are dents are the Hotel Dies,

The lecturers on the different branches admitted, without distinction of country or above enumerated, commence their labours claims, to the amphithenters at Claimst. The name of each is taken down in register by one of the demonstrators. Five pupils nue to follow each other without interrupmust join together for the exploration of
tion until five o'clock in the afternoon. The
each subject, and the only preference shown amphitheatre is open to every student who to any one is in favour of the internes or chooses to become an auditor of the lectures the externes, who have the first choice It is understood, however, that each French of bodies at the daily distribution, which student has taken out an "inscription, takes place at twelve o'check. The price of which he receives in the form of a card, at Canacil, and amounts to about 4s. 2d. for a cost of forty francs; and that foreigners every unopened body. For those which have have received a "card of admission," which already been examined in the hospital, the is afforded gratuitously to them, on the cost is about half-a-crown. By a recent representation of a diploma in medicine or gulation, the medical efficers of the hospitals are forbidden to open more than one surgery, whother French or foreign. How-third of the patients who die in their wards. ever, as the exhibition of the entrance. This rule, which is not very strictly observed, ticket is never required, except for admission to the library, or sometimes for admission to the library, or sometimes for admission to the misseum, the whole of the lectures at the School of Medicine may be respectively better to who die in the various Parisian garded as essentially public and gratuitous. hospitals fand the practice of claiming the There are two establishments for the pro- bodies does not prevail to any great extent) secution of anatomical studies connected are carried to Clamart and the Ecol. Prawith the faculty of medicine. One is at the tique, the supply of subjects at the amphi-Ecole Pratique, in the Rue de l'Ecole de theatres of those places is most abundant, Mcdecine, within a bundred paces of the particularly so near the close of the session, school. The establishment contains four Two prosectors, and several sub-prosectors, large dissecting-rooms, very lofty, well or air a, are attached to the amphitheatres, but aired, and well lighted. The building was we cannot say that the pupils obtain much originally intended for the exclusive use of their assistance, as they are never to the pupils of the Ecole Pratique; but any be seen in the rooms. Those who require student who has an inscription, or any aid generally pay a small sum for disforeigner without one, may obtain access to seeting with an interne, who undertakes to it with ease. The other establishment is at supply the student with subjects, and afford him demonstrations. During the session the prosectors are chiefly occupied in giving The pup

> of the Parisian hos diately connected with me The Hospitals most frequent

hospitals), the Hopital des Enfans Malades, hospital is performed by eleven physicians, the Venereal Hospital, and the Hopital St. three surgeons, nineteen internes (corre-Louis.

THE HOTEL DIEU.

city in which the students generally reside. such other particulars as it is necessary for It contains one thousand beds, distributed in lus to mention.

Charite, L'Hopital de l'Ecole (the clinical nineteen large wards. The service of the sponding to our dressers), and 84 externes, and students in pharmacy, who act as anothecaries. The number of patients received during the year averages about seven-This hospital is situated at a distance of teen or eighteen thousand. The following This hospital is situated at a distance of table exhibits the days and hours on which about ten minutes walk from that part of the medical officers visit the hospital, with

Surgeons,	Lecture Days.	Hom3.	Fees.	
M. Roux M. Sanson M. Breschet	Clinical Lecture every day except Thursday	7 to 8 a.m. 6 to 7 a.m. 8 to 8 a.m.	None. None. None.	
Physicians. M. Chomel M. Calllard M. Recamier M. Petit M. Magendie M. Ilusson MM. Piorry and Bally M. Guineau de Mussy M. Honoré	Mon. Wed. and Fri. — — — — — — — Clinique Tu. & Thurs.	7½ to 8½ a.m. 8 to 9 a.m. 7 to 8 a.m. 8 to 9 a.m. 7 to 8 a.m.	None. Lectures occasionally from the remainder	

during summer. In winter the time is as a lecturer, to sustain the reputation once generally one hour later. The clinical lec-possessed by the School of the *Hotel Dieu*, tures commence immediately on the visit of as the first surgical clinique in Europe. We the surgeon or physician.

whose practice is much followed by the a highly useful course on the application of pupils, is M. Chomel, and it is but justice to the stethoscope in diseases of the chest is say that the reputation which he has ob- given at three o'clock by an interne, M. tained as a clinical teacher is richly de. Roger, in the wards of M. Recamier. During served. The other medical wards are comparatively deserted. However, valuable of one pound, the pupils have an opportunity
information may be collected by the more of daily applying the stethoscope in a variety advanced student, in the wards of M. Ma- of thoracic diseases, under the direction of one gendie and M. Recamier, which always who is fully competent to instruct them. Sicontain many highly interesting cases, milar courses have been given at La Pitie, at Clinical surgery, formerly professed with La Charite, and at St. Louis. The operating such eclat by Dupuytren, is now taught by day for the clinical patients is Saturday; M. Roux; but the latter, though a brilliant for the other wards there is no fixed day.

The above hours are those of attendance; operator, will never, we fear, be calculated. ne surgeon or physician.

The only physician at the Hotel Dicu, the , e is entrusted to M. Sanson, and that

HOPITAL DE LA PITIE.

Physicians.	Surgeons,	Hours of Visit and Clinique.
M. Andral		8 a.m. every day. 7 a.m., clinical observations 3 times a week. 7 a.m. 7 a.m. 8 a.m., clinical lecture daily. 7 a.m., clinical observations daily. 8 a.m.

The Hopital do in Citation situated to the south of the Jardin des Plantes, about twenty minutes walk from the Ecole de Medecine, it contains more than 600 beds, and receives annually about 8 or 9000 patients. We are not aware that any fixed days are appointed the for operating at the hospital, but the student has always sufficient notice of the most important operations which are to take place.

almost advise the English student to follow any other surgeon. M. Andral making a through his service without ever making a remark: his wards are therefore more fit for those who have already completed what is called their education, than for students them. The neighbourhood of the hospital dent has always sufficient notice of the most important operations which are to take place.

on the names of MM. Andral, Lisfranc, or rue des l'ostes, &c., for from sixty to eighty Louis. The latter is the most minute ob- franks a month (from 21, 10s. to 31, 5s.). The server of disease in France, and is chiefly dissecting-rooms at Clamart are within a few followed by the English and American stu- minutes walk, while, close to the hospital, dents. M. Lisfranc has long been the most indeed on the opposite side of the street, is popular teacher of surgery in Paris, but his the Jardin des Plantes, with all its agre-

ing may be obtained at any of the pensions It is unnecessary to make any comment in the rue Copean, rue neuve St. Etienne, wards are always so crowded, that we would mens and its boundless scientific treasures.

HOPITAL DE LA CHARITE.

Physicians.	Surgeons.	Hou, s of Visit and Clinique.
Anti-Marylan services registry, as a separate to be the set of the second services as	M. Guerbois.	
	M. Guernoss.	
M. Pouquier		7 a.m., clinical bectures at the bedsalde of the patient.
M. Maury		Ditto.
	M. Velpeau	7 a.m., clinical lectures daily.
M. Ruhier		
M. Rayer		
M. Bouillaud		7 a.m., clinical lectures three times a week.

skin are also well worth attending.

months. It contains more than 700 beds, o'clock.

The number of patients contained in this receives annually from 5000 to 6000 inhospital amounts to about 500; its annual patients, and affords relief to more than population is from 5000 to 6000. The 23,000 out-patients. The clinical lectures of operating days still continue, we believe, as M. Alibert and Biet are followed by all in the time of M. Roux, to be Tuesdays and those students who desire to become ac-Saturdays. Students who propose attending quainted with the various forms of cutaneous the cliniques of M. Velpeau or M. Bouilland disease; while the lectures and practice of may dissect at the *Ecole Pratique*. The M. Lugol afford numerous advantages for consultations of M. Rayer on diseases of the the study of scrutula. Students who follow in are also well worth attending.

This hospital is the next largest in Paris near the school of medicine, and the anato the Halel Dieu, but its situation, which is tomical amphitheatres, will perhaps find it at the northern extremity of Paris, renders most advantageous to follow merely the attendance on its practice very inconvenient clinical lecture which M. Alibert gives once for the student, except during the summer a week, on Wednesday mornings, at 10

HOPITAL ST. LOUIS.

Physicians.	Surgeons.	Hours of Visit.		
M. Alibert	-	10 a.m. Monday, Wednesday, Friday, and a		
M. Biet		Clinique every Wednesday. 9 a.m. Clinical lectures 3 and 4 times a		
	M. Gerdy	learn Dollar . Stranger		
M. Emery		8 a.m. Daily.		
<u> </u>	M. Jobert	8 a.m. Daily.		
M. Lugol	_	8 a.m. Daily. 8 a.m. Daily. 9 a.m. Clinical lectures of during the summer.		
_	M Richarond	Attondo some imanidado.		

THE VENEREAL HOSPITAL.

Surgeons .- M. Cullerier, M. Ricord, and M. Mance ; attendance at 7 a. m .- Clinical r lectures occasionally given.

This fine hospital, containing more than 600 beds, for patients of both sexes, is situate in the Rue des Capucins, not very far from the School of Medicine. It affords the best opportunities for the study of the venereal disease; and although the number of students admitted to the practice is limited, M. Ricord, whose politeness to foreigners is proverbial, grants the latter every indulgence in his power. Thursday, being a kind of idle day at the great operating hospitals, is the day which is generally chosen by strangers and students for "a visit to the Venereal." M. Ricord from time to time publicly examines the whole of the female patients under his care, with the speculum, when a "turn up" takes place which visitors would certainly see in no other country.

HOPITAL DE L'ECOLE.

This small hespital, which has just been finished, occupies one side of the Place de l'Ecole de Medecine, immediately opposite the Ecole itself. It contains about 150 beds, distributed amongst medical, surgical, and obstetrical nationts.

Physician .-- M. Rostan; Clinical Lecture three times a week at 7 a.m.

Surgeous, - M. Cloquet; Clinical Lecture three times a week at 7 a.m. - M. Dubois; citto at 8 a.m.

This hospital is specially destined for the instruction of students who have entered on their "fourth year," but every student is requested to attend the practice without discrimination. The clinique of M. Rostan is, perhaps, one of the most instructive that the student can follow. Not content simply with remarks which are fall of interest, delivered at the bed-side, M. Rostan frequently selects a pupil from amongst the crowd which follows him, requests him to examine the patient, and requires a diagnosis of the nature of the disease, and a plan of treatment, with the reasons for its adoption. Thus a regular consultation is held in the presence of the pupils, who become accustomed to form a judgment for themselves, and are not induced or compelled, as is too shen the case in cliniques, to adopt impliopinions which are given out by

> conchement, which is of M. Paul Duto French students upon their fourth year of

admitted. We are not, nowever, to accuse the hospital functionaries of selfishness on this account. The number of beds appropriated to accouchements, in this small hospital, is not sufficient to satisfy the wants of French students themselves. Foreigners cannot, therefore, complain with any justice. It is right, however, to mention that all students (a circumstance which is not generally known) are permitted to attend the clinical lectures of M. Dubois, and to follow his visit through the wards, where he frequently makes some clinical observations, the only privilege reserved for the French student being that of delivering the women, and practising the toucher.

We may here remark, en passant, that midwifery is the only branch of medicine which is not well taught in Paris. Let no foreigner who desires to pay special attention to this branch of the science, think of remaining an instant in the French capital, but proceed at once to Heidelberg, or, still better, to Vienna. There are, indeed, mmerous private teachers of midwifery at Paris, who give a course of lectures for five or six weeks, during which they deliver two or three women in presence of the class, and demonstrate the positions of the feetus and the mechanism of labour upon what are called "mannequins," i. c. a stuffed pelvis, with an artificial fortus. The pupil also has an opportunity of practising the toucher a certain number of times during the course, but as the same women are "touched" in nearly all the theatres, and frequently we believe by several different classes in the same evening, the state of parts is such that very little can be learned from them.

HOPITAL DES ENFANS MALADES.

Physicians.- M. Jadelot; at 10 or 11 a.m.; very irregular. M. Guersent; at 9 to 10 a.m. M. Baudelocque; at 8 to 9 a.m. M. Bouncau: ditto a.m.

Surgeon .- M. Baffos ; at 6 to 7 a m.

This hospital contains 560 beds, about 500 of which are appropriated to medical diseases. The service of the hospital is divided into four parts; viz: the acute discases of boys; the acute diseases of girls; the scrofulous patients, and the skin discases, principally comprising the itch. Each physician takes a division for six months, at the expiration of which he exchanges it for another. The great distance of this hospital from the school of medicine is, perhaps, the reason why it is comparatively described by the students. It is a rarity to see the physicians of the acute wards attended by more than four or five pupils; however, it affords a good opporiduates in medicine are not tunity for studying the diseases of children,

some difficulty in feeling the stone, but of one or two days. These attacks occurred of the triple phosphate. The first stone was variable; headache. about one inch and a half long and half an rather more than eleven minutes.

Mr. Liston afterwards remarked that; and placed her on middle diet. the second stone was so situated that he 27. She complains of pain in the left found it impossible at once to grasp it. The shoulder shooting down the inside of the fact of the patient's not having been able to as in to the elbow; there is also slight pain retain any urine accounted for the difficulty when pressure is applied, upwards from in seizing and disentangling the last stone under the diaphragm. The pain in the from the fundus of the bladder. No parts, stomach is undiminished. had been cut beyond what was absolutely 29. The excessore was increased to day to necessary, and the patient had lost less than four minims: the pain in the shoulder and

three ounces of blood.

removed to-day; urine getting clear.

open the bowels, which operated most un-ago she was attacked in the following man-expectedly in a copious manner, and left ner; her skin became very hot, succeeded the patient in a very weak state. Stimu- by a profuse perspiration, which was follants were at once exhibited, but notwith- lowed by cold shiverings, which, after a standing their employment he gradually shorttime, gave way to the natural temperasank, and died at an early hour this morning. We can only remark that eighty years is not an uncommon age to close the life of a patient whether near or soon after an oneration, which in this instance was admirably performed.

GASTRODYNIA TREATED WITH CREOSOFF.

Dr. Elliotson, in his last lecture, referred to the case of Catherine O'Keefe, aged 47, who was admitted into the hospital under his care on the 25th of August last. She stated on her admission that she was married, and the mother of four children. She has not menstruated since Christmas. She began about nine years She is now almost ago to experience severe spasmodic pains and the epigastrium in the stomach, occurring in paroxysms of pressure. Her tongue is two or three hours duration, and at intervals good, the prize 70, and full

having quickly afterwards succeeded in his invariably a few hours after dinner. Blistersearch, he introduced a small forceps and ing, bleeding, and the administration of grasped a calculus, which was so friable that mercury to salivation on several occasions, it broke in the blades of the instrument; a had produced no relief from her sufferings, portion was removed immediately, the re-mating parts in the course of a few seconds. On introducing the searcher, another stone, of larger dimensions, was detected, and dieal treatment. About nine months just attempted to be grasped by the forceps she began to experience pain, and a sensaseveral times, but without success, as it tion of weight between the shoulders. She kept slipping from the hold of the instru- was also troubled with sour eractations, and ment. Both the small and large forceps a burning pain along the e-sophagus. On were several times employed, and a firm her admission she was quite free from pain grasp having been obtained with the latter, when the stomach was empty, but her sufthe stone was about to be removed, when ferings commenced as soon as she had the incision was found to be too small to taken rood. When the pain attacked her, allow its passage outwards to be effected, she could only be on her back, in which The operator now introduced the knife and position, indeed, she always was most comdivided the right side of the prostate, when fortable. The abdomen was very tender to the stone was immediately removed; not the teach. The pain was always relieved more than two tablespoonfuls of blood were; by hot ingesta; her pulse was 60 and small; lost in the operation. The stones were of her tongue covered with white for; the the lithic-acid species, with an outer coating bowels regular, the urine clear; appetite

Dr. Elliotson thought the case a fainch broad; the other was about two inches your able one for the administration of crelong and one broad. The operation lasted osote; he therefore ordered her to have two minims of that medicine every six hours.

arm is relieved; that in the stomach re-12. Gaing on very comfortably; catheter mains the same; bowels regular; pulse 80. Sept. 8. Since the last report the pain has 15. Some medicine had been given to occasionally been very severe; a day or two ture. To-day the pain in the stomach is more severe; she has scarcely any rest at night; her apactite is gone. Palse 78. Dr. Elliorson considered that the medicine had not had a fair trial. It had been gradually increased to eight minim doses, and he now ordered ten minims to be taken every four hours.

17. The pain is less. She has noticed a considerable increase in the quantity of her urine since taking the medicine. She now takes fourteen minims every four hours, and oftener if the pain rotarns. She deeperience much benefit taken during the pain.

25. Has been ing

Oct. 6. Her dose of crossote has been gradually increased to eighteen minims, with decidedly good effect. Indeed she is so much better as to be placed on the books "s " cured," but there is occasionally a very slight pain in the stomach.

Dr Elliotson remarked that this was a case which was not likely to be relieved by blistering, bleeding, or mercury. Aromaties, be observed, were generally employed with benefit, and pressure usually produced relief during the paroxysm. There was no doubt that the pain was exceedingly severe in these cases. He had never heard of a case in which an attack was fatal, Lut he thought such a result possible. As to the six weeks since she took some medicine, remedy administered, of course it would not be necessary to carry it to the extent in supposed to be balsam of consiba, three all cases to which it had been employed in the present inscance.

CLINICAL LECTURES.

fatory address was unnecessary, the lectures and in the commissure between the hymphae are much enlarged, not having been discontinued during the sunmencing, a course. Twenty years ago, when been pregnant three months thineal lecture on medicine or surgery was the sluggly ulcerated parts washed with delivered in the metropolis; whilst in comtinental schools, and in the once ecicbrated Magnesia Dig to be taken twice a day, school of Edinburgh, the greatest attention 12. There is much less discharge, an a wonderful change had been wrought skin hot, and bowels confined. here. Papils had been taught to appreciate clinical instruction, and the medical officers the alcerated parts. of the hospitals many of them probably mand, so that at every London Hospital, dominal tenderness on pressure, which aplarge and small, clinical lectures were at longue and pulse are natural. To take the least promised, both by physicians and surgeons. At this hospital, not the smallest, the students might rely on the promise being redeemed. He (Mr. L.) had for a series of years been engaged in delivering clinical lectures before he was requerted to long been partial to this kind of teaching, and as it happened that he was not otherwise engaged at this school, they might be that he would give, at the least, his clinical lectures.

es are given at this unctuality.

LOCK HOSPITAL.

CASES OF GONORRHEAL DISCHARGE, ACCOMPANIED WITH CONDYLOMA AND CONDYLOMATOUS ULCERATION.

CASE 1.-Amelia Doubleday, atat. 22, was admitted March 13th, under the care of Mr. WALKER. She has been married five years, and has two children. She has had her present complaints for three months, which began with scalding, and were followed in the course of a week by discharge and sores, which have lasted for three weeks. About times a day for three weeks, which did her no good.

She has now a profuse thin yellow discharge from the vagina, there is a superficial gray sloughy surface of ulceration covering the entire perincum, the opposed sur-In commencing the clinical lectures for faces of the nates, the integuments, labia, the session, Mr. Liston remarked that a premer, and he was now continuing, not com- Her health has been very good, and she has he also was a pupil in London, not a single deted to take a Senna Draught, and to have

15. Washed Sulphur 3j; Carbonate of

19. There is much less discharge, and the was bestowed on that admirable method greater surface of the alteration has healed. of medical instruction. Of late, however, 21. She complains of headache to-day; Draught.

22. Black Lotion and Linseed Poultice to

23. Vespere. The abdomen has been very reluctantly enough) had yielded to the de- much enlarged to-day; there is great abpears to be dependent upon hysteria. The Chalk and Catechu Misture and a Rhubarb and Magnesia Draught, with ten drops of Tincture of Opinan, varly to-morrow morning. Omit the Washed Sulphur.

24. The draught has given her great relief, the bowels not having been painfully acted upon; there is much tenderness of the fill the situation of surgeon here. He had abdomen, but no pain. The tongue is furred, there is headache and thirst, and the pulse is natural.

She now took Calonel and Opium, which she continued with much beaufit for some time. She then took Phanmer's Pill and Sursaparilla, until

re given at this May 8, when "the report in the case ek, two medical, book" states her to be much improved, and that the Plummer's Pill was discontinued on account of headache. Some hemorrhoidal which have troubled her have

21. The gums are tumid and vaccular and very tender; there hales a white slengthy very tender; there were a wante part of ulcoration on the anterior part of each tonsil. This was ordered to be to clear by the Nitrate of Silver.

The ul 29. The throat is quite well. tion over the labia, perincum, &c., is quit

healed.

From this period up to the time of her leaving the hospital "cured," no event occurred to recard her perfect recovery. She was delivered of a male child the day after our last date. The child had a slight erysipelatous blush over the right side of the neck and ear, which was removed by slight purgation with castor oil, and on the 24th June she went out quite well.

Case 2 .- Sarah Blake, ætat. 19, admitted, March 27, under Mr. WALKER. Her present symptoms came on about nine weeks since, with gonorrhoal discharge, scalding, &c. She has had condylomata for a period of five weeks. She has had only one connexion, nine weeks since. There is at present a profuse, thick, dark, yellow discharge from the vagina, with excoriation of the the outside of each labium, between it and the thigh; there are some also on the perineum and nodes; some are in an incipient, and others in a full state of ulceration. The right tonsil of the throat is enlarged, and covered by a slight superficial ulceration. Her general health is good, the bowels are confined. The catamenia are regular, and commenced at fourteen years. A Senna Diluted Solution of the Acetale of Lead to be applied to the parts ulcerated.

April 3. The vaginal discharge is less in quantity, but there is much excoriation of the thighs, the perincum and nates, going parts, with some ulceration on the right side of the orifice of the vagina. The right tonsil is less swollen; the ulceration covering it is healed; the bowels are quite regular. Powdered Cubebs 5ij four times daily.

12. The discharge has rather increased in quantity; the ulcerated surface has healed, but there is still some excoriation around the meatus urinarius. The right tonsil is looking better, and has a more healthy appearance; there is some vascularity about the fauces. The medicines were ordered to be continued.

17. Catamenia are present; the medicines are ordered to be intermitted; in other respects progressing favourably.

24. The vaginal discharge has been more profuse since the cubebs has been omitted, and she complains to-day of some headache. There is intertrigo in the commissure behind each labium, with considerable vascularity and excoriations of the vagina. The Powdered Cubebe to be resumed in 3ij

completely disappressed under the Confection deser three times daily. The vagina to be injected with a Diluted Solution of the Acc-

tate of Lead in the proportion of gr. lv to 3j.
31. The discharge has very much improved; there is still some vascularity, but ses exceriation of the vagina. The Pose-The debut was ordered to be omitted, and the was ordered to be omitted, and the fastion of Cubebs used instead, of 31 to be being water, as an injection.

The discharge has become much worse since the internal use of the cubebs

has been discontinued. The bowels are confined; the tonsils have nearly regained

their natural size.

10. The symptoms remaining much the same, she was ordered the following vaginal injection: - Muriate of Ammonia Siij; Water 0j: to be used frequently.

15. The injection has been of great service, the discharge has nearly ceased, and what remains is of a pale-yellow colour.

21. The discharge has remained stationary for a few days. She complains of headache and loss of appetite. The injection to be increased in the proportion of 388 to 0). Calomel and Antimonial Powder, of each two grains, to be taken to-night at bed-

29. On examining the vestibulum there orifice. The condylomata are situated on is some slight vascularity, but all trace of discharge is gone. She was discharged

Case 3.-Bathia Mitchell, atat. 24,admitted on the same day with the above patient. Her complaints commenced with discharge and scalding, which she has had for four months. She has had condylomatous ulceration for three months. Her throat has Draught to be taken immediately, and a never been affected; there is at present an extensive condylomatous ulceration occupying the labia, which are thick, hard, and swollen, this extends also to the inside of behind the anns; there is a profuse thick yellow discharge from the vagina; the right tonsil is enlarged and slightly ulcerated; the health is quite good; the bowels are confined; the catamenial discharge, which commenced at sixteen, is regular; the same preliminary treatment of a purging Senua Draught and the Black Lotion to the ulcerated parts was adopted, and on the

29th, she began using the Oxymuriate of Mercury Lotion in the proportion of gr. sa to 3j, and took Washed Sulphur 3j twice

April 1. She was ordered to take the White Mixture Jiss * every night at bedtime, and to go on with her other internal and external medicines.

3. The condylomata many of the ulcerations ulcers occurred in

* The While

use Pall her medicines.

8. The tonsillar ulceration has healed, the white pustular appearance upon it resembles a warty excrescence.

12. The condylomata are becoming flat, thickened, and have a bluish appearance; the vaginal discharge is diminishing; the white holy on the tonsil is irregular upon was ordered to be applied to the ulcers, and its surface, and hard to the touch.

19. The condylomata are nearly all gone, injection. leaving behind some few spots of discolora-

tion. To continue her medicines.

21. The wart on the tousil presents the creased in size.

24. She is convalescent, and is to leave the hospital.

nal discharge, which has lasted three weeks. and some condylomatons alcerations for two weeks; the orifice of the vagina is vascular, and there is slight swelling and tomefaction of the left labium; there are numerous small circular condylomata, aggregated, but not confluent, over the region of the perincum, and on the inside of both nates; there is superficial ulceration, approaching to excoriation, of the skin around. The throat is preternaturally vascular, but she does not complain of any difficulty in deglutition. The right tonsil is enlarged, and bears the same warty growth (but smaller in size) alluded to when she was formerly in the hospital. Her general health is good, the catamenia are regular, and she has never been pregnant. She was purged with Calomel and Rhubarb, and Senna Draught, and the Decoction of Tormentilla Bark was ordered to be used as an internal injection and an external application. There was, however, no Tormentilla Bark in the hospital, and the Saturnine Lotion was ordered instead. She proceeded with this for some time, and on going round the wards one we learnt from the nurse that she her legs and was off.

> fr. WALKER. Service Service

matous swelling, and were different from the common condylomatous ulceration, as being charge two with a loss of substance, and presenting a depressed surface. The vaginal discharge is white in colour and small in quantity. The ulceration on the tonsil is white ulceration on the tonsil is white clevation, having the appearance with the commissure between the not the entire character, of a pustual the sight labium and thigh, with much swelling howels are regular. She is to contaminate the standard to the nerineum and notes. parts, extending to the perineum and nates. Her general health is good, but the bowels are much confined; both tonsils are enlarged, more particularly the right one, around which there is some inflamination and ulceration; the catamenial discharge has been absent three months. Black Wash the Acetate of Lead Lotion to be used as an

April 3. The vaginal discharge is less, and is white in appearance; the scalding in micturition is gone; the condylomatous ulcerasame appearance; it is situated on the upper tions are nearly healed; the inflammation of and inner part of the right tonsil, which is the labium has subsided, leaving behind much enlarged, but not increased in vascu- much thickening and induration of parts; larity; the left tonsil is also slightly in the bowels have been regulated by the hospital Senna Draught; on the surface of each tonsil there is a superficial spot of yellow ulceration; there is an ulcer of an oblong She was re-admitted again with many of form on the inside of the left labium, it is her old symptoms on Oct. 8th. She had red and granular, and the edges are slightly been on the town for the last three months, elevated. This has formed since her ad-She has now an abundant thick yellow vagi- mission into the hospital. Mr. WALKER ordered the Black Wash to be applied to it.

12. There is to-day less thickening and induration of the labium. The condylomata have been healed some days, but have left behind them a blue thickened appearance of the skin. Both tonsils are enlarged and swollen, and covered with superficial white ulcerated surfaces; the ulcer on the labium is less inflamed, but still florid.

19. The tonsillar and labial ulcerations present much the same appearance as at the last report. The Red Lotion was ordered to

be applied to them.

24. The inner labial ulcer is much in the same state; the tonsils (particularly the right one) are larger; the general ulcerative surface is healing; some small open patches arc still left.

30. The ulcers are looking better, the margins are tumefied. The Nitrate of Silver was ordered to be applied to them.

May 8. The inner labial ulcer is nearly healed; there is much vascularity of the vestibulum; the thickening surface left by the condylomata is nearly gone. The right tonsil is much enlarged, and bears some slight ulcerative marks upon it. The yellow vaginal discharge continues. The Solution of the Acetate of Lead gr. vi to 3j, to be stat. 18, admitted used as a vaginal injection. She continued ages under the to lose many of her bad symptoms, and the report on the

*wn four months; 29th was, that the white ulcerative ap-

pearance on each trail was gone, but that appearance. Her medicines were ordered there was much pain on degletition. The to be discontinued, and on the following day labial ulcer is improving under the occasional use of the Warate of Silver. The catamenial discharge has not appeared for five months. To continue the use of her medicines.

Mr. Wardrop's work on "Blood-letting" will be published on Monday next.

June 4. The tonsils have now lost all trace and the surface of ulceration, and present their normal appearance. The vaginal ulceration has healed, and the surface (with the exception of an 6st, line 50, read endeavours. Page 72, col. 2, line is presented to the surface of the surface of the surface (with the exception of an 6st, line 50, read endeavours. Page 72, col. 2, line is presented to the surface of t increased vascularity) presents a healthy 26, rase the not.

METEOROLOGICAL REPORT.

AND THE PARTY OF T

(Extract from a Meteorological Journal kept at High Wycombe.

Lat. 51° 37' 44" North, Long. 34° 45" West.)

Days.	Therm	Thermometer.		Barometer.		Wind.	Weather.
,	Highest.	Lowest.	ilighest.	Lowest.	lus. Dels,		
Oct. 5 6 7 8 9 10	58.25 61.25 57.75 58. 50. 42. 47.50	35.50 38.50 44.75 41.25 41.50 36.25 33.	.69 .23 28.95	.46 28.80	0.05 0.2875 0.2625	S.W. W.	Fine throughout the day. Fine throughout the day. Dull marning; afterwards fine. Some rain, but generally fine. Rain morning and night. Frequent rain during the day. Fine throughout the day.

Oct. 14, 1835.

W. JACKSON.

Thermometer .. Highest .. 76,50 .. the 3rd and 4th. Lowest .. 36,25 ...

Mean 53,02708.

.... Highest .. 29,95 .. the 2nd. Lowest .. 28,87 .. 30th, Barometer

Mean 29,56233.

Number of days of rain, 19. Quantity in inches and decimals, 4,43125.

Winds .- 1 East; 5 West; 0 North; 12 South; 1 North-east; 7 South-cast; 2 Southwest: 2 North-west.

So much rain has not fallen in September since 1829, and the mean of the barometer was lower than at any time since 1831, while the maximum was below that of any period in the same month during the last twelve years. The month was colder than that of September 1834, and the mean temperature was below the average of the last twelve years. Thunder was heard on the 9th, 23rd, and 26th. On the two former days lightning was seen. On the evening of the 9th, the most brilliant Aurora Borealis which has appeared here since the 7th of January 1831 was observed; - the whole N.W. out the heavens was illuminated by a pale yellow light, from which, ways of scolour shot forth, extending beyond the zenith. These appearanges of nearly two hours. On the 13th, the Aurora was against a red tint, and reached nearly to the zenith, but we continue so long as on the 9th. The Wind on both occasion blew freshly. These phenomena were succeeded by rain.

LANCET.

LONDON, SATURDAY, OCTOBER 21, 1835.

§1835-36.

PATHOLOGICAL ANATOMY.

PATHOLOGICAL Anatomy is treated in this country with a degree of neglect which can be explained only on the supposition that the importance of its study is generally unknown. We have, indeed, a few distintinguished men amongst us who labour to support the national reputation on a level with that of other European nations, but the great mass of medical men, through the imperfect precents of their teachers, or an ill-founded fear of inability to acquire a sufservative" enough to deny? "Exact" we side." may never call the science, but we are satistestion of those causes which retarded the progress

has advanced, and the imperfections which are everywhere confessed to exist, depend not so much on the impossibility or the difficulty of raising medicine to an equality with the precise sciences, as on the manner in which it has hitherto been studied, and the obstacles which have been thrown in its path by those very persons who are most interested in the perfectibility of medicine. The mathematic and algebraic arts are based on fixed principles, and their elements, if we may so call their symbols, are passive and obedient agents in the hand of the professor who works them. But what would be the consequence if $x^2 + 2xy + y^2$ could say to ficient knowledge of morbid anatomy, or the unfortunate algebraist, "Nothing know under the culpable reflection that if they wou of your business. My root no longer simply tread in the steps of their fathers;" shall you work. I will depart to S. or to they will do well enough,-this class of the "L.?" Or what answer could we expect profession continue to practise medicine from a mathematician were we to require purely in an empirical manner, and would him to determine distances with but two never contribute to the advancement of the angles, and without a side of the triangle? science were each to realise the Spanish It is thus with medicine. The great mass compliment, and live a thousand years, of the community, so long as they remain in With such examples, however, before them ignorance, will resemble the refractory symas are to be found in the "high places" of bols of the square root, and counteract medicine, what have we to expect? Yet every effort at a solution of the grand prothat it is time such a state of things should blem of medicine; while those who neglect cease, and that farther and more extended pathological anatomy, commit an error anaefforts should be made to place medicine on a logous to trigonometrists who would say footing with the other sciences, who is "con- | "Give me two angles and I will find you the

The practice of medicine consists of four that a searching examination into the parts:-1. The observation of external phenomena, or symptomatology. 2. The observation of internal phenomena, or pathomable us to show logical anatomy. 3. The study of the conwith which it nexion between the signs and their causes. 4. And, shally, the administration of medicinal agents, or the speutics.

Of the four different parts, the first and last require the least degree of talent for their cultivation. Any person can observe and note down symptoms. Symptoms can never be observed too closely, for although several external phenomena may present themselves which are, apparently, of little note or value, they should, nevertheless, be observed. They are abnormal appearances, and although the relations between cause and effect may now be hid, it may at some future time be discovered. Thus the sudaming and rosy spots which so peculiarly characterize typhoid fevers, were no doubt observed many years ago, but the idea that they were insignificant phenomena led to their neglect; whereas now they form a very principal element in the distinction of that species of fever.

The administration of medicine, or the therapeutic portion of the art of medicine, does not, we have said, require the exercise of much talent. The statement demands a few words of explanation. We fear, from the nature of things, that this, the practical part of medicine, will ever remain empirical. The efficacy of medicines in disease can never be established by a priori reasoning. We can, therefore, only administer them with caution. We here speak of new medicines, and not their effects: but to advance medicine by observation of the effects of medicinal agents, it is obvious that we should previously be thoroughly acquainted with the three other branches of medicine, especially with the doctrine of symptoms, and with morbid anatomy. In a word, that our diagnosis of disease should be as perfect as it can possibly be made. Without this perfection of diagnosis, the practice of medicine, instead of advancing with the experiments made in a therapeutic point of view, will naturally retrograde in direct proportion to the number of those experiments, for this simple reason, that a confusion of results is the consequence, and that it is impossible to see time or place to dray clearly through a multitude of conflicting pils and conscient statements. Hence, next to a careful ex- ers to the subject.

amination of the patient at the bedside, th most important branch of medicine impatho logical anatomy, and we trust that some per severing effort will be made to place this to. long-neglected branch of medical educatio: on proper footing. There is not so much there of good works on pathologica mamongst us, original or translated as the want of a system of instruction, a d : constant and efficient attendance in the dead houses of the hospitals. It is unnecessary to dwell on the common observation, " that " pathological anatomy is of no use, unles: " connected with symptomatology." certainly studied with most advantage in cases where the pupil has been made acquainted with the previous history of the patient, has observed every stage of the case with care, and having become fully possessed of a knowledge of the external signs is ready to compare and examine them in connexion with the appearances which pre sent themselves after death. This is the true way of learning morbid anatomy, and we carnestly recommend the rising genera tion of practitioners to avail themselves o every opportunity of this kind which may offer. They may be assured that thus (independently of the feelings of confidence in the practice of the profession, which will arise from a consciousness of knowledge c the nature of the changes that take place is the internal and invisible surfaces, nearl as complete as of those which pass befor our eyes) the whole aspect of medical sci ence will become changed, and the profession will rise in an instant from the depths t quackery to the rank of a noble science. It our hospitals, men of tried merit should pre side, whose duty it should be to arrange th clinical cases, and examine the bodies c those who die. In some of the continent; hospitals, there are young men expressl appointed and paid to fulfil this duty, an we believe, lodged in the hospitals, who not being distracted by the cares of an enor mous practice, can devote their attention t the instruction of the pupils to an exter which non-resident hospital functionarie are not disposed to, and never will, give.

We are induced to make these remarks the present moment, under the that we could not choose time or place to draw pils and conscients ers to the subject.

ON THE NATURE OF

INFLAMMATORY FEVER.

By HENRY SEARLE, Surgeon, Kennington.

THE term "inflammatory feet when puperly applied, refers only to that general excitement which is prompted." panied by local inflammation. The terms "symptomatic," and "sympathetic fevers,"
"pyrexia," and "constitutional irritation,"
are used, synonymously, to designate inflammatory fever.

Whether inflammatory fever ever occurs idiopathically, has been a question of some controversy. It is admitted by some to occur, though seldom, in so simple a form as in the synocha of Cullen; but its appearance in the more complicated form of synochos, from which it in a few days becomes modified into typhus, is very generally acknow-ledged. It is however by no means proved that fever takes place without the existence of local disease as its exciting cause. Broussais, Clutterbuck and others, are opposed to the doctrine of idiopathic fevers; while Dr. Southwood Smith's dogma is—"There are no fevers but idiopathic fevers."

Inflammatory fever may assume a mild or a severe form. The former is simple, consisting in a general excitement of the neryous and vascular systems: the latter is more complicated, being, in addition to the local phlegmasia, accompanied by more or less disturbance of the brain, liver, stomach, or other organs; so that the worst cases may more resemble typhus than simple pyrexia.

The different grades of inflammatory fever that, in cases in which no predisposition to fever exists, even an acute inflammation is and, on the contrary, in cases in which the predisposition is very great, the slightest inflammatory disease gives rise to considerable pyrexia. It may therefore be inferred that the predisposing causes play a greater part in the production of inflammatory fever, than the inflammation itself.

The causes of inflammatory fever admit of being arranged into exciting, predisposing, and secondary or perpetuating causes.

Of exciting causes .- Those inflammatory of inflammation depends upon the texture,

are subjected to sudden compression and distention—as serous membranes, ligaments, and synovial membranes of large joints, the fauces; and the bladder-when inflamed induce more or less pyrexia. Severe and painful injuries also, as compound fractures, burns, &c., frequently produce considerable fever.

The more intense and extensive the inflammation, the more acute the fever: when, however, the pain is so acute as to overwhelm the powers of the whole frame, instead of a high degree of fever, the consequences are, as in very acute gastritis, a low pulse, and cold perspiration.

The predisposing causes are always general, depending upon the nature of the constitution and the state of the health at the accession of the local disease, and especially upon the management of the mus-

cular power during its progress.

It is doubtful whether inflammatory fever ever arises in the absence of a predisposing rause, it being essential to the occurrence of this fever, that the frame be in an excitable state, which state is inversely proportionate to the muscular power. It is true that a very severe and painful injury often produces, even in a strong constitution, a certain degree of febrile excitement in a few hours; but may not this be ascribed to the sudden, although not considerable, exhaustion of the muscular power occasioned by severe pain? This, however, is, at most, an extreme case, and does not affect the general rule-that the lower the grade of muscular power, the greater the excitability of the nervous, and vascular systems, and, consequently, the stronger the predisposition to inflammatory fever. Hunter observes that "in inflammation, when the constitution is strong, do not always correspond to the degree of then it will commonly be the most manageinflammation, since it frequently happens able, for strength lessens irritability." And according to Abernethy, "irritation is debility excited." Numerous eminent physiunattended by any constitutional irritation | cians and surgeons, however, are of opinion that there is no absolute debility when the febrile action is characterized by a frequent and firm pulse. A frequent pulse, in the absence of inflammation, is an admitted sign of debility; and the annexed table will show that the frequent, although energetica pulsation in fever, is indicative of excited action under reduced power.

That functional alliance exists between the nerves of sensation and those of motion, which, in the rising period of life, and in affections which are the most painful, are disease, places their respective powers in the most productive of fever; and the pain inverse relations. For example, very young infants possess the least degree of muscularity, and the greatest degree of sensibility ntonsity and extent of the inflam-of frame; and as the former increases, the latter diminishes, until the muscular system easily swell,-parts becomes fully developed, when they balance parts, and organs which

during that of decline for, as the muscular nervous system, as the pulse faithfully inpower declines, the sensibility aisd becomes dicates.

Impaired. Again, women and persons of In accordance with these views, the foldelicate frame, whose muscular system is lowing table is intended to exhibit a kind of delicate frame, whose muscular system is nowing tame is intended to cannot a annu or not well developed, are highly sensitive; analysis of inflammatory fever, by showing and whenever the muscular power is greatly that, according to the condition of the muscular developer that it is not condition of the muscular portionally increased. On the other hand, conditions of these two systems, the circumbenever sensation is accumulated by su-valued becomes modified, so as to correspond perexcitation, as by the influence of fear, respectively to them in the unexcited and excessive pain, &c., the muscular power is the excited states of the hody. Inflamma-lowered. Instances may, however, be nation is made the chief exciting cause, in duced, in which certain depressing agents, order to show by the pulse that inflammaas intense cold, marsh miasma, opium, &c., tory fever takes place inversely to the musdiminish both the sensibility of the ner- cular power. Miscellaneous temporary exyous, and the power of the muscular, citing causes are also given, murely toufford systems.

tween the nerves of sensation and those of verse action between the nervous and musvoluntary motion only. It does not in cular systems, showing that the nervous volve those of involuntary motion, for in and the voluntary and the involuntary contractility of the heart and arteries almoscular systems are, under certain powerways corresponds to the sensibility of the fal agents, all depressed together.

an example of temporary general vascular uritation. At the lowest part of the table This law of inverse action obtains be- are exhibited exceptions to this law of in-

CONDITION OF THE MUSCULAR SYSTEM.	SENSIBILITY	OF NERVOUS SISTEM.	LAAUPLES.	Pf fal.
Least muscularity	: :	Unexcited Excited by inflammation Unexcited Excited temperary, and last spatiation of the spatiation of the spatiation of the spatiation of the spatial of	Infants or health	t Ray of, small, m t trues, t Proposit, small, an t Self.
Considerable mus-)	Moderate degree	Universited	Robust persons in (). Data, writest py () Devia	
Ditto, anddenly re-	Very high degree.	Excited by inflammation	c Things or leb done on A	Very frequent, in () hard, recomming
Do., reduced in power	High degree	Unexcitol	Ditto, convide-cont.	i Frequent, full, a
Every degree of mascalarity sub- nued in power		Depressed by march missura, intense cold, opium, &c.	Every description of person in the first stage of idea pathic fever &c.	Smaller, weaker, a sometimes slowe than natural.

The comparative view of the various con- accompanied by any constitutional exciteshows, at the same time, how much it hinges their muscular power. upon the deficiency in muscularity, or upon the sudden reduction of muscular power.

In infants, as is well known, a mere spark of internal inflammation will ignite the whole excedingly irritable, and therefore predis-frame. In all persons except the aged, in posed to inflammatory fever-viz. whom sensibility has become much impaired, on ricty, and the habit of inchriation, and even in those to a certain extent, the predisposition to pyrexia under exciting cases due mental maxicip, and is proportioned to the deficiency in muscularity. Those, on the contrary, who are impairs the energy muscular and strong, will sometimes have tone of the muscu a phlegmasia during several weeks, un- the heart and bloody

ditions of the nervous and nuscular systems, ment, so long as they observe their usual given in this table, greatly tends to illus- regimen, and are not subjected to such trate the nature of inflammatory fever, and medical treatment as will deprive them of

> There are other circumstances besides the sudden reduction of muscular power which will render a muscular frame ex-

l'ew persons, comparatively

whole frame morbidly sensitive. The mind the feelings become readily irritated, the heart becomes subject to palpitations, and the bloodyessels sometimes allow hemorrhages to take place by transudation; the functions of the several organs of the body, particularly those of digestion, become denged. In this predisposed condition of the frame, an attack of inflammation is very liable to occur, and which will certainly induce an acute form of pyrexia, which, if not soon subdued, will be accompanied by the wildest kind of delirium, grave functional lesions, and other signs of low typhoid fever.

The habit of inchination produces a conditional kind of predisposition; for unless it be suddenly and greatly restricted, it does not generally create a predisposition to fever. The drunkard, when deprived of his accustremidous and feeble, and his whole frame irritable. If, then, he be subjected to priwill, under this exciting cause, he highly susceptible of fever, which will be characterized by greater nervous than vascular disturbance, by delirium tremcus, and generally by the absence of the hot skin of fever. The strictly antiphlogistic treatment almost invariably converts the disorder into a highly dangerous form of fever.

Secondary Causes .- During the existence of inflammatory fever, all considerable derangements of the visceral functions tend to perpetuate it, by giving support both to the predisposing and exciting causes. For example, an imperfect function of the brain and spinal marrow will prevent the due distribution of the nervous energy to the muscular system; an imperfect function of the lungs and of the other exerctory organs, prevents that purification of the blood essential to the proper function of the nervous system; an imperfect function of the digestive organs deprives the body of its due nutrition so requisite to the maintenance of muscular tone. Derangements of the visceral functions not only become secondary causes of fever by reducing the muscular power, but frequently an additional source of excitement to the whole frame, especially to the inflamed part, thereby perpetuating both the local disease and the general vascular irritation. If an inquiry be made as to the origin of these derangements, it may be mostly that system of treating inflammawich suddenly reduces all Sometimes a large der frame too near

aggravates both

This view of inflammatory fever is not becomes charged with apprehensions, and offered as entirely new, for it is universally admitted that a delicate and sensitive condition of body is favourable to pyrexia under the existence of inflammation; but notwithstanding the admission of this principle, it is most strangely lost sight of at the bed-side; and why? because the antiphlogistic is the fashionable system of treating inflammatory diseases, before which any principle, however sound, and although recognised, most fall prostrate, rather than be allowed to violate or interdict a system. so sacred as the antiphlogistic. It is, however, hoped, that by invoking a more close attention on the part of the medical profession to the real causes of inflammatory fever, that their relative importance will be more duly estimated; that it will be seen that although the exciting cause, inflammation, is a sine qua non in inflammatory fever, yet tomed stimulus, is deprived at the same time state the predisposing are, in most instances, of his power, his muscular system becomes the causes which have the greatest influonce in the production of fever, and, therefore, that the treatment should be so adaptvation during an attack of inflammation, he ed that, while attempting to remove the exciting cause, it should not, at the same time, he calculated either to increase or to produce the predisposing causes of inflammatory fever.

INTESTINAL OBSTRUCTION

FROM

RAW WHEAT.

To the Editor of THE LANCET.

SIR,-Permit me to transmit to you the report of a case, wherein a fatal result was near occurring, from a habit on the part of the patient of eating raw wheat. I am, Sir, your obedient servant,

J. L. M'CARTHY, M.D. Macroom, October 11, 1835.

On Thursday, the 8th instant, I was sent for to visit John Leary, atat. 35, living at Toames, three miles from hence, a steward in charge of a farm belonging to a gentleman of the name of Penrose. I found the man in bed, labouring under the most agonizing pains, which he referred to the anus, rectum, and loins. He was bathed in sweat; his countenance expressed the greatest anxiety, but he suffered no headache nor delirium. His tongue was coated with a thick white fur, but moist; there was no affection of the chest or of the respiratory faculties, nor any complaint of the stomach, but he had much thirst, urgent desire to urinate, and evacuate the rectum, without accompanying ability to effect either. The abdomen felt quite soft on pressure, except over the pu-

during that of decline, for, as the muscular norvous system, as the pulse faithfully inpower declines, the sensibility also becomes dientes.

In accordance with these views, the foldelicate frame, whose muscular system is lowing table is intended to exhibit a kind of not well developed, are highly sensitive; analysis of inflammatory fever, by showing and whenever the muscular power is greatly that, according to the condition of the musreduced by venesection, spare diet, anxioty cular system, is the sensibility of the ner-of mind or disease, the sensibility is pro-vous; and that, according to the combined portionally increased. On the other hand, conditions of these two systems, the circu-whenever sensation is accumulated by superexcitation, as by the influence of fear, respectively to them in the unexcited and excessive pain, &c., the muscular power is the excited states of the body. Inflammalowered. Instances may, however, be ad- tion is made the chief exciting cause, in duced, in which certain depressing agents, order to show by the pulse that inflammaas intense cold, marsh miasma, opium, &c., tory fever takes place inversely to the musdiminish both the sensibility of the ner- cular power. Miscellaneous temporary exvous, and the power of the muscular, citing causes are also given, merely to afford systems.

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CONDITION OF THE MUSCULAR SYSTEM,	SENSIBILITY	OF NERVOUS SYSTEM.	EXAMPLES.	PULSE.	
Least muscularity		Unexcited Excited by inflammation Unexcited Executed temporary to spiritume petations right passing acceptance passing acceptance	(Infinite with inflain) (Instory tover) (Persons of a dicate in those)	r Rapid, small, and tenes, r Frequent, small, and soft. More frequent, fuller territorial soft.	
(Inaziderable mus-) culadity		Excited by inflammation	R don't persons in (
Ditto, suddenly red acced in power by loss of blood &c.	Very high degree.	Excited by inflammation	Ditto, with inflame !		
Do., reduced in power	High degree	Unexcited	Date, ceavile-cent.	t Frequent, fuli, am	
Every degree of a muscularity sub- dued in power	Low degree	Depressed by march miasma, intense cold, opium, &c	Every description of person in the first stage of idio pathic fever &c.	Smaller, weaker, an-	

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INTESTINAL OBSTRUCTION

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RAW WHEAT.

To the Editor of THE LANCET.

SIR,-Permit me to transmit to you the report of a case, wherein a fatal result was near occurring, from a habit on the part of the patient of eating raw wheat. I am, Sir, your obedient servant,

J. L. M'CARTHY, M.D. Macroom, October 14, 1835.

On Thursday, the 8th instant, I was sent tenance of muscular tone. Decangements for to visit John Leary, atat. 35, living at Toames, three miles from hence, a steward in charge of a farm belonging to a gentleman of the name of Penrose. I found the man in bed, labouring under the most agonizing pains, which he referred to the anus. rectum, and loins. He was bathed in sweat; and the general vascular irritation. If an his countenance expressed the greatest anxiety, but he suffered no headache nor delirium. His tongue was coated with a stem of treating inflammathick white fur, but moist; there was no suitch suddenly reduces all affection of the chest or of the respiratory Sometimes a large faculties, nor any complaint of the stomach. der frame too near but he had much thirst, urgent desire to aggravates both urinate, and evacuate the rectum, without accompanying ability to effect either. The abdomen felt quite soft on pressure, except over the pubic and left iliac regions, where distention that the attempts to evacuate the bowels had of the bladder, the sigmoid flexure of the brought down more of the wheat into the colon, and the rectum, could plainly be per-frectum, which was again filled to distention,

On making an examination per anum, I found its verge considerably swollen and sphincters, and so tender and irritable, that it was with much difficulty that the patient would allow me to proceed with the examiof the grain as he proceeded, and to that he recovered. attributed his illness. He went on the second day of his illness to the Macroom Dispensary, where he was ordered a dose of castor oil, but no effect followed its exhibition.

Having by mistake omitted to bring a catheter with me, I sent home for one, and in the mean time proceeded to examine the rectum internally. With considerable difficulty I introduced my little-finger, well oiled, up with a hard mass of undigested wheat. servant, The agony which the patient suffered from this exploration, forced me to desist for a short time, when I determined on attempting to extract some of the wheat from the bowel. I accordingly procured a small eggspoon, and having well oiled the handle, into remain until they had melted. This had painful. the effect of lubricating the part and softening the contents of the cavity; so that on a its situation, to be an inflamed and consecond attempt with the spoon-handle I siderably enlarged submaxillary gland. succeeded in clearing out about ten ounces was very painful on being touched, and the more of the wheat, the patient all this time patient was the subject of a high degree of complaining of almost intolerable suffering. fever. I ordered right leeches to be applied Having desisted for a time in order to allow to the tumour, and gave him a calomel boly him some rest, he felt an urgent desire to go and a black draught, with a continuate to stool, but the attempt was unsuccessful, a saline aperient mixture. Ou owing to the tenderness and constriction of saw him again, and found the anus. He was, however, able to urinate, painful, and somewhat and voided about two and a half pounds of ordered the leeches 202 fluid.

On making my next examination, I found days after this.

but the mass was not so hard as in the first instance; and on again operating, I succeeded in removing about twenty ounces inflamed, with great contraction of the more. The patient now expressed himself as much relieved. I had by this time in all brought away about two pounds of wheat.

As I found his pulse full, quick, and nation. He said he had been ill during the bounding, I bled him to 5xxv, when he belast three days; that during the first and came faint. I then had the rectum stuped second days of his attack, he only felt oc- for about an hour, and gave him a draught casional fits of pain in the anus and loins, containing an onnce of Castor Oil, fifty but that for the last sixteen hours, or there- drops of Tincture of Henbauc, and an ounce abouts, he was in extreme agony, with but of Cinnamon water. Half an hour afteroccasional slight intermissions. He had wards an enema was administered, followed not had an anal evacuation for the last four by a purgative draught. Six hours afterdays, and from ten o'clock p.m. on the pre- wards I found him free from pain, and in a vious evening had not passed any urine up sound sleep. His bowels had been much to the time when I saw him, which was one affected by the enema and medicines, and an o'clock p.m. on the following day. He said immense quantity of wheat, with some white to me, that being for some time previous to starchy stuff, had passed from his bowels. to into that the property of the stress of the stress of a large quantity of Mr. Penrose's wheat, but by keeping the bowels soluble with small he had, as was often his habit, eaten some doses of the Magnesian salts, he perfectly

SALIVARY CONCRETION IN THE SUBMAXILLARY DUCT.

To the Editor of THE LANCET.

Sir,-Should you consider the following case worthy a page in your widely-circuinto that cavity, and found it extremely dis- lated and valuable Journal, the insertion of tended. It was, in fact, completely blocked it will greatly oblige your obedient humble

W. A. ELSTON, Surgeon. Braybrooke, Northamptonshire, Oct. 20, 1835.

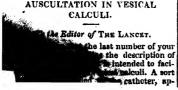
James Whitehead, a young man about troduced it into the rectum, and detached and twenty years of age, called on me, Sept. 4, brought away from the mass about two for my advice respecting a swelling on the ounces of semi-masticated wheat. By this right side of his neck, of which he had been means I obtained a little more room, so that 'the subject at times for four years, but which I was enabled to force into the rectum a few within the last week had considerably insmall pieces of mutton suct, which I allowed creased in size, and become exceedingly

On examination, I considered it, from the purgative medicing

on examination there appeared to be an enlargement at about the termination of the submaxillary duct of the right side, and on justice to truth, positively affirm having six applying my finger I could distinctly feel a small hard substance. I was at once ap-prized of the occasion of all the external swelling and violent pain which the man had complained of for so long a time, and, by means of a probe, gently dilating the orifice, and with a small pair of forceps, to my great satisfaction I extracted from the duct a salivary concretion moulded to the shape of the canal, of about three quarters of an inch in length; the moment this geons in France, in Italy, and in London; plug was removed, his mouth was almost filled with pus of a bloody character, and some clear saliva. He experienced immediate relief, and the swelling was at once reduced from the size of a large hen's egg to a mere trifling enlargement, and it is scarcely necessary to add, that in the course of a few days the man felt himself quite well. There was for the first two or three days a frequent discharge, but after this time he could perceive nothing particular either of the pain or discharge.

I felt much interested in the case, for, on inquiry, I found that he had perceived slight pain and swelling at times for four years previous to this date, and occasionally had had severe pain; and that he scarcely ever sat down to a meal without an almost sudden enlargement of the gland, and particularly so within the last six months, which swelling he could always disperse by pressing on it a short time with his finger.

The sympathy existing between the nerves of smell and taste was, in this case, most beautifully illustrated; for, according to the patient's account, he could never pass a savoury smell without feeling this sudden enlargement, and pain, and he said he had dined but a few days previous to my seeing him from a meal which, to use the man's own words, "always used to make his mouth water," but which in this instance, in consequence of the outlet of the duct being completely closed, had produced so violent a distention of the gland, as at once to set up such a degree of active inflammation, as shortly afterwards led to the discovery of the nature of the disease, and to his relief from suffering.



plained to me of pain under his tongue, and pears to be the principle of this invention.

on examination there appeared to be an en- Without wishing to engage in any discuslargement at about the termination of the sion about so trifling a matter, I may, in years ago applied to Monsieur Charriere of Paris, who made me a long catheter, the handle of which I had topped in the shape of an olive, so as to adapt itself to the ear. I made several experiments on the dead subject with this instrument, and was quite satisfied how easy it was thus to distinguish any and various foreign bodies in the human bladder. I have shown this simple instrument (or spoken of it) to many surnevertheless I am far from accusing Mr. Brookes of taking advantage of the thoughts of another person; and if I am induced to write these lines, it is to corroborate his opinion of the usefulness of such an instrument. The hand of the most talented operator has sometimes deceived his senses. I saw Baron Dupuytren cut for stone where none existed. My friend Professor Roux nobly confesses the same error. I could mention other similar mistakes, but the examples already given are more than enough to prove the utility of using the ear in the examination of the bladder. The hand assisted by the ear will no longer commit such direful errors; nor will patients, operated on for stone by MM. Civiale, Heurteloup, Amussat, &c., be sent away in full security as perfectly cured, with calculi or fragments of stone in their bladder, such cases now heing generally known to have occurred. Hoping, Sir, that surgeons will not henceforth neglect this sign in the diagnosis of diseases of the bladder, I have the honour to be, Sir, your obedient servant,

CLAUDICS TARRAL. Lawson's Bedford Hotel, Paris, October 8, 1835.

THE LANCET.

London, Saturday, October 24, 1835.

In regulating the government of our public, endowed hospitals, no neutral, no middle path between right and wrong, can by any possibility be pursued for any length of time. The circumstances which arise out of their management, must necessarily be productive of good or of evil. Either the inmates of the hospitals must derive advantage from the method of managing those incatheter, ap- stitutions, or their condition must become

absolutely and necessarily descrimated from | public hospitals, are still destitute of resithe neglect or want of skill of the medical officers. It is not often that disease w linger in its career. The constant being attacked by an insidious and deric foe, requires all the auxiliary aid which it is in the power of the profession of medicine to afford, in order to remove suffering and ward off the threatened danger. In some cases the malady requires to be watched hourly. In others a visit made daily by the medical attendant, may be sufficient to satisfy the claims of the afflicted But it is always observed in our public institutions, and even in private practice, that the presence of a physician or a surgeon, who, by his mild and gentle demeanour, and calm and steady firmness in the hour of agony and danger, can ensure the confidence and the favourable opinion of his patient, is enabled to furnish a degree of solace to the mind and feelings of the sufferer, which cannot be derived from any other source.the inspiring smile, and the hopeful and benign assurance of the skilful medical attendant, often carrying with them an influence which is far superior, as an anodyne, to the effect temporarily resulting from the administration of the most powerful drug.

In the conduct of our hospitals, therefore, every person of ordinary observation and reflection would imagine, a priori, that in each of our endowed medical and charitable establishments, there existed an office occupied by a resident medical practitioner of highly-gifted attainments in medicine and surgery, who was fully adequate, on all occasions, to meet the emergencies which must arise in such establishments from the rayages of maladies of a serious character. and by the admission of injuries resulting from accidents of a dangerous and alarming description. Still, however, in this, the thirty-fifth year of the nineteenth century. we find it to be our duty to announce to the members of the medical profession, and to the British public, that the largest, the wealthiest, the most splendid of our endowed scarcely be faithfulled

dent surgeons. A fact of this description a not only a stain on the character of the with respect to the general policy of wa, but it is also a stigma on its renu-Lhomanity.

of the minor establishments we know, and well, that there are persons who are denominated "house-surgeons;" but they are beardless lads, who have bought themselves into "office." We know equally well also, that there are medical officers attached to the various hospitals, but amongst these how many individuals are there who disgrace the profession to which they belong, by throwing into their dirty coffers the money which is viciously and basely obtained from aspirants to the office of house-surgeon, - money which is cunningly enticed often from the most inexperienced students, at a horrible sacrifice of the welfare of the patients, and to the utter perversion of every principle of that pure benevolence to the existence of which the hospitals owe their foundation! In 81. Bartholomere's Hospital, for example, the office of house-surgeon is sold, solo, like an ox or a carr in the neighbouring market! William Lawrence has been one of the sellers, too, within the last year, and pocketed the cash which he obtained from the purchaser with as little remorse or shame as his brother traffickers on the same day bagged the produce of their cattle sales in the Smithfield pens. Shame. shame, that such practices should be perpetrated in a temple dedicated to the divine purposes of charity! In one institution, as our readers have recently seen,-in the hospital which belongs to the London University, -- the office of house-surgeon has not been converted into an object of barter, of odious and mercenary barter, but has been made a prize for successful intellectual ca petition. It has been conferred To its possessor, therefor -not the insignific

purchase, but those which belong to the strangelated hernia? Can they find the well-qualified and experienced members of the profession. But will it be believed that in Guy's Hospital there is no house-surgeon. either in name or in substance, and that a like deficiency also exists in the other great homital of Southwark, -- the hospital Thomas, - the two establishments commanding, at the same time, pecuniary resources amounting to, if not exceeding, the sum of one nundred thousand pounds PER ANNUM? Both hospitals, it must at the same time be remembered, are liberally stocked with physicians and surgeons, whose friends and relations in the medical corporations have so contrived affairs that the hospital functionaries are enabled to draw their salaries from the pockets of those medical students who have the misfortune to be the victims of the ticket-and-certificate system With only one hundred thousand pounds per annum, the funds of those hospitals are too poor to allow adequate salaries to be paid out of them to resident surgeons.

" Ah !" but some of the corrupt and pettifogging tribe will assert, " there is a resident apothecary in each establishment." True enough. So, too, there are resident pestles and mortars, resident mous and resident sponges -pieces of convenience which are as much at the disposal of the resident anothecary, as the resident apothecary is at the disposal of the non-resident physicians and surgeons. The apothecaries are, in reality, nothing more than pharmaciens.* They regulate the dispensing department, and in some instances of great emergency, prescribe, perhaps, a dose of rhubarb, or twenty drops of laudanum. But do the apothecaries operate in cases of surgery? Do they dare cut down upon and divide the stricture in cases of

The advantages which would necessarily arise from the appointment of a resident surgeon of first-rate abilities to each of our great hospitals, would, in the course of a few years, be incalculable. The sick poor would be efficiently treated, the students would derive perpetual opportunities of improvement from an ample supply of clinical instruction which he does not now possess the means of obtaining, and the facts and observations which practitioners thus favourably circumstanced must be enabled to re-

sheath of an artery, and tie the vessel, in a case of dangerous hemorrhage? Do they attempt even to reduce a dislocated limb. to adjust the divided ends of a broken bone. or relieve the brain, by means of the trephine or elevator, from the pressure of a piece of bone in a fractured cranium? In short, the anothecaries of our hospitals are the mere servants of the medical officers in matters of dispensing, although they probably go through the formality of an occasional walk along the wards, in order to report any newly-occurring peculiarities in the cases, on the arrival of their masters, who, being particularly industrious and attentive, generally contrive to visit the hospital at irregular hours on two days in each week. Such a system of management one could almost conceive to have been projected by some crafty wily undertaker, who, having engaged to execute by contract the funeral business of the hospital, saw that it would be rendered profitable in proportion to the number of "black jobs" which he should have to execute. That a mode of management so fraught with evil is on the point of terminating for ever, we are well assured, and although this is the best consolation that the mind under the circumstances we have stated can receive, yet an indemnity against future wrong-doing can have no tendency to mitigate the sorrows and sacrifices which the misgovernment of our hospitals has produced during so many successive genera-

^{*} We make no attack on the professional gracter of the gentlemen who hold the of resident apothecary in these estawe feel pleasure in stating Guy's Hospital, is not but that the busiexecuted with in-

cord. would contribute in a pre-eminent de- orrhea; and many, I am sorry to say, who have of our medical institutions are now conproper quarter, the worthy baronet expressed himself thus in the warm and stirring language of indignation and truth. We quote from his 54th Lecture on Surgery in Vol. 2, 1823-24.

"At the present time, however, a surgeon must be either grossly ignorant, or shamefully negligent of the duty which he owes to the character of his profession, and to the common dictates of humanity, if he persists in giving mercury for this disease Let those persons who suppose that gonorrheea can be cured by mercury, go round our wards and see whether mercury has any effect on that disease. Look, gentlemen, at 100 patients in our foul wards, many of whom come into the hospital with syphilis and gon- denounced the

gree to promote the general diffusion and advancement of the thoroughly investigated treatment of these patients? You are principles of medical science. As the affairs aware, gentlemen, that I scarcely ever enter the foul wards of St. Thomas's Hospital. When ducted, the responsibilities are so numerous, have the patient removed to the clean ward. from their being separated into so many divisions, that there is scarcely a more difficulty. The secure patients under gonorrhee are a particular case demands my attention, I cult task to be executed than that of tracing compelled to undergo so infamous a system of out those links in the chain of circumstances treatment that I cannot bear to witness it.

To compel an unfortunate patient to undergo which point to the source of a particular a course of mercury, for a disease which instance of management. Occasionally, in- does not require it, is a proceeding which deed often, it happens, that a patient is at-character of a medical institution. No contended by a physician, a surgeon, an apothe-sideration shall induce me to repress my cary, a dresser, and a nurse, each undertak. feelings on this subject; no authority shall ing to execute certain duties, but no one restrain me from giving full expression to those feelings. As long as I continue a suracknowledging that the responsibility of the geon of Gny's Hospital, I will endeavour to case rests on his own or her shoulders. When do my duty; but I care not whether I continue a surgeon of that hospital another day. I do Sir ASTLEY COOPER so ably filled the office say that the present treatment of putients under of surgeon in Guy's Hospital, he was so gonorrhua in these hospitals, by putting them much annoyed by the occasional interference for five or six weeks, is infamous and disof the physicians with cases of surgery in graceful. The health of a patient is, perwhich he had operated, that he was induced haps, irremediably destroyed by this treatment, and, after all, not the slightest effect to recalcitrate, and express his great annoy- is produced by it on the disease. If he is ance at the presence of some of the medical cured of his gonorrhoa at all, he must be officers who were dangling at his heels, and curred by other means. If you go to a patient with gonorrhoa in the foul wards at the not only interfering with, as that celebrated end of his course, and ask him how many surgeon has more than once stated in public, times he has rubbed in, he will generally but absolutely retarding and preventing answer 'Twenty-eight times.' If you ask the speedy cure of his patients. On one he spits three pints a-day; but ask him subject of abuse, where there was also a directly, 'No, I have the disease still upon me.' vision of the responsibility, arising entirely His disease is not in the slightest degree in consequence of non-responsibility in the affected by the mercurial course to which he has been so unpardonably subjected, and it will soon after be necessary to cure him by injections or other means. When so infamous a practice prevails, I cannot satisfy my own feelings by resorting to milk andwater language; every man of common feel-THE LANCET, Fourth Edition, page 192, ing and honesty is bound to speak out on such occasions.

It it impossible to read this language without entertaining respect for its author. The denouncement of the odious system was honest, bold, and unflinching. In this instance, when THE LANCET had existed only about six months, one of the first es sulting from the existence medical press, because ble. During tent "y

tem of poisoning patients with mercury.patients whose diseases required not one grain of mercury,-without producing the slightest effect on the ruling authorities of the establishment. At length the denouncement of the shameful abuse was published in this Journal, and along with it some strictures of our own, written in exact accordance with the views of the lecturer, and in less than ten days after the" infamous system" was made public, Sir Astley, at the conclusion of a lecture, thus addressed his rlass: -

" I believe much good has already resulted from my observations on the abuse of mercury, and I am happy in being enabled to state that the venereal wards of Guy's Hospital are about to be opened un-DER NEW AND IMPROVED REGULATIONS. I have spoken to the treasurer (Mr. BEN-IAMIN HARRISON), and I have the satisfaction of stating that the custom of making patients spit three pints a day will no onger be a part of the system, but that he venereal wards will be opened under NEW AND IMPROVED AUSPICES.

Private remonstrance in attempting to correct this horrible abuse of one of the nost powerful, and, at the same time, one of the most poisonous of our medicines, was itterly unavailing. Publicity, however, had he effect of shaming the ruling party, or parties, into the adoption of a rational sysem of treatment. We appeal to all the tudents who attended Guy's Hospital from he year 1816 to the year 1822, and we ask hem whether they ever witnessed more listressing scenes than were to be seen in shat were called the " foul wards" of that nstitution. Sufferings of the most dreadal description were caused by the use, the riminal use, of mercury, administered, in act, for the cure of a local malady over vhich it had no remedial power, but proluced, by its continued employment, often month and six weeks together, a train less frightful or destructive in han the very worst

terrible diseases

often been confounded, even by discriminating practitioners.

The calamities, therefore, that originated in the abuse which Sir ASTLEY COOPER SO feelingly and justly denounced, must, during so many years, have existed to a frightful But where was the RESPONSI-BILITY? Oh! it was divided. And, in reality, the distinguished complainant and surgeon was not responsible for the treatment of his own patients. There was a gentleman who ruled over the establishment. That gentleman was Mr. BENJAMIN HAR-RISON, and even that important functionary ought to have acted in conjunction with forty-nine associate governors.

Now, we put it to the common sense and the good feeling of the profession, and to the governors of Guy's Hospital, not omitting Mr. HARRISON himself, whether so destructive and cruel an abuse, attended with such unfortunate and fatal results, as the one named by Sir ASTLEY COOPER, could have existed for twenty weeks, instead of nearly twenty years, in Guy's Hospital, if there had been a resident surgeon in that establishment, and that surgeon had been made responsible for the proper, the scientific treatment of the disease with which the suffering patients were afflicted. Where there exist these mysterious and confounding divisions of responsibility in medical charitable institutions, there are always observable in them evidences of neglect or mal-treatment. Few or no facts are collected in them that may be added to the existing stores of medical knowledge; instances of proffered aid are regarded as so many uncalled-for interferences, professional jealousies are excited, and as each practitioner seems to feel that the credit of a cure cannot be the reward of his exertions. neither will the cause of death be attributed to his supineness or his want of ability.

But let us turn our attention from the frame, and with hospitals which are receptacles for the disease has sick poor, to the metropolitan institution of

health of whose inmates is regarded as an object of the greatest importance with respect to the high objects of moral and intellectual attainment. In this establishment ONE disease has continued its destructive ravages for a long series of years, not only uncured, but almost unrelieved or unchecked. In this single justance we observe all the mischiefs which arise out of injudicious appointments, in the first instance; and, secondly, from the impolitic division of responsibility amongst the medical officers. Since the year 1820, Dr. ROBERTS, Dr. CLEMENT HUE, Mr. ABERNETHY, Mr. LLOYD, and Mr. FIELD, who has lately resigned the office of anothecary, have been the medical attendants of the children; an I, in addition, there was, on one or two occasions, a visiting medical committee appointed, which embraced Mr. LAWRENCE, Mr. BRODIE, and others, the personal friends, and, for the most part, the colleagues, of the officers of the establishment. Who, then, is responsible for the ravages which the ringworm has committed in this establishment .- for the sufferings which the poor children have endured,-for the bodily restraints to which they have been subjected, -for the imperfect education of which they have been the victims? It will be answered, that the whole of the medical officers are responsible. Ay! When it is thus divided, the portion which each has to bear presses so lightly that it is scarcely felt to be an inconvenience, and even that portion is blown away by the mere breath of either officer who alleges "that he " could not cure the patients because the " medical management of the children was " not placed entirely under his control,"-a statement which is rendered perfectly justifiable by the circumstances connected with the duties of each of the medical officers. Disastrons enough have been the consequences. The undring Ringworm has pursued its course; the children have long on Friday the 23g been kept on a most unwholesome diet; the opportunity, the

CHRIST'S HOSPITAL the maintenance of the | unfortunate boys have been tortured by the endless application of plasters and unguents to their scalps: and, what is still worse, the mental soil has, in numberless instances, been left entirely unimproved and uncultivated. These facts are most lamentable, but there is one which is also most Atraordinary. The labours, the discoveries, the observations, of the medical officers of Christ's Hospital have not contributed one solitary page of information to our stock of knowledge on the subject of ringworm. So far as the labours of those officers are coucerned, the members of the medical profession in this country are just as wise on the nature and treatment of ringworm, as they were on the first day that that malady made its appearance in the institution. We say, therefore, fearlessly and unhesitatingly, that if a succession of resident surgeons,that is, supposing the first had failed or died,-had been appointed, no such omissions or results as those which we have stated, could have been observed or recorded.

With these views and impressions operating on our feelings, we look forward with the utmost anxiety and apprehension as to what may be the rules of management for the medical officers, after the coming election of a resident surgeon to Christ's Hospifal has terminated. It is of no use to appoint a competent practitioner, and then bind and manacle him. His mind must be left at liberty to act with the utmost freedom from the exercise of any controlling influence on the part of those medical officers who now belong to the establishment, and for whose talents and zeal the "undying worm" has proved itself to be more than a match.

This journal is published nominally every Saturday; but, in reality, it is inhands of our metropolitan reader day on Friday. The el to Christ's Hospital

last words to the governors on the subject of capable of curing the disease called "ringhave happened, particularly from a division hands of Dr. Roberts, Dr. Hue, Mr. Aberdidates for the vacant office are about wen tv in number, that is, if all can be called "candidates" who have issued letters of solicitation, without entertaining the hope of obtaining a single vote. From what we have been enabled to observe, we may state that the actual candidates may be divided into two portions; the one party baving the fullest and most substantial claims to the confidence of the governors; the other part consisting of persons who have no title to the respect of the electors, although, as regards confidence, it is quite evident that they possess enough of it-in themselves. candidates placed in the two divisions stand thus .- Mr. PLUMBE on one side, - a score of opponents on the other. Here, then, is a contrast presented by the claimants for the office, and it would be quite useless to institute a comparison, for there is in reality nothing to compare, unless the shadow be classed with the substance, -unless the inexperience of youth can be made to maintain a parallel with the matured knowledge of a twenty-years' assiduous devotion to the labours of an arduous profession. Some of the candidates, we understand, have been educated at St. Bartholomew's Hospital, but we will not do the governors the injustice to believe that even a thought will be entertained of taking another gentleman from that school to place him in the office of medical attendant in Christ's Hospital. No such folly, such pernicious folly, can be committed by rational and benevolent men. The teachers of St. blomew's Hospital may be men of exof first-rate ability in the ge profession, but the many years has they are in-

appointing resident surgeons to our hospi- worm," - that the suffering children of tals generally, and of the mischances that Christ's Hospital have received from the of medical responsibilities, in the institution NETHY, and Mr. EUSEBIUS LLOYD, (the over which we know it is their desire to present consulting surgeon of Christ's Hosexert an efficient salutary control. Tite can pital), who all have been, and still are, lecturers and practitioners in St. Bartholomew's Hospital, little or no relief from the persecuting malady with which they are afflicted. All of these gentlomen have held office, have been consulted, or are still holding office, in Christ's Hospital, and their efforts in the attempt to cure the heads of the afflicted children, have been utterly and signally unavailing. The masters, the instructors of youth, have failed, and shall it be said that the apprentices, the instructed, shall be selected, in the hope that inexperienced youth can accomplish, in the treatment of disease, obstacles which are not to be surmounted by the ripened knowledge of experience and age? No such selection can be made by the governors. A choice of that kind would, in reality, be little less than a solemn mockery of the complaints which have been so loudly made by the parents and guardians of the distressed and tortured children. There may be amongst the governors two or three mischief-makers who may be swayed in their choice by the interests of party, rather than by the dictates of reason, and whose love of intrigue may be superior to that of works of benevolence; but confidently assured are we that an overwhelming majority of the governors will be influenced in the selection of a candidate by an carnest, noble, and generous desire to spare the interesting objects of their solicitude every torment which can be averted by the judicious exercise of medical skill. No conideration of a less rational or humane tendency can by any possibility determine the hoice which is about to be made by a large ody of indepen 'ent English gentlemen. They ere called upon to act as parents on this occaion, for the children are placed entirely under their guardianship. On reflection they must

perceive that it is their paramount duty to get rid of the scourge which has so long pestered hundreds of the scholars, and in furtherance of that duty we now once more earnestly express a hope, THAT THE GO-VERNORS WILL NOT BE INDUCED TO ELECT THE RESIDENT MEDICAL OFFICER FOR A LONGER PERIOD THAN ONE YEAR. Whatever may be the entreaties of the candidates. or the petitions of their friends, THIS LIMIT, relative to the time of holding the office, SHOULD BE RESOLUTELY FIXED, and not departed from under any pre; ence whatever, At the end of the year, if the state of the children do not indicate that a confirmed progress towards the improvement of their health has been made, the surgeon who has been allowed a twelvemonth's trial, should instantly give place to a successor in his office. In acting with decision and promptitude, the governors discharge no more than their duty towards the children; whereas if their conduct be marked by the slightest evidence of supineness in matters of such vast importance as the health and education of the pupils they cannot justly be excused from an accusation of culpability.

In contending for the superior claims of Mr. PLUMBE, we trust that the character of this Journal will fairly permit us to refrain from remarking that we are influenced by no partial or unworthy motive. He has proved by his published works, by his success in the important medical offices which he has already held (those of senior surgeon to the St. Giles's Infirmary, and of senior surgeon, for many years, to the Metropolitan Infirmary for Children), that he is capable of maintaining a first place in the rank of medical practitioners, and that in his knowledge of the nature and treatment of diseases of the skin, his superior is not to be found amongst the physicians and surgeons of this metropolis. His claims to the Governors of Christ's Hospital. favourable opinion of the governors are founded on his talents and experience. His title to the support and recommendation of Thursday, Octob this Journal has an other foundation

The duties of the Governors, with regard to the medical care of the children, must not terminate with the appointment of I . PLUMBE. After he has been installed in his office, that gentleman must be left free to act. He must not be hand-bound. He should be entrusted without restraint with the care of the health of the children, which would necessarily place their medical and dietetary management under his control. With such an arrangement there would be no shifting of responsibility. If the mode of treatment should fail, the Governors will at once be enabled to trace the failure to its right source, and other professional aid must be sought for and obtained. It is high time that all forbearance or dalliance with such an insidious and destructive foe as the ringworm should terminate. From the number of communications which we have received on the subject of this election, we know that the parents and guardians of the children are awaiting, with the most intense anxiety. the result of the contest. A respectful and generous reliance is bestowed by their relatives on the judgment and benevolence of the Governors; and as for the afflicted children, their hands are raised towards their benefactors in pitcous mood, expressively, though silently, hoping that the hour of redemption from their prolonged sufferings is at last drawing near. They who can remain unmoved in the presence of such a scene, and who can suffer their judgment or their motives to induce them to vote for the candidate whom they do not believe to be the best qualified and the most capable to protect the scholars from the further destructive ravages of the disease, must have their feelings steeled against all the finer sympathies of human nature. We hope and believe that persons of this description are not to be found amongst the benevolent

A letter appear " Christ's West

the writer observes,-" In the London es-" tablishment, the disorders affecting the >" scalp, formerly so troublesome, have, I " understand, disappeared." Disappeared! Why not say cured, if such be the fact? But is it not strange that Mr. BENNINGTON, the incdical attendant of the branch establishment at Hertford, should undertake to give an account of the state of Christ's Hospital in London? The time has been conveniently chosen for writing this delusive canvassing letter; but we feel confident that the Governors are not to be deceived by any such efforts, and that on the day of election they will conscientiously and honourably record their votes in favour of that man who by his researches, his experience, and the devotion of a great portion of his professional life to the consideration of the diseases of the skin, and who, by his discriminating and prudent recommendation to the Special Committee of Christ's Hospital, has proved that he is pre-eminently qualified to occupy the office of resident surgeon in that great national establishment.

It is a enrious fact that Mr. JEAFFRESON, of Framlingham, in a letter which was published in THE LANCET of March the 14th, 1835, page 872, while speaking of the qualifications of Mr. Bennington, who bad been his apprentice, refers, in proof of the first of those qualifications, to the fact that during his apprenticeship Mr. Bennington had " read the works of Plumbe on the history and treatment of ringworm." The governors of Christ's Hospital have now the opportunity of choosing between the PRE-CEPTOR and the PUPIL. To suppose, for one moment, that they would prefer the latter to the former, while yet Mr. PLUMBE is carcely forty years of age, and therefore in rime of life, would be anticipating that s would display a perverseness suld indicate to the that all lay inter-

sections of our

"ROBERT BENNINGTON." In this letter public institutions skilled cease and be

THE contest for the office of surgeon in the parish of St. Clement Danes, after the votes had been recorded by ballot during three days, terminated on Wednesday last, in the election of Mr. Cosgreave, by a majority of 103 votes over his opponent. We do not blame Mr. Dunn for having offered himself as a candidate on this occasion, but we condemn the principle by the advocacy of which he endeavoured to sustain his claims to the confidence of the rate-payers. On every account we rejoice in the election of Mr. Cosgreave, because we are satisfied that he has discharged his duty to the poor with humanity, industry, and skill; and better proof of this assertion cannot be offered than the fact that although our office is in the centre of the parish, and situated within two hundred yards of the workhouse, not a single complaint against the parochial surgeon has been made to us in the course of the nine years during which Mr. Cosgneave has filled the situation. If such a man is to be rejected because another person thinks that he ought to occupy the post, there would be an end to the respectability of the profession, to the humane treatment of the poor, and to the stability of all useful and efficient reforms.

We regret that we have not space in the present LANGET which will allow of our offering a few additional words to the "recognised" lecturers. They contend that we are unjust in our remarks, and that the existing system is not one of robbery and delusion. We must appeal from their vorbal decision to the experience and feelings of the pupils. By some of the lecturers our opinions and views have been wholly misrepresented. We thank them for their false-hoods.

The Anatomy of the Regions interested in the Surgical Operations performed upon the Human Body, &c. In a series of Engraved Plates, on India Paper, the size of Life. By J. LEBAUDY, M.D. London: Balliere, 1835; 4to, pp. 32.

WE cannot consider the present volume (which is priced at the sum of one pound four shillings), notwithstanding the freshness of its title and appearance in some parts, to be any other than the atlas of the Journal des Connaissances Medico-Chirurgicales, which is sold at the bureau of the journal, Rue de l'Ecole de Médecine, next door to the Hotel Herisson, for the much more modest sum of six francs. M. Lebandy is an excellent artist himself, and his plates have been designed and engraved with much accuracy by some of the best artists in Paris. We have, therefore, no objection to make must protest against the high price which the immense circulation which it has obinadequate price at which it was originally published,-five shillings per annum. It is, therefore, not very unlike an imposition to take the atlas of that journal, paste the words "Published in London and Paris by J. B. Bailliere," over the real title of the plate, and sell it, with thirty-two pages of description, at such an unconscionable increase on the original cost. We should certainly advise a reduction in this respect, and also in another, that of the number of the plates, for instance, plate 18, which, though suitable enough in the journal that originally contained it, is misplaced in a work on surgical anatomy.

On Blood-letting.—An Account of the Cura-tive Effects of the Abstraction of Blood; with Rules for employing both Local and General Blood-letting in the Treatment of Diseases. By JAMES WARDROP, M.D., Surgeon to the late King, &c. London. Bailliere. 1835. post 8vo. pp. 148.

THE lectures on the above subject, which were made public some months since by The original of this translation their eminent and experienced author in for several years before the pages of THE LANCET, clicited expressions of admiration from the most intelligent medical practitioners in all parts of La Chapelle,

the country, not only in consequence of the novelty of many of the doctrines which were then enforced by Mr. Wardrop, but also from the philosophical views and the strictly physiological and pathological principles on which his opinions were founded. The extensive practice which naturally attends the professional fame of an able and accomplished surgeon, speedily affords in gratifying opportunities of learning the extent of favour with which his published doctrines, far and wide, have been received. Prompted, therefore, in the present instance, by an assurance of the feelings of interest which his labours in diffusing a correct knowledge of the principles of bloodletting have excited, the author has here combined, in a series of uninterrupted pages, all that he had to communicate on the subject, with something in addition, as we learn against the surgical value of the work, but from the preface to the edition before us, with a quotation from which we shall be has been set on it in an English dress. We content in noticing the volume, for farther know that the Journal des Connaissances owes extract would be useless on an occasion in which the author has simply strengthened tained in a short time, to the cheap and the arguments, not cularged the opinions. he had previously employed : -

" Embracing some of the most important subjects of discussion in medical science. the following observations were not sidemitted to the profession without the exercisc of much care and deliberation; and the favourable reception which they obtained has induced the author to collect and publish them in the present form. In accomplishing this labour, however, he has not tailed to use his best endeavours to render the work more comprehensive, by dwelling at greater length on some points, and by giving additional cases illustrative of several interesting topics .- Charles Street, St. James's Square, October, 1835."

The volume is most conveniently indexed by side-notes in each page.

A Practical Treatise on the Diseases of the Uterus and its Appendance &c. By Madame Boryrs and V Drers Translated, with copions notes, by G. O. HEMMING, &c. London: Sherwood, 1834; 8vo, pp. 559, plates.

and its value is full Boirin was a wor

limiting the range of her investigations.

We are relieved from the necessity of novantage of those who are not familiar with excessive enthusiasts who achieve the highthe original. We should mention that the est results in science. work contains forty-one plates, from drawings on stone, and executed with sufficient accuracy. It would perhaps have been better had the plates been kept separate from the letterpress, as in the original work, and thus afforded English readers an opporunity of purchasing either separately.

Jardine's Naturalist's Library Entomology. Vol. III. British Butterflies. By JAMES DUNCAN, M.W.S. Edinburgh: Lizars. London: Highley, 1835, pp. 246.

. Highley has issued two more volumes very interesting scientific work,exoted to the class of pigeons, titled) to the British

compesition of her work she has been ably as- | are published. Nothing so cheap in the sisted by Monsieur La Duges of Montpolier, way of information has yet come from the who, by-the-by, composed a great part of press. Each plate of the seventy in these two the late Madame La Chapelle's work, also, A volumes is coloured, and with remarkable good standard treatise on the diseases of fidelity. An exception exists here and there females was always a desideratum, not only in the portraiture perhaps. In the "wood in this country, but in most of the con- pigeon," for instance, we detect one, but the tiental states; indeed we cannot say that faults altogether are very rare. A memoir the want is yet satisfied, unless we allow, of Werner is prefixed to the volume on with some physiologist, whose name we Butterflies. The selection of the biography forget, that " the uterus makes the wo:nan." of this philosopher to enlarge the bulk of a Were the latter proposition true, Madame work on butterflies is somewhat odd. The Boivin's work would be almost perfect, for man of rocks and metals seems to preside nothing can exceed in fidelity her descrip- heavily over the memorials of such feathertion of the natural structure of the uterus, weight objects. Werner, however, had one and the various murbid changes to which thing in common with as great a man in the that organ is liable. However, as she pro-clatter way. As the enthusiasm of the latter fessed to confine her attention to diseases led him to believe that butterflies carried of the uterus, we cannot reproach her for language on their wings,-for he desired his mistress, when they crossed her path, to read thereon words of affection from himself, - so Werner fancied "that stones could ticing the present translation in detail, by speak," and demanded from them the histhe copious extracts which have been already tory of the whole world. Such, indeed, long given from the original. We shall was his notion of the science, that he even, therefore content ourselves with again re- says Cavier, " endeavoured to trace the peating that the work of Madame Boirin laws of military art to those of geology, and and Monsieur Duges on the diseases of the if his account was to be received, every geneuterus is indispensable to the library of rul should have commenced his career by every practitioner; and that Mr. Hemmins studying for some time at Freyburg," where has shown a sound descrimination in ren-Werner held the post of professor, and indering it into our own language for the ad-spector of the cabinets. It is only these

> There is a very curious fact in the history of Werner, which is worthy of being noted among men of science. He wasted no time over pens and ink. He constructed no manuscripts for the diffusion of his fame. He left the simple facts which he discovered to work their own way, as they could, into general circulation. It was enough for him to detect them, and divulge their existence by word of mouth. He would not write. He hated the scribbling art with an intensity unmatched,-with an abhorrence so great, that it is hardly unreasonable to ask if he knew "the way," while the curious may ask with laudable eagerness to see his autograph, if he ever left one.

The following extract from the Eloge, pronounced by Baron Cavier before the quire to be seen University of France, will be read with inensured to terest, not only from the singular details which they which it contains relative to this circumstance, but from other characteristic acts need, his purse supplied their wants. When which are calculated to engage the attential last audience became too numerous for each tion of the readers of a work of tuition. Whatever is not new in this account is the lecture. His door was at all times open worth reviving :-

"Strangers who happened to visit Werner at Freyberg, and expected to enter into conversation with a mineralogist only, were surprised at his continual discussions on tactics, politics, and medicine. They were sometimes tempted to regard them as allied to the reveries of a maniac. Indeed, we may admit that there must have been something of exaggeration in generalizing to such an extent the relations of a single object; enthusiasm upon a field of inquiry which he described to them as so vast and fruitful as to embrace all these topics. A mineralogy which was purely mineralogical, would perdevoted themselves with ardour to a mineralogy which seemed to present them with a key to all nature : and even although, on a final analysis, there might only remain to them the foundation of the science, would they not still have reason to rejoice at the pleasing illusions which had been the means of leading them thither? Some individuals who have since risen to the first rank among the mineralogists of Germany, had wished to hear him, only for the purpose of obtaining a summary knowledge of mineralogy; but having once listened to him, that science became the profession of their lives. It is to this irresistible influence that the scientific world has been indebted for those laborious observers who have removed from the globe the last veil that concealed her mysteries. Karsten and Wiedman in the cabinet-Humboldt, Von Buch, Daubicisson, Hermann, and Freyensleben, on the Cordilleras, amidst the flames of Etna, in the deserts of Siberia, in the mines of Saxony and Potosi -have been led on by the spirit of their master. They always ascribed to him the honours that resulted from their labours; and it might be said of him, what could formerly be said with truth of Linnaus only, that nature was every where interrogated in his name.

"Few masters have enjoyed in the same degree the pure and unreserved gratitude of their scholars; but no one, perhaps, had ever so much deserved it by his paternal regard for them. There was no sacrifice which he would not make for his pupils. His time he would not make for his pupils. His time fluence on the and strength were at their service; and if accommodated. he knew that any of them were in temporary | ties, eager

to see conveniently the objects which he ex-hibited, he divided the students and repeated to them; he took his meals usually with some of them, as if he wished that no opportunity should be lost for their instruction. Such a master might well entrust the care of his reputation to his scholars; and G is, in fact, by them that it has been established. In this point, also, resembling Socrates, to whom he has been compared in so many other respects, nothing can be known of his views but from the notes that have been taken of his lectures. Whether it was that he became satisfied with the ascendancy which he acquired by his powers of speakbut the disciples of Werner hurried with it g, or that the vivacity of his imagination coald not submit to the restraint and tediousness of writing, it was only with the greatest difficulty that he was induced to prepare for the press one or two pamphlets and a few articles for the journals, though haps have disgusted many of them; but they he engaged in oral discussions as readily as could be wished, and for hours together would atter the boldest and best-connected ideas. Nothing, however, could make him take up a pen. His antipathy for the mechanical act of writing, was rendered amusing by its very excess. His letters are extremely few. The tenderest friendship, the most profound esteem, could scarcely extort one from him; and at last, in order that he might not reproach himself for his want of politeness, he ceased to open such letters as were sent to him. One author, who was desirous to have the opinion of many scientific men respecting a voluminous work, circulated his manuscript among them. During its progress the packet was lost. After a thousand researches, it was at last disinterred from under a hundred others in the house of Werner. To carry this matter to the extremity, he did not even reply to the French Academy when it placed him on the list of its eight foreign associates, which is adorned with all the great names of which Europe has been able to boast for more than a century. Perhaps he did not even know that this honour had been conferred on him, unless he chanced to learn it from some almanack. This insurmountable antipathy to writing caused him to infringe the laws of etiquette, which next to his studies affected him most. In everything else he is said to have observed the slightest courtesies of social life with as much punctuality as he attended to the varieties of minerals. His little eccent ties, at which he was the first to am in no respect unpleasant in whatever is most cle amiable in disposit

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by attending to his foibles. But these peculiaritist posterity has to lament, as they have thereby been deprived of valuable works, which no one else for a long time can execute so well. It is said that the first sheet of his great work on mineralogy was sent to press, but that he could not underso the fatigue of correcting the proofs. His whole life was thus spent in ignorance of all that was going on at a distance, without reading the journals of literature, and without even ascertaining whether envy had occasionally made him the object of her attack. His life might have been expected to be prolonged for a considerable time; for of all the methods which he had studied, that of taking care of his own health had not occupied him least. But the misfortunes of Saxony escaped his foresight, and destroyed his peace, and his resulting anxiety produced a complication of diseases, to which no care could administer a remedy. He died in the arms of his sister, on the 30th of June 1817, aged 67, at Dresden, whither he had gone in the hope of some alleviation of his sufferings."

The Cinique Médicale, or Reports of Medical Casee. By G. Andran, Professor to the Faculty of Medicine, &c. Condensed and translated by D. Spillan, M.D., &c. London. Renshaw. 1835. 8vo. Parts 1, and II.

WE recommend this translation as a production which presents two advantages that are not often found in combination in medical works. In the first place the original (which, as we have before said, is too well known to require comment) is the best system of medical pathology extant; and in the second, the translation, which seems to be executed with accuracy and care, is moderate in price. Generally speaking, the English translations of foreign works are published at unreasonable prices. Their circulation is thus necessarily limited, and the good example of many excellent continental works prevented from exercising the influence on medical literature and practice which it is desirable that it should obtain. The price of this translation will. when it is completed, hardly be higher than

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produced with accuracy,

of the original, and he must be a hardy

Observations on the Principal Medical Institutions and Practice of France, Italy, and Germany, &c. With an Appendix on Animal Magnetism and Homospathy. By En-WIN LEE, M.R.C.S., formerly House-Surgeon to St. George's Hospital. London. Churchill. 1835. 8vo. pp. 216.

THE contents of this volume are justly described in the preface as presenting " an impartial and not inaccurate sketch of the actual state of medical and surgical practice in France and Italy," with some " notes on German Institutions, less copious, but calculated to convey some idea of the state of practice in that country." The author might have given other qualities to his sketch with advantage, because the great bulk of his matter is not new to this country; but he does not seem to be a gentleman of much originality or expansiveness of view, or one who is likely to handle an old subject, or newly arrange the points of a stale topic, in a more vigorous or attractive manner than his predecessors, and we willingly excuse his abstinence from the attempt. He would certainly have failed in the effort. His dedication, however, of a volume devoted to an exposition of the free medical institutions of the continent. to one of the most narrow-minded andilliberal functionaries of the close hospitals and colleges of Great Britain, was a mistake of which he should not have been guilty, and certifies very early in the book more respecting the deficiencies in its character than there is any occasion to denote here. Even as it is, Mr. Keate must have received his copy of the volume as a diseased child receives into its unwilling hand a cup of detested rhubarb. But impartiality and accuracy are excellent qualities, and having said thus much respecting the absentee virtues. we express contentment with the labours of Mr. Lee in that respect. His volume will prove useful to medical students who visit the continent, and afford them a fair extent of introductory knowledge respecting the institutions which supply the means of professional learning in the quarters specified. Scattered through its pages we find

^{*} Mr. Lee's grammar cannot be much praised. How many languages are studied by Englishmen in preference to their own! "German institutions" do not constitute a "coustry." Such blunders are frequently

150 was impossible to flidge. In confirmation of this, he alluded to the case of a girl who had been received into Guy's Hospital, while the catamenia were present, and which were arrested suddenly by the affusion of cold water, followed immediately by a severe attack of pleurisy, attended with numbress and cedema of the inferior extremities; but so soon as the uterine disturbance was corrected, the pleurisy and other symptoms induced by the arrest immediately disappeared.

Dr. JOHNSON adverted to the fall which the patient had received, and said he had requested the advice of an eminent physicianaccoucheur and pathologist of this metropolis, whose letter in reply to that of Dr. Johnson was read, but it simply and briefly attributed the sufferings to spinal disease.

The PRESIDENT (by the special request of Dr. Johnson) gave his opinion on the treatment; he suggested that perfect rest for months should be enjoined, and that a nourishing diet should be allowed, and anodyne injections used; but during the time the catamenia were present, he would strongly recommend that the patient should move about, as a sluggishness of the uterine functions at that time, he had found, greatly contributed to increase the debility. He could easily conceive why the stimulating preparations of iron had not proved beneficial. These he never prescribed under similar circumstances, for he had found that such stimulants naturally increased the irritation, and thereby kept up the pain, suffering, and disturbance. The same objection, however, was not to be urged against the diffusible stimuli, and from the carbonate of ammonia, rendered palatable to the patient, he had derived in his practice great benefit as a stimulant.

Dr. RYAN, in addition to this treatment. recommended small doses of strychnia, and the introduction of metallic sounds into the uterus; in the use of which instruments he had seen much benefit derived when cautiously introduced into the uterus, commencing with small-sized bougies, and gradually increasing them; for while the patients were suffering from dysmenorrhoea, he had ascertained by examination at the time, that the parts were much contracted.

Mr. CLARKE observed, that whatever merit attached to this plan, was due to Dr. Macintosh, who introduced the practice.

Mr. Costello remarked that this formed one of the improved plans of treating urethral diseases, which he hoped shortly to lay before the Society.

Mr. STRETTON then exhibited to the Society some diseased preparations of fungus hæmatodes, attacking different structures in the same individual, and the Society shortly afterwards adjourned.

LONDON UNIVERSITY MEDICAL SOCIETY.

Oct. 16, 1835, Mr. Chippendale, President. MOLLITIES OSSIUM.

(From a Correspondent.) - A paper on mollities ossium was this evening read to the Society by Mr. PIPER, and followed by an animated discussion, in the course of which several theories on the pathology of the disease were advanced. Mr. Haymes thought that proof that phosphoric acid was superabundant in the system, had been afferded by analyses of the bones of persons who had died from this disease, and that their insoluble phosphate became by this means converted into a soluble superphosphate, which was thus, with much greater facility, removed, by the absorbents diminishing, more or less rapidly, the quantities of earthy material. Mr. PACKMAN advanced an opinion that the disease arose in conscquence of deteriorated function of the periosteum, its arteries having lost their healthy secerning power, while the absorbents still continued to remove the portions of earthy matter that had already been deposited. Mr. BRENT endeavoured to follow up this view, and supposed the reason of the periosteum being unable to secrete a healthy deposit (in cases where immense quantities of common salt had been habitually swallowed by the patients, as has been said to have frequently been their custom) to be either the result of sympathy with the stomach and other organs of digestion, so greatly debilitated by the salt, or else that the salt itself soon became absorbed into the circulating fluid, and re-acting upon the phosphate there, as well as on that contained in the osseous structures, produced two partially soluble salts, the phosphate of soda and the muriate of lime, which were immediately taken up by the vessels. He added that the disease might, on the other hand, arise from deficient acton of the kidney, that organ becoming unable properly to separate the salts from the blood, which, by accumulation, would have the tendency of giving rise to the soluble salts. The phose urine, he argued, was a sufficient that the urinary organs we turbed. Messrs. Kause and other gentlemen ject, which courted

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NORTH LONDON HOSPITAL.

CARIES OF THE OS CALCIS.

AMELIA CALLOWAY, aged 17, was admitted, May 12, under the care of Mr. Cooper. About three years ago a swellin appeared under the ankle of the right leg on its internal side. Sometimes it was very painful, but she continued to move about until the week previous to her admission. Some time last March the swelling broke. She had experienced a little relief at a dispensary, until a short time before her admission, when she got much worse, and her general health suffered considerably.

14. Pain so violent in the ankle that she cannot sleep; poultices have been con-

stantly applied to the swelling.

June 20. She has been more free from pain since the last report, but has complained occasionally of sleepless nights. She has been taking small quantities of iodine, which, depriving her of her appetite, was discontinued, and sulphate of qui-nine, with infusion of roses, was given instead. On introducing the probe into the sinns, it is felt to penetrate deeply into the cancellous structure of the os calcis-

Aug. 1. Mr. Coopen being out of town, Mr. Liston to-day removed a portion of the os calcis with a small trephine, scooping out a portion of the cancellous structure of the bone. The part was stopped with lint, and

a poultice was applied.

Sept. 21. A small piece of bone exfoliated a month ago, since which time the wound has been gradually healing, and is now

nearly closed.

Mr. Liston remarked on this case, that the disease was most frequent in the heads of bones and in short spongy bones. also sometimes occurred in the cancelli and shaft, and in flat bones, between the tables. The cause of the disease was external injury and incited vascular action; suppuration in the cancellated texture frequently following very slight incited action in persons of a scrofulous habit. Great suffering generally is experienced during the progress of an acute abscess to the surface. An enlargement usually cusues from the addition of new bone, which is arranged in nodules on the outer table, and sometimes extends to the bones which are articulated with the bone that was diseased. There is one more closes leading to the ulcerated

the discharge proceeding from which filage. The os cal-the disease, pro-

sometimes commenced in the bursa, sometimes in the substance of the bone. varies much in extent and degree. The softening and disease are not always limited to one bone, but affect the synovial apparatus between the astragalus and the other bones. The prognosis is various, according to the extent of the disease.

In treating this complaint, Mr. LISTON rcmarked in continuation, that it is necessary to remove partially or entirely the part diseased, or to bring on such a change of action as will throw it off. The first object may be accomplished by trephining, as in the case in question, by scoops, saws, or forceps; the second can be effected by the potential cautery, the red oxide of mercury being generally preferred by the lecturer. Mr. LISTON exhibited several specimens and drawings from various cases, showing the different kinds of the disease.

DISTRESSING BICKNESS CURED BY CREOSOTE.

Dr. Elliotson, in a late lecture, related the following case, which shortly since occurred in his private practice. Mrs. P., a lady, residing near town, when apparently recovering from an attack of sore throat, was seized with incessant retching and vomiting, accompanied with debility and depression, both of mind and body. This distressing state continued for a week, during which period no food of any description was retained in the stomach. There was no pain on pressure, and no other inflammatory symptom. Wine, brandy, and even soda water, were all immediately ejected. The pulse was extremely feeble, and almost imperceptible, and she had frequent fainting fits. Two grain doses of hydrocyanic acid. though repeatedly administered, had an effect in stopping the vomiting. She was supported during the week by nutritive glysters containing white of egg and milk. It was after a week, during which the above symptoms continued undiminished, that Dr. ELLIOTSON was requested to see the patient. He ordered her two minims of creosote. to be given every two hours, and increased if the sickness continued, but to be diminished if it ceased. The first dose was thrown up, but a second, administered immediately after, remained on the stomach. The next dose, given in two hours, came up. Another was administered and retained. The vomiting had entirely ceased on the next day, without any increase having been made in the dose of the medicine, which was therefore now diminished in quantity, sed fetid. The soft parts around and, shortly after, entirely discontinued. ensed so as sometimes to The patient rapidly recovered, and is now in good health. Dr. ELLIOTSON has had repeated opportunities (besides the cases already published in THE LANCET) of tryis points; it ing the effects of creosote in vomiting, but as the details would present mere repetitions, we refrain from giving them. The medicine has certainly sustained in his hands a high character. The judicious directions, however, which Mr. TAYLOR affixed to the cases published by that gentleman in a recent Number of THE LANCET, should be carefully observed by those who make trial of the crossote.

LITHOTOMY.

Thomas Smith, aged 61 years, was admitted, Oct. 15, under the care of Mr. Lis-TON. He has manifested symptoms of stone from infancy, the most marked symptoms being a pulling at the prepuce, and violent pain while making water, which dribbles from him, soiling his clothes. During the time of micturition he is very restless, tossing about in every direction. These symptorus very much increased as he became older. Mr. LISTON having sounded him and detected a stone, the boy's friends being anxious that the operation should be performed immediately, he was cut on the day of admission. The boy being held between the knees of an assistant, a small curved staff, with a groove a little on one side, was introduced, and held firmly by another assistant, towards the arch of the pubis. The incisions were made in the usual way with a common dissecting scalpel, and the bladder was reached. The staff was then withdrawn, and the stone extracted with a small pair of forceps in forty seconds from the first incision. On the 21st he was doing exceedingly well.

OPERATION FOR CATARACT.

Margaret Lake, aged between seventy and eighty, presented herself at the hospital on the 15th of October with cataract of both eyes. Mr. Liston operated on the right eye, the pupil being previously dilated, by dropping in a little solution of extract of belladonna. Having covered the left eye with a bandage, he made steady the right one with his left hand (Mr. L. frequently impresses on the pupils the necessity of practising with both hands alike, as, for instance, in this operation on the left eye, in cutting for fistula ani on the right side, and various other operations), he then introduced the cataract-needle with his right hand, about a line or so from the junction of the sclerotic coat with the cornea, and reclined the cataract, gently disentangled it, and withdrew it cautiously. The eyelids were then closed, and a small piece of lint dipped in cold water, and a bandage, were applied to the eye. Mr. Lis-TON remarked, that in the generality of cases this was the preferable operation.

ST. BARTHOLOMEW'S HOSPITAL.

OSTEO - SARCONATOUS TUMOUR OF THE LOWER JAW — OPERATION — EXCISION OF THE BONE.

Ox Saturday, Oct. 17, an interesting-looking girl, of about sixteen years of age, was led blindfolded into the operating theatre. On being secured on the table, the disease evinced itself by a tumefaction in the situation of the left side of the under jaw-bone. Mr. STANLEY intended, in accordance with the joint approval of his colleagues, to remove the morbid growth by extirpation of the diseased bone. He commenced by an incision extending from the symphysis of the chin to the articulation of the jaw, on the left side, in a curved direction, according with that of the shaft of the bone. On refleeting the integument, the external facial artery was wounded. This was secured by Mr. LAWRENCE, who assisted the operator, who then proceeded to dissect cautionsly through the buccinator muscle and the coverings of the maxillary bone, about an inch inferior to the duct of the parotid gland; in accomplishing this, several small branches of the external maxillary artery were divided, and successively secured by the assistant. After carefully exposing the whole shaft of the bone to above its angle, Mr. STANLEY separated the muscles which were attached to its inferior margin as well as its internal surface, by means of a common scalpel; and having thus cleared away all the soft parts, the morbidly enlarged bone formed a conspicuous object. At about a quarter of an inch on the right side of the symphysis, Mr.S. commenced to saw through the jaw-bone with a small straight saw, and after making a groove in it, the short bone forceps were applied, but ineffectually. On exchanging them, however, for others with longer handles, the bone was at once cut through. A similar process was adopted at the angle, with the same success, and the detached portion of bone was then removed by separating the lingual and other muscular branches which confined it to the soft parts in its neighbourhood. After securing a few bleeding vessels, and cleaning the parts adjacent to the face and the wound, the edges were approximated, and confined by means of three sutures and some strapping. The poor girl hore the operation with admirable fortitude, though it lasted more than half an hour.

After the removal of the patient, Mr. STANLEY came forward and stated that the was a case of osteo-sarcoma, original the cancellous structure of the island by the cancellous structure of the land that and internal surface.

tion. He did not consider this morbid de- | on the left side of his face and nose. Durvelopment to be of a malignant nature, inas- ing the two last years the swelling and pain much as it wanted those symptoms which of the part had increased, and several miusually attend that class of diseases. Some nute portions of the bone of the antral cavity practitioner, who had visited the patient in the early stages of the disorder, plunged a knife into the tumour, but no bleeding resulted, nor did the formation of the tumour cause any pain or constitutional derangement. Still, however, it was desirous in these cases to practise extirpation, in consequence of the rapid growth of this fungus, and the displacement of parts occasioned by it.

A section of the morbid parts was made, and the specimen handed round to the pupils. It presented a fibrous structure, of a radiated form, including in its interstices a matter resembling albumen. The patient is doing very well.

STRANGULATED FEMORAL HERNIA. -Mary Bradshaw, ætat. 59, whose appearance rather indicated the age of fourscore years, was brought into the hospital on Sunday the 6th of September, for the relief of an incarcerated femoral hernia, which had been in a state of strangulation for a period of ten days.

Mr. LLOVD, considering all the circumstances of the case, determined to operate at once, and therefore at once resorted to the knife. On an expose of the contents of the sac, the intestine was ascertained to be in a state of gangrene, and adherent to the mouth of the crural ring. Under these prejudicial circumstances, it was determined merely to divide the stricture and permit the mortified gut to remain undisturbed in the sac. The edges of the wound were therefore approximated, and the nationt was removed to bed. with, however, an exceedingly unfavourable prognosis. The pulse gradually degenerated, and on the succeeding Wednesday evening, although braudy, carbonate of ammonia, strong broths, eggs, &c., were liberally supplied, the patient expired. On a post-mortem investigation the peritoneum exhibited decided evidence of inflammatory action having pervaded that tissue; the strangulated intestine was in a state of complete sphacelus, and had become adherent to the interior of the sac and the mouth of the ring.

ST. GEORGE'S HOSPITAL.

is disease was admitted into time since, under the Eight years previous was stated to d been bruised

were discharged at different periods through the left nostril. The treatment of the case was very simple. An opening was made through the superior maxillary bone over the alveolary processes into the cavity of the antrum. A probe was introduced, and dead bone was felt. The day after this operation the man was in a high state of febrile delirium, which was subdued by rest and antimonials, combined with Dover's powder. During the man's stay in the house, Sir B. BRODIE (at the request of his pupils that he would render the case one of instruction) made the following clinical observations thereon :-

" Here, then, gentlemen," he remarked, " we have an instance of injury of the face : at the end of eight years afterwards, portions of dead bone are discharged from SPHACELUS OF THE INTESTINE. - DEATH. the neighbouring parts, and, I may add, that they will certainly continue to be discharged for some time to come. This case leads me to speak to you of diseases of the antium generally, and to draw your attention to the present patient, whose circomstances are interesting to the surgeon. No clear account is given of the diseases of the antrum by surgical writers.* cases are rare; I have, however, seen several instances of inflammation of the superior maxillary bone. I believe that in these cases the inflammation is not dependent on local causes, but is produced and caused in the same manner as rheumatic inflamma-

"Inflammation of the lining membrane of the antrum may terminate in supporation. The cavity of the bone may be transformed into an abscess, and pus may be discharged. I conclude that such must have been the case here. Generally, when the disease runs to this height, the cause is local, and is frequently to be found in a diseased tooth. A person has a bad tooth, a malar, a cuspidatus (if the fang he large), or a bicuspis. He does not like to lose it, and he puts up with the pain and inconvenience until the pulp of the tooth becomes dead and irritates the membrane lining the alveolus, like a piece of dead bone, sooner or later. Inflammation and suppuration take place, and the matter does not escape. It may present under the gum, but sometimes it is lodged at the bottom of the alveolary socket. The bone above is absorbed, the periosteal lining of the alveolas, and the membrane lining the antrum, ulcerates; the bone becomes dead, matter collects in the cavity, and the patient suffers great torture. When the antrum is affected, there is a dull constant sense of pain over the part, with lancinating

Some of them will stare at this.

pains shooting through the cheek. There is of the cavity. They at first cause but little with cedema and redness. The patient may remain in this state for a length of time. The matter is discharged from the nose or not, according as the aperture may be open or plugged up. If the former, the patient feels relief from the discharge. In these cases there is generally some dead bone, but there is no difference in the symptoms, so far as my experience goes, whether dead bone be present or not, but the former is the more telious. You may apply leeches to the part, and put the patient on the usual antiphlogistic treatment; but this does not strike at the root of the disease. The first thing is to draw the diseased tooth, which will in some cases open to you a free communication with the antrum, when the patient experiences immediate relief. Sometimes you will find the discharge from the part very trifling, and in some cases there is none at all. If this should happen, the plate of bone hetween the alveolar process and the antrum is very thin, and may easily be broken down by a sharp-pointed instrument, and the two cavities laid open into one, when you may explore the antrum with a probe, and if you find dead bone there, you must wait until it has exfoliated. When you have made a free opening, keep the patient quiet, and keen a catheter or bougie in the opening, to prevent it from closing up. Through this you should inject the antrum with a syringe, very frequently. If the discharge come away through the nose, well and good. If it do not, you will know that the opening between the turbinated bones is closed, and the case may become troublesome. Suppose that the alveolary socket is filled up with dead bone. You must then make an opening. You would not make it through the jaw, because that is a bad place. Raise up the cheek, and then with a scalpel divide the membrane above the alveolar process of the molar teeth, and, having exposed the hone, make a circular opening in it, with a strong trocarshaped instrument. The instrument must be strong, or else it will break instead of the bone. I used a pair of strong sharppointed scissors in this case, the other day, because I had no other instrument at hand, when I introduced my little-finger into the antrum, and was enabled easily to hook out every piece of dead bone. There is a plug in this wound, to keep it open, and it is frequently syringed out.

" Some writers describe a polypus of the antrum, and have given descriptions as to how it is to be tied and extracted. This is perfectly hypothetical. I never met with a case of the kind, and I do not believe that

Malignant diseases, such as fungus hamn-todes and carcinoma, affect the antrum. wards, and its They grow from the inner lining membrane ever any "intell

slight effusion under the skin of the cheek, pain, and show no symptoms by which they can be recognised; but hy-and-by the tumour enlarges, pressing outwards on the cheek, upwards on the orbit, and downwards on the palate bones, extending itself, in fact, in every direction. The bony substances of the autrum and alveoli become destroyed, and the teeth drop out. The tumour increases, the walls of the antrum ulcerace, and the fungous growth protrudes. The cheek now becomes affected, and the eye may be pushed out of the orbit, causing blindness, or the roof of the month may be broken down, and the tumour press upon the tongue and nose. The growth of the part now becomes more rapid; there is a profuse discharge, and occasional bleeding from its surface; the patient becomes weak, gradually sinks, and dies. I do not know anything more distressing than the deathbed of a patient in this disease. There is a paper on this subject by Mr. TRAVERS in the Medico-Chirurgical Transactions. Such cases are, unfortunately, not rare. I suppose it must have been the occurrence of these cases which led to the idea of polypi of the antrum. Some have supposed that these may be removed by being turned out, or by the application of the actual cantery to them. DESSAULT I believe it is who had a case of this kind in which the patient remained free from the disease for three months; but you know that a malignant disease may return after twelve months. I tried the method of proceeding by turning out the tumour; the check bulged out, and the bone had been absorbed. With a scalpel I cut down upon it; the tumour was soft, and broke down, but I turned it out. There came on most frightful hemorrhage, and I plugged the antrum with blue lint, hoping that it might slough out. It did so partially, but the patient was not cured, and he died soon afterwards."

> The perambulation of the bospital is in regular periodical progress for the session. From the senior surgeon down to the deputy-assistant surgery man, and from the apothecary's sub-assistant down to Rodenick MACLEOD, all are at their posts, and there will continue—pro tem. At present, "one o'clock" finds them all on the move. Notice of every operation, autopsy, and inquest, is punctually posted up. Clinical lectures are given by Dr. SRYMOUR every Saturday, at four p.m.; by Dr. Wilson on pathology, every Monday at half past two p in.; by Mr WALKER OR Some surgical case, Thursday at a quarter before 4 p. Sir B. Brodie every Tues one p.m. on a surgical

ADVICE TO ROSPITAL PUPILS. On opening the "Clinical Course" on argery, Sir B. BRODIE addressed the folwing remarks to the junior pupils: "I propose to commence a course of linical lectures, and in each lecture I shall seak to you of some one case in the hosital, and in order to investigate some of the portant cases fully, I may perhaps deliver you three or four lectures upon one subect. This, however, I shall not do frenently. To explain to you these cases, owever, is only one object of a clinical cture. To know surgery well, it is necesury that you should know anatomy, chedistry, and materia medica, for these only ill give you a clear insight into its practice. in entering an hospital to study cases, it not merely necessary to study them to nable you to pass an examination at the Col-ge and Hall. You should observe and andy the cases for yourselves. That is the aly way to extend your information. When I examine a young man at the College, I esteem the knowledge which he has acquired by inquiring for himself, much higher than that which he has acquired by lectures. The explanation of hospital cases is of great service. The clinical observations which we make to you at the hed-side of the patients, can be heard but by few; I say you should therefore notice the cases for yourselves. I advise you to go round the hospital frequently. Go round with the surgeons, the house-surgeons, and even with the dressers and senior pupils, for those gentlemen have seen more of hospital practice than you, and can therefore give you much information on many subjects with which you are as yet unacquainted. There are always to be found cases of greater or less importance in the wards; but of these the latter should more particularly attract your attention. Many will pass by cases of cut fingers, or sores, or little fractures, as trivial affairs; but will you not continually meet with such cases in private practice? Make it your business, therefore, to understand them. Your first attention in the hospital should be directed to these, after which you may proceed to those of greater importance, which are only made up of minor effects. In a compound fracture, for instance, you have two minor points, a wound and a simple fracture, making up a greater one-a compound fracture. If you do not understand either of these minor ones, how are you to understand this? If in ping round the wards you are told of a ing sore, go and look at it yourselves,

this very much to be the case when first I began to lecture on surgery, and I soon discovered that there were a great many subjects to be treated of in my lectures, a knowledge of which I had yet to acquire. Be very minute in your observation of symptoms, as you may otherwise omit much that is valuable in the diagnosis of a case. There is only one way in which you can study cases sufficiently to remember them, and that is by taking notes of them for your own use, once or twice daily, or at certain periods, as may be necessary to impress the facts on your memory. I have been in the habit of keeping notes of many cases. When I commenced practice, I took down notes of every case. Now I take down fewer notes, and only those that are important. I have many volumes of these notes by me, and do you suppose that I find them useless? Do you think that I consider them as waste paper? By no means. On the contrary, I derive very great advantage from a reference to them. Take notes of cases then, and take them fully: there are no opportunities for study so useful as those which occur in an hospital. Years of private practice will not yield you the same advantages. Let me therefore urge upon you most strongly, not to neglect your hospital studies."

INGUINAL HERNIA, NOT STRANGULATED NOR REDUCED .- OPERATION .- DEATH.

WILLIAM HARRISON, admitted Sept. 14th, at 12 o'clock at noon. Sir Benjamin Brodie being absent, Mr. Cutler, the junior assistant surgeon, took charge of the case. On examination, there was found a punctured wound at the upper and inner part of the left thigh, on a line even with the base of the scrotum; and a large tumour of the left side, of the usual size, and occupying the usual situation, of inguinal hernia. The man stated that he had been afflicted with "the windy rupture" for fourteen years, but that up to the present time he had been always able to return it easily. Four days ago he met with a fall, when a metal spike ran into his thigh, and at the same time he received a blow from an iron rod over the part now occupied by the hernial tumour. These he stated to have caused the descent of the hernia, which has been down ever since. Mr. Cutler saw him immediately on his admission, and after examining the case, he requested the opinion of Mr. Keate (who was going round the hospital at the time) upon it. The surface of the skin covering the tumour was red; and, in the opinion of some gentlemen present, crepitated upon presbe any thing about it that you sure, indicating inflammation of the cellular ask the house-surgeon, or tissue beneath. We could not, however, the more experienced detect any symptom of the kind. The lower the more experienced detect any symptom of the kind. ou may depend part of the tumour was barder (Mr. Keate hers. I found upper, which was elastic, and was driven

down, upon the patient attempting to cough. the swelling, until the preceding four days, A probe introduced into the wound of the was untrue. Immediately after the sperathigh did not pass to any distance under the tion he was ordered, Calomel, five grains; skin. There were no very urgent symptoms present; there was no vomiting or hiccup, and Mr. Cutler, we were told, was rather doubtful as to the tumour being a hernia at all. Yet it seemed very evident to every one else in what the disease consisted. Mr. Keate remarked that there were no urgent symptoms present, but that eventually the operation must be performed. The man was then we believe put into the warm-bath, and the taxis was employed, but ineffectually. He had been twice bled before his admission.

At 3 p.m. Mr. Cutler performed the operation, assisted by Mr. Hawkins. The layers of fascia were successively divided upon a silver director, until the sac was opened, and a large knuckle of healthy intestine from the sigmoid flexure of the colon protruded. Mr. Cutler pushed his finger up to the external abdominal ring, and declared that the intestine was not strictured by it, but that it was quite free. Mr. Hawkins pushed his fingers down to the bottom of the sac, and passed them completely around the gut; but, after further manipulation, the intestine was not reduced, but left extruded from the abdomen, and the wound was united by sutures. After the man had left the operating theatre,* Mr. Cutler made some remarks on the case to the pupils present, the precise meaning of which we were unable to comprehend. Indeed we doubt whether any of the pupils who witnessed the opera-tion were able to understand why it was performed; nor was it until in a conversation between Mr. Cutler and Mr. Lanc, when the latter gentleman made some general remarks upon the case to those around him, that any one could account for the circumstance of a hernial sac being simply opened and sewed up again. Mr. Lane said that the contents of the hernial sac consisted of a portion of the sigmoid flexure of the colon uncovered by peritoneum; that it had become attached by longstanding inflammation to the base of the sac which rested on the contents of the scrotum, and, by its posterior surface, to the anterior and inner surface of the muscles at the superior part of the thigh. These old attachments not being able to be broken down, the intestine was prevented from being returned into the cavity of the abdomen. It therefore follows that the statement of the man, previous to the operation, that he had been always able to reduce

the man was lifted from the operating theatre to his bed in Drummond ward, but owing to some great neglect lie was, before the operation, neather into the theatre. The porter and surgery-men are new in their vocation, and like machinery on the first night of a pantomine, they work very "stiff,"

Compound Extract of Colocynth, ten grains, to be taken immediately.

On visiting him in the evening, six hours after the operation, he was found much casier. The tongue was moist, the pulse 80 and compressible, and he complained of no fixed pain. The bowels had not been lieved, and he was ordered Sulphate of Magnesia, two drachins; Infusion of Roses, one onnce and a half, every three hours: and

Soda Water for common drink.

Sept. 15. At half past twelve Mr. CUTLER saw him; the bowels had not been opened, and he had passed a restless night; the tongue was dry, and furred in patches; the pulse 85, and full. There were also general pain and tension over the whole abdomen (which had been fomented with warm flannels), and severe headache. He had been ordered three grains of calomel every four hours. On finding the patient in this state, Mr. CUTLER appeared auxious to "draw off the wind" from the belly, as a means of relieving him from the severe tympanitic tension under which he laboured. The man was ordered to lie on his right side, whilst Mr. CUTLER introduced an elastic tube into the rectum. This came in contact with the hardened feces, but did not bring away any "wind." A catheter was then introduced, and forced through a mass of feces, and a stilette was passed through the catheter, but no evacuation followed. Two stomach-pumps (Wiess's and Read's) were now procured, and an exophagus tube was introduced, and warm water was attempted to be injected per anum. The mechanical action of Mr. Weiss's instrument not being understood, it proved to be of no avail, and Mr. Read's was used instead; about a pint of water was injected, which the patient was unable to retain, and which served only to wet the draw-sheet on which he lay. Every method of drawing off the wind having failed, the man was left at rest, and the calomel ordered to be continued. The patient frequently complained of faintness, and vomited a little after the attempts at "drawing off" were discontinued. He was allowed beef-tea for diet. Mr. Cutler's reasons for acting as described, were founded upon his having followed a similar course in a "stone case, with great success; but doubts may fairly be entertained of the propriety of irritating the mucous membrane of the bowel near to the scat of a half-strangulated irreduced hernia which had undergone a tolerable degree of manipulation scarcely twenty-four before. The justness of this opinion somewhat confirmed by the bleeding the man in the ration which was

himself, to the l'espere. T opened; there is less tension and pain over flammation of the bowels, following a blow the abdomen since the bleeding, and pres-ure can be borne. The blood is highly cupped and buffed; pulse 80 and small; hiccough, and vomiting. The operation was anxious

amount of six onuces; the blood is highly buned and cupped; and has been again bled by the house-surgeon to twelve ounces this morning, the blood being as much cupped, but less buffed. The pulse is 100 and small, the tongue moist, and countenance less anxious, but the bowels have not yet been opened. He passed a restless night, and is was ordered Calomel, three grains; Compound Extract of Colocynth, ten grains; to be taken immediately. The prognosis of the case has now become unfavourable.

Vespere .- He is worse than at the morning visit; the bowels have not yet been relieved. Since the morning he has taken two doses of castor oil of one ounce each. Pulse quick and full, 100; abdomen tense and painful; countenance anxious; he is very restless. Soda water for drink.

17. On visiting the hospital this morning, his bed was vacant, and his body about to he removed to the dead-house. He sunk been administered to him, but without the least effect, and from the time of the operation until the hour of his death, the bowels were never relieved. The last medicine he took was port wine.

Autopsy twenty-four hours after death.

On opening the cavity of the abdomen, the general appearance presented by the coats of the intestines, was that of severe inflammation. On examining more par-ticularly that portion of the sigmoid flexure of the colon which was extended through the abdominal ring, it was found to be deeply injected with blood, the red vessels appearing very prominently through the gulated, and was returned very easily into the cavity of the abdomen by Mr. Lane, who was present. There was no band con-necting it to the bottom of the sac, and nothing but a thin adhesion between one of the appendices epiploicæ, and the posterior

ere not examined.

over a portion of extruded intestine. symptoms were followed by constipation, tongue moist; has not been sick since the performed to relieve these latter, which it morning; slight singultus; countenance failed to do. The constipation was attempted nxious. to be relieved by purgatives given only by 16. He was again bled last night to the mouth, the few injections that were administered being too mild (consisting principally of castor oil and sulphate of magnesia) to be of any service; whilst the severe inflammation was combated by four general venesections, of no great amount, the first of which was only performed twenty-eight hours after the patient had been in the hospital. Had the operation not been perstill restless; there is less tension and pain formed, and the venescction and purgation of the abdomen. His diet is beef tea. He been pushed to a greater extent, and had a generally bolder line of practice been adopted, the termination of the case would probably have been different.

Some doubts, we believe, were entertained as to the propriety of holding an inquest on the body. It was, however, eventually determined that one should be held,-when the assembled jury with an ignorant coroner at their head (on what evidence we know not), returned a verdict of "Died from Mortification." The morbid appearances afforded no ground whatever for the verdict, and a gen-tleman of competent anatomical and surgical acquirements, who also carefully exgradually, and died about twelve at noon amined the parts implicated in the hernial Purgative medicines, colocynth and calo-protrusion, informed us that he could dismel, calomel and opium, and croton oil, had cover nothing approaching in its pathological appearance to either sphacelus or mortification.

LOCK HOSPITAL.

CASES OF GONORRHOEAL DISCHARGE ACCOMPANIED WITH CONDYLOMA AND CONDYLOMATOUS ULCERATION.

Case 5 .- Margaret Gawlor, ætat. 18, admitted, Nov. 17, under the care of Mr. WALKER. She has been on the town three months, and has had a discharge from the vagina nearly the whole of that time. The condylomata, with which she has been affected, have been present for two months. The vaginal discharge was preceded by a scalding in passing her urine. At the commencement of her complaint she took six calomel pills, one every other night; this affected her mouth, which is somewhat sore part of the sac (which might casily have now. There is at present a profuse, thick, een broken down) prevented its complete yellow discharge from the vagina, which within the external ring. These exhibits some preternatural vascularity over pathological points in the case the vestibulum and orifice. There is an The cavities of the irregular gray sloughy ulceration over a patch of confluent condylomata, elevated much above the surrounding skin, and pre-senting more or less a warty character and by severe in-appearance, occupying the entire margin of

the left labium and apper part of the right | with a great tendency to sickness, and pain one, where however it is more circular and isolated; it also involves the right side of the perineum inferiorly and posteriorly to the labia. There is a thick yellow secretion from the posterior fauces; there is no in-creased vascularity about the throat and tonsils, which are but slightly enlarged; the right one, however, more so than the left. She complains of much general debility, and has a pleuritic pain in the left side, which prevents her lying on that side, and is sometimes increased on taking a deep inspiration. The tongue is clean but white; appetite impaired; pulse hard but compressible, 96. Bowels and catamenial secretions are regular. She never was preg-nant, and denies ever having had any previous venereal disease.

Nov. 7. The Acetate of Lead lotion was

applied to the ulcers.

8. This was changed for Oxymuriate of Mercury gr. 25 to 3j; Washed Sulphur 5j; Carbonate of Magnesia 3j: every morning carly. She continued this plan of treatment

until the

17th, when, on visiting her, we found her complaining of want of rest at night from pains in her limbs. She is very weak. The pulse small; tongue slightly furred. There is mercurial fetor of the breath, and the gums are tumefied; no appetite. Sulphur and Carbonate of Magnesia to be discontinued, and she was ordered, Comwound Decoction of Sarraparilla 3ij; Nitric Acid diluted may: three times daily.

22. To use the cinnabar fumigation every

night.

27. She is much better in her health. The vaginal discharge is less, and the condylomatous thickening of the left labium is diminishing, and the ulceration is healing, and covered with a dark dry scabious surface. She complains of great thirst, nausea, and syncope. To continue her medicines.

Dec. 6. She complains of great nervous trembling and syncope; pulse quick and fluttering. The condylomatous ulceration has still a warty character and appearance. Ammoniated Tincture of Valerian 5; Camphor Mixture 3iss : twice daily. The sarsaparilla to be discontinued. Solution of Chloride of Soda; Water; of each equal parts, to be applied to the ulcers. The cinnabar famigation to be continued.

11. The valerian draught was changed to-day for the Tincture of Muriale of Iron

May, three times daily.

13. She is certainly better since taking the steel. The affection of the labia is

15. Her bowels being somewhat disordered, the cinnabar fumigation and the steel medicine were omitted, and she was ordered to take a Rhubarb Draught with Tincture of Opium.

20. She is still very low and nervous,

on pressure over the epigastric region. She was therefore ordered to take the following powder at hed-time :- Mercury, with Chalk gr. ij; Compound Ipecacuanha Powder gr. v; Powdered Rhubarb gr. iv; Carbonate of Soda gr. x, and to have the abdomen treated with tepid fomentation.

22. To-day she was ordered Compound Tincture of Bark 5j; Aromatic Spiri of Ammonia gtt. x ; Decoction of Bark 5x : three times a day, and to have fish-diet and kill of port-wine, and half a pint of beef tea. Her strength gradually increased under this plan of treatment; the condylomatous nicerations and labial sores healed, and she left the hospital soon afterwards at the request of her friends.

Case 6 .- Julia Healey, ætat. 21, under Mr. WALKER. She has been on the town for two months, but her present complaints began four months since, with an intense itching of the pudendum, after which (two months since) a vaginal discharge came on. She has had severe scalding on passing her urine for four months, and ulcerations of the labia for two months. She has also had ulcerations without the labial commissure for two weeks. Three months since she took copaiba for one week, and has had promiscuous intercourse to within the last two mouths. Her present symptoms area profuse thick yellow discharge from the vagina, with much scalding in passing her urine, and general increased vascularity of the labial surfaces. There is condylomatous alceration of the nymphæ, with a superficial yellow ulcerated surface at the upper part of the margin of the left labium. There are several isolated condyloniatous ulcers in the external commissure between the right labium and thigh; the throat presents no particular abnormal appearance. The general health is very good. The catamenial discharge commenced at sixteen, and has been absent for the last four months. She has had one child, and has aborted once. She has had no previous venereal disease. There is much thickening of the præputiom chloridis. She was purged with Calomel and Senna, and the Acetate of Lead lotion was ordered to he applied to the parts.

June 23. To take a bath twice every week, and to continue the Acetate of Lead

lotion.

26. The discharge from the vagina has not diminished, but there is less scalding in passing her urine, and less general vasc larity and tenderness of the parties mouth is tender and the gums are pery taste. The Black to the ulcerations,

of the Acetates

iection. July 3. She all discharge for the last five days, and the | skin is of the tubercular character, and does and tumid, but there is little ptyalism. Medicines to be continued.

10. The condylomata have all gone. The gums are very tender, and at the back part of each side of the jaw they are ulcerated. she says that the vaginal discharge has rearned. The pills to be continued, and the stragth of the injection to be increased.

26. She is much better; the vaginal discharge is pale and small in quantity. The vestibulum is blue and vascular; ptyalism continues; the gams are florid, but not so much alcerated. The same plan of treatment was persevered in until the 7th of August, when she was discharged cured.

Case 7.-Ellen Trevelyan, actat. 20, admitted Nov. 20th, 1834, under the care of Mr. WALKER, with condylomatous labium, gonorrhora, and bubo. The history which she gives of her present complaints is very imperfect. She has been married ten months, and says that soon after her marriage she had scalding pain in voiding her urine, which has gone off and returned again several times since, but she has remarked no discharge until six weeks since. She has had a bubo and condylomatous affection for one month. She has had no connexion for three months, and has only taken a little opening medicine. She has at present a very abundant thick yellow discharge from the vogina, with much scalding pain in passing her urine. There is enlargement and thickening of the left labium with superficial condyloniatous ulceration along its inner margin, and there is one insulated condyloma at the inferior extremity of the right labium. The hubo is in the left groin, of the size of a walnut, and not at all painful; the inner surface of the throat is slightly vascular; the toosils are enlarged, more particularly the right, general health good; tongue furred; bowels confined; catamenia regular. She has never been pregnant.

22. She was ordered to take the White Mixture Biss twice daily, and to use the Saturnine Lotion.

28. The vaginal discharge is nearly gone, and the scalding is much diminished. The labial inflammation remains the same. A few spots of lepra have appeared on various parts of the body within the last few days. To take three grains of Calennel and three grains of Rhubarb at hed time, and to use the bath twice a week; a Blister to be aped over the bubo.

says that the discharge from the

scalding is almost gone. The gums are sore not partake of the characteristic appearance of legra, there being a circular deposition on the cutis, though under a slightly desquamating surface. Those spots which first appeared on the skin, are now so far advanced as to have left only a brown syphilitic stain on the skin. Some of the characteristic symptoms of the case bear now an apparent resemblance to a secondary eruption, succeeding to condylomata; although the ulceration at the inferior margin of the right labium does not partake of all the characters of condylomata. To continue her medicines.

Dcc. 2. She is much better to-day, the tubercular eruption is thicker on the skin. partaking of a mixed character of lepra and tubercle, some patches having the distinctive characters of each, whilst others assume the appearance of an intermediate variety which has been named small psoriasis. There is one leprous scab with some surrounding redness under the right scapula. The case exhibits specimens of the three varieties of eruption, of simple stain on the skin, lepra, psoriasis, &c. On closely questioning her, we learnt that about three weeks since, she remembers having a sore on the lower extremity, which bled.

6. The eruption is increasing, there are light yellow scabs over the scalp around the roots of the hairs. There are several wellmarked spots of lepra on the skin, but fewer of psoriasis. Some of the glands of the neck are swelled; she is very weak and low, with some disposition to syncope. Many of the symptoms being now severely aggravated, and the decided syphilitic character of the disease not to be doubted. Mr. WALKER determined to put her on a mercurial course. She was ordered to apply the Black Wash to the ulcers, and to rub in half a drachm of the Mercurial Ointment every night.

13. She is very much improved in health; the syncope and trembling subsided soon after she commenced taking the mercury; there is now incipient ptyalism, with a coppery taste in the month. The cuticular cruption has much subsided, and some of it is desquarenting. The excoriation and ulceration of the labium have healed, and the thickened appearance of the parts has gone down. Blue Pill five grains; Extract of Henbane two grains: to be taken in a pill twice daily.

20. Her improvement has been very rapid. The cruption over many parts of the body has quite gone, and in others there is only a scabby stain left; there is but little stopped, but that some little thickening of the labia left; she complains he complains of great of some pain over the epigastric region soon at does not advert after taking the pills; there is free salivation thesa. The present; there is slight puffiness over the uption on the to be slightly ulcerated. She was ordered

OPERATIONS.—METEOROLOGICAL TABLE.

Blue Pill four grains, Extract of Hemlock | five. The operation was somewhat delayed three grains, in a pill twice daily. The Black in consequence of the unusual smallness of Wash to be continued, and the Alum Gargle | the nerves surrounding the artery ; but, ulto be used to the month,

and there is but very little remaining thick- above the knee, for strumous disease of that ening of the left labium; the right labium joint, was afterwards performed by Mr. B. has more of its natural feel and appearance; Cooper. On the 7th, lithotomy was perthe discharge from the vagina is only small formed upon a man aged about forty-fire or in quantity and temporary in its appear-inftyyears, by Mr. Key; the patient is likely to ance; the tonsils are much diminished in do well. The convenience and advantage of size; the ptyalism still continues. A lotion the students at this hospital would be much of Oxymuriate of Mercury gr. j, to 3j of served, if surgeons were to attend on opera-water, to be used, and the injection to be tion days with more exactness as regards persevered in. She continued the use of time, than they sometimes observe; much these remedies for some time, and was made thumping of boards and pannels, and other an out-patient for a few weeks, when she sources of unsuitable noise, would then be discontinued her attendance at the hospital, spared, which is painful to the patient and being quite cured.

LONDON HOSPITAL .- On the 3rd instant the operation of lithotomy was performed at this hospital upon a boy about ten years of answers to Correspondents, are unavoidably age, by Mr. Luke. Some difficulty was experienced in the extraction of the stone, owing to its magnitude, as it measured in the longitudinal direction an inch and a half;

the operation for tying the femoral artery sublication, under the table immediately be low, was performed at this institution by Mr. With the headed, "Horras, Sr. Louis" Will key, upon a man of about the age of thirty- with theirpes.

timately, not the least branch of nerve was Jan. 5. The eruption is very nearly gone, included in the ligature. An amputation derogatory to a scientific audience.

CORRESPONDENTS.

Many reports of Societies, papers, and

transversely about an inch. The calculus was of the cystic oxide kind. The patient did well.

Guy's Hospital.—On the 5th instant should have been placed, in arranging the mater in Patis,"

METEOROLOGICAL REPORT.

(Extract from a Meteorological Journal kept at High Wycombe.

Lat. 51° 37' 44" North, Long. 34° 45" West.)

Days.	Thermometer.		Barometer.		Rais.	Wind.	Weather.
	Highest	Lowest.	Highest.	Lowest.	Ins. Dels.		
Oct. 12	49.50	49.50	29.64	29.58	0.15	N.W.	Fair in morn ; afterwards rain.
13	57.50	50.	.74	.65		S.W.	Dull, with slight misty rain.
14	55.50	42.50	30.05	29.93	_	N.W.	Dull, but no rain.
15	55.50	47.	.12	30.09	0.00625	N.	Dull, with some little rain,
16	53.50	45.50	.13	.0 <i>ti</i>		N.	Heavy, but no rain.
17	52.50	40.	.03	29.99	-	E.	Threatening, but
18	50.	28.	.02	.51	-	E.	Fine three

THE LANCET.

Vol. I.]

LONDON, SATURDAY, OCTOBER 31, 1835.

[1835-36.

ST. THOMAS'S HOSPITAL.

CLINICAL LECTURE

DELIRIUM TREMENS,

DELIVERED BY

DR. ROOTS.

On Monday, October 26, 1835.

to be one of very considerable importance to have been in a practical point of view; and atthough, still further perhaps, some of you did not see the pa- His eye was so tient, yet I observe many present who nance not watched the case very attentively through- aspect. out its progress. It was a case of affection by laughte. read to you the report of the clinical clerk, detailing as 1 proceed the principles on which I was induced to treat it, and afterwards speaking of the disease generally.

convulsive movements of the limbs, and in distance in a perfectly insensible state; and since the occurrence of a very bad fit which pened twenty years ago, he has dragged

t leg after him, at the same time

that he has been lately in very difficult circumstances, from poverty, which had acted much on his mind, though on Thursday the 6th of August, three days before admission to the hospital, he contrived to drink a bottle of wine. On the next day he did not appear to his friends to be perfectly rational. On Saturday he fell down in a fit, and from that time he has had delirium. The irrationality increased from the time he bad the fit. He was admitted on a Sunday, (I did not so, him then,) and his skin was hot. and his forchead pale, and perspiration stood upon it; he was continually delirious, talking incoherently, and repeatedly uttering the same words .gain and again. His face I HAVE selected a case, gentlemen, for my the same words gain and again. His face first discourse with you, which I consider is stated to have een finshed, and the pupils ontracted, contracting · application of light. h Wight, his countets natural enc was accompanied his own jokes. He says that of the brain and nervous system. I shall he feels no pain any where but in his feet. The head is free from pain. Now the reason of his complaining of his feet you will see in a moment. The medical man who had visited him before he came into the Henry Grey, a man above the ordinary hospital, had very properly directed his stature and rather of a robust habit, aged feet to be put into warm water; and into 39, was admitted on the 9th of August, with warm water they had indeed been inserted, a statement by his mother that for the last for they had actually been boiled, and now twenty years he has been subject to fits. presented complete masses of blisters. In those fits he usually falls down suddenly, Every one of his toes had some portion of becomes perfectly insensible, and experiences the enticle separated from it, and he seemed fully aware of their condition. His tongue that state he remains for a few minutes, or he puts out after a little solicitation; it is perhaps even for a quarter of an hour. She very slightly coated, and rather dry; there states that he neither hites his tongue, nor is no tenderness of the abdomen, but it is froths at the mouth, but discharges large rather tumid at the lower portion, and he quantities of flatus from the stouach when discharges a good deal of flatus per anum. the fit is over. It is added, that occasion- His bowels were operated on by medicine ally, instead of falling down, he walks some before his admission, and he was bled twice, and had leeches applied to his head. His pulse on admission was 120, full, and admitting pressure.

then to have been more severe. It appears

Well now, when Mr. STONE saw him in weakness in both legs. this condition on his admission into the hosda half ago, after having pital, considering, and very properly considering for three sucdering, the state of his pulse, he ordered similar to the sixteen ounces of blood to be taken from the but stated it arm, directed a cold lotion to be applied to given to him every six hours. The report next day states that he passed a very restless night, that he was delirious and raving at intervals; his head and skin were very hot, but yet they were copiously bedewed with perspiration. He complains of nothing but his feet, and asks every body who goes near him to loosen the straps. You ought to be informed that he was brought to the hospital in a strait-jacket, and remained in one ever since, and had been fastened to the bed by leather belts. The tongue is now pretty clean; the pulse 120, and rather jerking. He continues in much the same state, raving, and talking indecently and lewdly all the day. Now it was at this time that, happening to be at the hospital, though it was not my day, I was requested to see him. I do not know that it would have been absolutely necessary, even if there had been proper people to sit by his bedside to have confined him as he was confined: indeed, it is quite impossible here to have people employed for that purpose in the case of every such patient, for a dozen similar patients may be in the hospital at the same moment; it therefore became necessary to confine him in another manner,-in the manner I have stated. Well, on carefully examining the case, and finding there was heat of the head, -finding that the pulse bore a considerable degree of pressure, and that the tongue, though not much coated, was still a little drier than one would have expected in the disease-in the true disease, (of which I shall speak by and hy,) -finding these things, and taking the history of the case into account,-its occurrence after intoxication or excessive drinking, -excessive, when compared with the abstinence which he had previously been obliged to undergo, taking also into consideration the nature of his delirium, which, although he talked, and hallooed, and raved, was, notwithstanding, not difficult to subdue; and finding, in addition, some tremor in the hand, and some tremulousness in the tongue, I pronounced the case to be, and now present it to your notice as, a case of delirium tremens,—that description of delirium tremens which has been considered by some authors as the second species of delirium tremens, namely, delirium tremens with high vascular action in the membranes of the brain, or in a portion of the brain itself, or in both; or, in other words, irritation of the brain,-with inflammatory or congestive action going on in that organ.

Perfectly agreeing, therefore, with the propriety of Mr. Stonk's treatment as regarded bleeding the patient, but knowing that further bleeding should be had recourse to only most cautiously. I did not hesitate, under those circumstance, to repeat the bleeding moderately and beauty, by ordering eight ounces to be taken with the cupping-

the head, and had three grains of calomel given to him every six hours. The report next day states that he passed a very restaless night, that he was delirious and raving at intervals; his head and skin were very hot, but yet they were copiously bedewed

Now the prognosis in this case was exreedingly doubtful. You are to remember that the man had for twenty years previonsly been the subject of epileptic attack; that he had also been the subject of a previous attack of a similar kind, and therefore it was not unlikely that he might be suffering under some slow change of structure in the brain itself, or its membranes, consequently the prognosis was exceedingly doubtful. Still I was satisfied that the correct mode of treating the case was to diminish irritation by means of large doses of morphia or opium, and at the same time to relieve congestion or inflammatory action by moderate depletion.

The report of the next day, August 11, states that during the first few hours of the night he had only a few seconds of sleep, and that he then awoke, and raved most furiously; but that towards morning he had three hours and a half of sleep, and that when he awoke he appeared to he better. He is now much quieter; he is more rational, and appears to know some of the events of the preceding day; he still wan-ders a little, but the furious delirium is quite gone. He became tranquil after taking the two first doses of morphia. His skin is still hot, his face not so much flushed, and the pupils are rather contracted. He says that he has a little pain in the head. The pulse is 116, full, and soft. Tongue now clean and moist; bowels open. He was directed to be again cupped on the occiput, to the extent of eight ounces.

The report of the next day, the 12th, states that he passed a pretty good night, slept very well, but wandered at intervals. He is now sensible, and answers quite correctly, but occasionally talks incoherently. His skin is quite cool, and the countenance not flushed; the pupils are still contracted. He says he has no pain in the head, but he feels drowsy and hanguid. His hands are tremulous, and he is a little more exhausted. Tongne clean, bowels open, and now the pulse has come down to eighty, and is somewhat full. He was directed to be released from confluencent, and to take the calomel and muriate of morphia every six

instead of every four hours.

The report of the 13th states that he did not pass quite so good a night. There we more heat of skin, and more general ement. He wandered a little at the way to the head; no the head; no to the head; no to

haves large poultice applied to his feet and epileptic character, which continued for a

The report of the next day states that he passed a very good night, but continued much in the same state. Pulse 82, not so full, but somewhat jerking; still there appeared to be a little more tremour, and therefore I ordered him to have a pint of bof-tea a day. Wishing to diminish the quantity of the muriate of morphia, I directed half a grain to be given him every eight hours. He passed a very bad night after the quantity of morphia had been reluced, and was very restless, tossing about in bed, talking loudly and incoherently, swearing violently, and moving about to such an extent as to compel them again to put him into confinement. His skin became hot, his face was slightly flushed, and the pupils were contracted. Mr. STONE was called in the morning to bim, and very properly gave him a grain of the muriate of morphia. After he had taken this he had some sleep, and it is stated that upon awaking he appeared to be pretty quiet. Tongue moist and clean; bowels opened lour times during the night, and once this morning; pulse 94, and rather full. He was again directed to take the half of a hours.

On the 16th the report states that he had passed a good night, and proceeds thus :-Wanders a little occasionally; face not flushed, but pupils still remain contracted; tongue moist and clean; still tremulous; bowels considerably relaxed; pulse 90; feet very sore, but not so painful as they have been. The mercury was now running off by the bowels; it had produced irritation of the mucous membrane, and it was found necessary to give him an ounce and a half of the compound chalk mixture after each stool, and to continue the morphia.

The report of the 17th states, that he passed a tolerable night, remaining very quiet, and much the same as yesterday. Pulse 94, becoming rather more feeble. It was then considered necessary, in addition to the muriate of morphia, to allow him, in small quantities at a time, a pint of porter in the course of the day.

The report of the 18th says, he did not sleep much during the night, but was quite collected. He wandered a little this morn-Countenance very natural, pupils till rather contracted. He complains of his feet being very sore. Tongue clean; owels rather quieter than they were; pulse ad still rather feeble. He was directed linseed-meal poultice applied to with the Liq. Plumb. Acet. was becoming rather o take a grain ry four hours.

He was directed to omit the calomel, and to seven o'clock, he was seized with a fit of an long time, during which his features became distorted. I presume that the pulse at that time could not have been very much excited, for either Mr. WHITFIELD OF Mr. STONE found it right to give a drachm of the Spiritus Ætheris Sulphurici Compositus, and a drachm of the Aromatic Spirit of Ammonia, in a camphor mixture, which he took; after which, it is stated, he slept soundly, having no return of the fit, and remaining much in the same state as before the fit occurred.

> Then the report of the 20th of August states that he passed a very good night, and continued tranquil and rational both yesterday and on this day. The skin quite cool; no pain in his head; pupils contracted tongue clean, rather dry; his pulse 84, and feeble. Feet not better; there is a large sore on the heel, which is sloughing. Bowels much quieter; the dose of sulphate of quinine was directed to be increased from one to two grains; and as he did not like the beer, it was directed to be omitted, and he was allowed four ounces of wine daily instead.

The report of the 21st states that he passed a pretty good night, but that during grain of the muriate of morphia every four it his bowels were opened four times, and twice this morning. He is quite sensible; pulse 86, and somewhat full; his tongue a little dry in consequence of the irritation in his bowels, and it was found necessary to change the chalk mixture for some of the compound infusion of catechu.

He was directed to have a slice of meat on this day.

The next report states that he passed a good night; pupils contracted; bowels quiet; tongue moist. As the bowels became quiet, the tongue became moist; bowels open only once; pulse 90. He was directed to continue the sulphate of quinine every four hours, but to take half a grain of the muriate of morphia every six hours.

The report of the 23rd is to the effect that he continues much the same.

The report of the 24th states that he remains quite rational, but that the bowels are rather relaxed; tongue clean. It was now found necessary to add a drachm of the tiucture of kino to each dose of the infusion he had been taking.

On the 25th the report states, that the bowels were more relaxed to-day. medicine does not check the purging. complains of some pain in the abdomen. There was a degree of tenderness there, which was distinctly traceable along the course of the colon. The stools contained a good deal of mucus, but still a considerable secretion of bile. His tongue was clean at the edges, but white and dry in the middle. Complains of thirst. It was quite clear now sing, at about that there was something more than simple

irritation going on in the bowels, which I him was to order that he should have twelve thought it probable that the quinine helped to continue. I therefore directed that medicine to be omitted, and eighteen leeches to be applied along the track of the colon, to be followed by the application of a blister in the evening, still at the same time continuing the astringent medicines; and if the starch, with twenty-five minims of the tincture of opium, thrown into the rectum every morning.

The report of next day states that he felt relieved, and that he had now no pain, except from the soreness of the blister. The howels had only been opened once since the last remedies were resorted to. His tongue a little dry in the middle, bis thirst less, and

he remains perfectly rational.

The report of the 27th says, that his bowels had not yet been opened on that day; he sleeps very well; tongue moist, but a little coated; his face a little flushed; the skin rather hot and dry; feels thirsty; pulse 96. He was directed to take half an ounce of castor oil. For some time the muriate of morphia, in consequence of his remaining so perfectly rational, had been gradually omitted, so that by this time he had ceased to take it. It appears by the report, that the castor oil operated violently; seven stools followed its exhibition. The astringent mixture was again ordered, and it checked the purging. His howels are a little relaxed to-day, and he complains of some tenesmus on going to stool. Tongue moist; skin rather hot; not so thirsty, and the flush has left the check; pulse 84. As he objected to his wine, saying that he did not like the taste of it, an ounce of brandy was given to him every twenty-four hours in gruel or arrow-root.

The report of the 29th states that he feels better. The bowels had been opened once; he has little pain except from the blister; his countenance is clearer, and natural; pupil natural; tongue a little coated;

pulse 72, not very feeble.

The report of the 31st states that he has one on very well since the last report His bowels had not been opened for two days; tongue a little foul at the root. He was directed to take two drachms of caster oil immediately; the dose to be repeated if necessary. The first dose did not operate, but the dose in the morning produced three stools; he complains of nothing but his heels. Tongue clean and moist; pulse 74, and pretty good. The sores upon his heels are healthy and granulating.

Well, now, it was not necessary to do any thing more for this man. He went on gradually improving from the 1st of September until the 1st of October. I quitted London myself at this time, and I find that all that was further necessary to be done for be divided int

minims of dilute sulphuric acid, with a drachm of gum mucilage of acacia, out of infusion of cascarilla, three times a day, in consequence of considerable perspiration. This plan was directed on the 15th of September, and was continued, with merely an occasional exhibition of a slight aperient. purging was not relieved by those remedies, He lost all tremour, he had no pain in his I directed that he should have a glyster of head, he was perfectly rational, and he we at out of the hospital quite well on the 1st of October.

> Now I stated to you that I considered this to he a case of delirium tremens, as I chose to christen it, attended with high or excited vascular action, by which I mean to imply delirium tremens consisting of irritation of the brain; that irritation in this particular case being accompanied by some degree of inflammatory action or congestion,-I believe of inflammatory action either of the membranes of the brain or of the brain itself. But I do not think that our time will be mispent if I just say a few words about delirium tremens itself; leading afterwards to that form of it under which I consider this man to have laboured.

In former days this disease of the brain and nervous system was most commonly confounded with phrenitis, until Dr. Surrox of Greenwich published a valuable treatise on the subject, and pointed out how essentially it differed from inflammation of the brain. and showed that it was, in fact, a distinct and peculiar affection of the brain and nervous system, - distinct from inflammation, and therefore requiring peculiar and distinct treatment. Other medical men have since written on the subject. The term, perhaps, is one which we cannot regard as exactly correct, inasmuch as delirium tremens is a term which certainly implies a something that does not take place. The delirium itself cannot tremble. Other persons have variously christened it. Pearson and Armstrong called it "brain fever." Dr. BLAKE called it the "brain fever of drunkards." Dr. Corland has called it much more properly "delirium cum tremore." There is delirium, and there is trembling; therefore the latter perhaps is the better term. Still, if we distinctly derstand by the term "delirium tre of what the discase really con no objection to that de

The disease

be said to be delirium with tremour, most gets out of bed, pernaps, and wants about probably, as Dr. Gregory has stated, aristite room during the whole night. Pering from exhaustion of the nervous power, haps, before this, you begin to find that membranes of the hain, or in the substance sometimes of an offensive odour. During of the brain, or in both; in other words, the whole of this time, however, you will accompanied by more or less of inflamma- in his head. Often, very often, these pation or congestion.

Now the symptoms of the first species of the true delirium tremens generally manifest themselves in this way :- A patient for a time is a little different in manner and appearance to what is generally observed in him. His friends notice a little peevishness, a little fretfulness, and, at the same time, a little abstraction in his manner. He finds fault with his associates. From being a good-tempered or a good-natured man, he becomes a hasty one, and complains unnecessarily. He does not appear to be well, but at the same time, if asked whether any thing is the matter with him, he will perhaps snappishly answer, "No, I am quite well." This goes on, probably, for two or three days, perhaps for a week, in some instances for a fortnight, a change only manifesting itself in this way. His appetite fails at the same time; his nights are restless; he tosses about in his bed, and when he gets up in the morning, having had little sleep, in some instances scarcely any, he does not feel refreshed. As the disease advances, his fretfulness yields, perhaps, to some particular delusion, (or, to use what is probably a better term,) to some illusion. That illusion most commonly relates to his own affairs, or perhaps to the affairs of some particular friend; the illusion being always of a despouding character. He imagines, though perhaps rolling in riches,-or at all events, possessing every comfort, his business going on well as usual,—he fancies that every thing is running to sixes and sevens, and that he is going to the dogs as fast as he can, and that it will be as much as he can do to avoid getting into jail; or he thinks there is some conspiracy against him, or against his life, - some attempt to assassinate him. All his illusions are of a desponding, or even of a horrible character. At times—with less illusion, perhaps, as regards himself-he is busied in setting to ights the affairs of his friends. If spoken this time, he will answer with perfect

He will tell with perfect cor-

is in health, but directly

abstracted, and re-

and consisting wholly in irritation of the his hand trembles very much, that his brain and nervous system, constituting the tongue is exceedingly tremulous also; and true "delirium tremens" of Dr. Sutton. now if you examine his skin, you discover The second species of delirium tremens is that it is bedewed with a cold, clammy, accompanied with more or less tremour, but sticky perspiration; and it is stated, though at the same time it is attended by a highly I cannot say myself that I have ever obchited state of vascular action in the served the fact, that the perspiration is irritation of the brain and nervous system, find that he does not complain of much pain tients do not complain of any pain in the head. Now, it is right to put you upon your guard that there will be sometimes pain of the head, and most commonly there will be a profuse cold, clammy, sticky perspiration, over the whole surface of the body, the extremities feeling cold too; there may be no heat of the head, but the head will be bathed with perspiration, though sometimes that perspiration-I will not say is wholly absent, but is so slight as easily to avoid detection, unless you assiduously look for it as one of the symptoms to confirm you in your diagnosis. Now, I stated that the tongue is, commonly, tremulous, in addition to which, if there be simple irritation of the brain and nervous system, unconnected with anything like inflammation, you will not find it dry, you will not find it rough; you will find it a little coated, it is true, but it will be coated with a white creamy moist muens.

Now, in acute inflammation of the brain, you have not in the carly stage a tremulous tongue, but a dry rough tongue; and as the disease advances, in the latter stage you have a tremulous tongue; but it is not tremulous from the beginning. The face, which affords other indications in true delirium tremens, is pale; the eyes are rarely suffused, but they are somewhat dull. 1 say rarely, because I have in one or two instances seen the eyes slightly suffused, but not evincing a tithe of that suffusion which you will find in active inflammation of the brain. At the same time there is no intolerance of light or noise. The pulse, if the disease comes on slowly and gradually, is, at first, perhaps, soft and slow; as the disease advances, it becomes quick, soft, and feeble; and as it still further advances, the pulse becomes rapid, and if the disease is about to terminate fatally, either unaided or not yielding to aid, then perhaps it becomes fluttering, and that sort of pulse is felt, which I do not know how to describe better, than by calling it a "fluid pulse, which seems like the flow of a continuous stream of water under the finger.

I stated to you that there was generally stee of illusion, considerable tremour of the hands, and at the same time tremour of the whole body. This, however, varies in intensity, from being so dition of the brain and nervous system un- resources of nature in curing fractures and der that state of irritation.

I have something more to say upon this subject. I have to speak of the treatment, and a little to say upon the diagnosis and the distinct points of treatment of the two species, and therefore I will postpone these divisions of the topic, as the hour has elapsed, until next Monday.

ON THE

TREATMENT OF FRACTURES

WITHOUT THE AID OF SPLINTS.

By W. C. RADLEY, Esq., M.R.C.S. L., Newton Abbot, Deconshire.

THE illustrious Sydenham, in his old age, said. "Don Quivote is a good book: I read i him still." I think and act with Sydenham in this respect, and am induced to select quotation as a preface to the observations I am about to make on an important branch of surgical art :- " At all times, in all places, and by all the learned, simple means of cure are more esteemed than those that are compound." I have watched the simplicity of nature in all things natural, and endeavour to imitate her in all things artificial,-especially in the practice of surgery; and thus it is that in the treatment of the accidents of which I am about to speak, I have been enabled to throw off the useless lumber of art in the shape of splints, and to effect cures with less pain to the patient, in shorter periods, and in a far more creditable style of surgery, than is generally possible under those old encumbrances.

Nearly twenty years have clapsed since my first attempt was made to cure a fracture without force and coercion, and success has invariably followed every subsequent effort; and I now assert, that every species of fracture which is curable with splints, may be much better cured without them. Moreover, I affirm, that splints are not only useless, but positively injurious; productive of great pain and inconvenience to the patient, and in no case can give aid to the cure. On the contrary, I consider that they retard that desirable termination of our services. Fully aware am I, that assertions which condemn the practice and views of ages, should be advanced with caution; and influenced by the considerations which innovations always create, I have hitherto been deterred from presenting my thoughts with irritation, and and practice in writing on these matters undue accumulation to the attention of the profession. As to limb, which public opinion (founded on ignorance of the bandage; for

other injuries), among those persons who have been my patients, as well as a host of friends whose feelings of interest have been awakened on the subject, I used continually to find them to be active opposers of a mild system of cure. By far the greater number of persons think that a broken bone cannot be "set" without the use of force; nor afterwards retained in a proper positan but by strong compression, or what I have termed coercion. In all such cases I had ever found my patients more disposed, through fear of the results, to suffer the irksome tyranny of the splint, than to have themselves allowed the use of a soft pillow.

But not so now. Opposition to the plan has ceased among them; and where my assistance is required, bystanders, though yet half incredulous, let me proceed without remonstrance, while I assure them my aim is to make the patient easy and so to keep him, referring to numerous cases in proof of its efficacy. I mention this popular prejudice in favour of long-established usage, because many preposterous modes of cure in medicine and surgery will readily occur to from the pages of Cervantes the following the mind of every practitioner, wherein absurdities no longer have a place in practice; and of which the wonder is that they should have ever been adopted at all. Let any candid surgeon read a modern catalogue of surgical instruments, and reflect on the announcement it makes. He will there find offered to him a choice of "Mr. Amesbury's apparatus" (excellent of its kind) "with splints complete." There are splints bearing the names of the venerated Pott, of Cline, of Sharpe, and of Martin, "whalebone splints," "improved fracture cradles, used at Guy's and St. Thomas's," "japanned" and even "iron splints," and, last but not least, "long splints, to reach from the foot to the arm-pit,"-to keep one set of muscles in protracted and painful extension, while their antagonists wait in an agony for their turn to move. Are these the resources of surgery in the year 1835? They constitute the abuse of surgical mechanism, which ought for ever to have given place to chemical science? When a fracture is properly reduced, the cure proceeds to its accomplishment, not on mechanical, but vital principles, assisted by rest and a genial atmosphere. I assert therefore, that mechanical aids should ever be passive and not active, where there is no displacement for the hand to reduce. All force or external pressure that produces pain is mischievous, and should be avoided.

In such a state of things, one indicate alone should influence our minda which the patient feels.

neither the splints nor the bandage can be the breast and shoulders, close to air, and of use? Even if the limb be not in a malposition, yet irritation, passing into active without surgical aid it unites, and a cure is inflammation, tends to delay the result of perfected. our efforts; and to secure ease to the patient, we should sedulously obviate those errors, method is pursued. Like the clavicle, it is and prevent the evil of malposition, by fre- merely bound round with the common intequent examinations of the limb.

its asual complications are threefold. First, jaw. A man had the right lower maxillary the mental anguish; secondly, the pain pro- bone fractured; the broken side was firmly duced by awkward motion, clumsy hand- supported in situ naturale, by a pad of line ling, and the supererogatory offices of "set-ling," by compression and restraint, and press most on the dependent portion. The thirdly, the permanent evil consequences blow was a heavy one; but after he had lain that too frequently follow, - evils which are ten days in bed, he got up, moved about, much more commonly produced by mal- could eat sufficient, talk enough, and slept treatment than by the simple effects of the soundly, mutil the sixteenth day from the accident alone.

muscles, by the compression, had lost the appropriate uses. power of motion,* in consequence of which the muscular energy of the limb continued for a long period impaired, requiring much matter, and unite, with common warmth and patience and assidnous discipline to restore quiet, without splinting. it to health, though the patient was a hearty

and vigorous youth.

Another fine athletic fellow whom I saw, by falling across a low grassy bank, fractured his femor very near the centre. Six where the bones are imbedded in thick musmonths afterwards I saw him, weak, pale, enlar parts possessing strong vascular acand emaciated, with a pair of long splints tion! I write at a disadvantage, because bound upon his thigh with a degree of force splinting has long been the custom, and the that brought to my mind the sailor's mode custom it will continue to be, until a fair of fishing a broken mast, and all this infliction for the vain and ideal purpose of keeping the bone "right," though without any such force, the limb would have repltained its use in one fourth of the time which was occupied in the cure. Each of these was a case of simple fracture.

Let me seriously ask, Do surgeons ever apply splints to a broken rib. The practice is not possible; but does not the bone unite and heal without it, and simply with a little plaster spread on lamb-skin, although the bone is not deeply scated in and clothed with muscle like the thigh, the leg, or the arm, but merely covered by integuments; and, moreover, is repeatedly in motion, from the convulsive shock of the cough which the accident excites. There are exceptions to the rule, but they do not affect the argument.

In fractures of the clavicle, I have never gd that the inventive power of surgidesigned a splint. Yet look this osseous appendage to

French sur-

In fractures of the lower jaw the same nent examinations of the limb.

The suffering produced by fracture and Quixotic professor) would splint up a broken accident, when the frolics of a country revel Not long since, a young peasant in a tempted him from home, when he got half neighbouring village fractured the femur drunk, and entered with much volubility rather below the centre of the shaft into the particulars of his accident, the re-Twelve weeks afterwards I accidentally saw sult of which was, a stiffness of the parts on him, with his thigh tightly splinted up, and the following day; but common care soon unable to set his foot on the ground; for the enabled him again to put the jaw to all its

Long fissures and fractures of the bones of the cranium become filled up with ossific

If in these comparatively unfavourable situations the union of bones is perfected without the aid of splints, how much more certainly and rapidly will union take place, trial shall have been given to some such plan as I am about to advocate, in which simple precepts and a greater reliance on the resources of nature, tend to make the application of the splint a barbarous and obsolete fashion.* I have waded through some quartos for the purpose of culling facts from the practice of others, to support my views in the cure of fracture, but with little success, and that of the negative kind, the statements being made without the design of militating against the general doctrine. Sir Astley Cooper's elaborate work on dislocations and fractures of the joints, is authority enough on the general employment of the "splint and fracture box" at the great London hospitals; and Dr. Bush, of Totness, a gentleman of great professional talents, on lately returning from the

^{*,} A favourite dog belonging to one of Sir Walter Carew's packs of fox-bounds ventured too near the heels of a vicious horse, which kicked back and broke heels of a vicious horse, which kicked back and broke the dog's leg. He was cured without splitting, for after the lapse of three days he industriously grawed off every thing that was put upon the limb. He was continued until well, getting fat the while; and he has aince lunted as before the fracture. An African pigeon, which had its thigh broken, was cared with-owt a splint or deformity.

(the subject was a gentleman aged 74, a severe contusion has been unfortunately neighbour of Sir Astley's), a pasteboard splint and an evaporating lotion were used. in obviating the accession of heat and its This dressing was not disturbed until the twenty-fifth day after the accident." "The wound was some time in healing, being prevented by the pressure of the splint." This suffering was endured for a month, wanting three days only, by an old man with all the fidgety uneasiness of seventy-four years upon him. I fear this case did not end to the patient's comfort at those gastronomic seasons, when he wanted to carry a cup or a fork to his mouth. This recluse system of casing up limbs from the eye for a month, much as I admire Sir Astley Cooper as an operative surgeon, takes I think from his credit for penetration into the remedial processes of the body.*

At page 259 of the treatise, we are recommended to apply a many-tailed bandage; and at page 370 " a light bandage in cases of fracture, wetted with spirits of wine and water." This application to most recent cases of fracture is decidedly bad. Let spirit be diluted with water ever so much, still the compound will be a stimulant. The first indication of surgery in these cases is to prevent heat which stimulation excites, and the second is to allay and subdue heat when it has been excited. The injury of the fracture itself, when effected with as little violence as may be, the jagging extremities of the bone acting on the soft parts, will always be a powerful exciting cause of heat,

* A very ugly "care" of fracture at the appear portion of the tibia, four or live inches from the inferior point of the patella, occurred to a respectable farmer in the prime of life, a few miles from hence, by a cart-wheel passing over it. The surgeon splinted and bandaged as usual. The leg was schlom exammed, the real position of the fractured ends of the bones was for the greater part of the time concealed; and when the limb was examined, the soreness was so great from the pressure, and the tumefaction so long remained, that little good was done by gemle extensions from time to time, or any other kind of mo tion. Twelvemonths afterwards the good man showed me the limb. I concealed my surprise, for the projection of the superior edge of the fractured portion of the tibia, over the inferior portion of the bone, was full three quarters of an inch. Of course that projection was anteriorly and superiorly. Here was a " cure!" Why it was five years before the man could bear to step firmly with the leg, the weight of his body overhauging the line of bearing on the foot! He was told by his surgeon that all this displacement and weakness was a part of the consequences naturally attendant on so bad a species of fracture. Of course I did not disturb this opinion. I only recommended him to make "the best of a bail matter," encouraging him with the hope that time would mend it a little, under the long-continued anspices of a plastered, circular, dressed skin, and a bandage which he wore for a year, having them from time to time renewed.

of compound fracture of the elbow-joint irritation, and pain. But in cases where superadded, I have found ample employment effects in the use of a very weak lotion of water and superacetate of lead, or some decided sedative; or in tepid bathing, with exposure to the atmosphere to promote evaporation. This object cannot be attended to under the customary mous of proceeding.

(To be concluded.)

PECULIAR RELAXATIONS OF THE UTERUS.

By F. MONTGOMERY, M.D., Physician-Acconcheur to Sir Patrick Dun's Hospital.*

WHEN the uterus has expelled the product of conception at any period of its growth, active contraction should immediately commence, and its volume be speedily reduced to its original dimensions. But matters do not always proceed thus favourably, the uterus being liable to fall into a state of atony and relaxation. One condition of this accident, of whose existence I have fully satisfied myself in many instances, has not, as far as I am aware, been noticed by any writer, the peculiarity of it being, that it continues in a chronic form, occurring most frequently after early abortions. which, however, are not necessarily connected with any loss of blood during the miscarriage; but when the patient is beginning to take exercise, she is unexpectedly seized with considerable hemorrhagic and leucorrhical discharges, inducing great debility and alarming apprehensions, with, most frequently, no pain, but a sense of internal fulness, which appears to her to interfere with her passing water; she has a dull aching feel in the small of the back, and is constantly annoyed by a sensation of relaxation in the whole contents of the pelvis. On examination the vagina is found unusually relaxed, and the os uteri gaping, with its lips tumid, thickened, and projecting, soft, and flabby; the cervix is dilated, its natural tapering form is gone, and the body of the uterus itself is felt to be enlarged and doughy when pressed by the finger, the organ appearing quite insensible. This condition may persist sometimes for months, with various degrees of constitutional disturbance, the discharges being someth so profuse as to endanger life, but slight, or only occasional tracting attention ance, than by the

symptoms.

ccur under these circumstances; but if the | and constant cloths wer with vinegar and estored, abortion will almost inevitably appen. The details of a few cases will lucidate these points.

Case 1.—In July, 1830, I was called to ee a lady who had just miscarried in the econd month of gestation, with profuse henorrhage. She had miscarried twice alead@within the preceding six months. On his third occasion she seemed to recover vell, and left her bed in a week. A tonic ystem of treatment now employed by me ailed, and she did not cease to have vagiial discharges. I then examined the os steri, and found it just in the state it had cen in a month before, gaping open, soft, claxed, and flabby. I recommended her to to the sea-shore, leaving her husband schind. This was done; she took small mantities of oninine and gentian, with aronatic sulphuric acid, and bathed every day intil November, when she returned home completely re-established in health, and mmediately afterwards conceived, and on the 6th of the following August* gave birth o a fine healthy child, which she marsed with niccess. She has had two children since.

Case 2.-On the 30th of January, 1832, Mrs. V. aborted, without cither pain or aemorrhage, on making water, in the third nonth. She had been some time before greatly startled by a hatching hen, and she now gravely asked me if I did not think what she had been delivered of was very like a chicken. At the end of a week she was able to go about as usual. Two months after the miscarriage she sent for me; from the time of the abortion she had never been entirely free from vaginal discharge, and pains, resembling slight after-pains, with resical irritation and dysoria. I found the aterus almost exactly in the state I had felt it two months before. Tonics, free ablution of the lower part of the trunk with cold salt water, and opening sea-bathing as soon as the weather permitted, perfectly re-established her health in about six weeks, during which time she lived absque marito. She conceived again, and was delivered in February 1835.

Case 3. - In the middle of April 1834, a sister to the patient Case I, and mother of six or seven children, miscarried carly in the third month, with very little pain or hemorrhage. At the end of a fortnight she went to church, felt greatly fatigued, was seized suddenly with a smart uterine bemorrhage, nearly fainted, and was conveyed Her medical attendant next day shed a rigorous system of low diet, or drink, full doses of landanum,

one of the uterus is not soon completely water; in addition to which a bag of chalk, moistened with vinegar, was introduced into the vagina. In a week matters had become much worse, and when I first saw her, she was unable to move, and almost without pulse, and shivering from being constantly soused in wet, and the mind depressed to the lowest degree of despair. I found excessive relaxation of the vagina, the os nteri so open that it would have admitted the points of three fingers, its lips tumid, but soft and puffy, and the body of the organ enlarged and doughy. I immediately had the wet cloths replaced with dry and warm ones, and ordered a jar of warm water to the feet, a scruple of ergot of rye in warm wine; jelly, good broths, chicken, and claret; tonics as in the former cases, and removal by-and-by into the country. She was soon much better, but had remained in town, and conceived again in June, and again miscarried in August, when I attended her; there was little hemorrhage, but the uterus was still relaxed, which I obviated by rest in the horizontal position for several days, a generous diet, and tonies. I also prevailed on her to go to the sea-side, her husband remaining at home. By the beginning of winter she had completely recovered, returned, conceived again, and in September 1835 was safely delivered of a daughter.

These facts promise to be useful from suggesting to us, in addition to other considerations, the obvious indication of using restoratives for the general powers of the system, the local application of tonic agents, and the use of specific stimulants to brace the uterus; but the chain of morbid actions can only be effectually broken by withdrawing the individual for the time from the possibility of conception, the uterus being, as is said in agriculture, allowed to lie fallow for a season. I have had a case in which this relaxed condition of the uterus was ascertained by dissection four weeks after labour, accompanied by profuse hemorrhage.

The nterus was found considerably larger than it ought to be at such a period after delivery (one month); measuring 44 inches in length, and more than 24 in breadth; its cavity would have contained an egg; the os nteri and cervix were quite open, and sufficiently relaxed to allow the introduction of my fore-finger; its parietes were about three-eighths of an inch thick, with the structure as soft and flabby as that of any other muscle in the body, so that it might be rolled round the finger, and when divided by the knife the vessels were found uncontracted and pervious.

There is a question which very often meets us in practice which it may be proper to notice here; ought patients who have experienced considerable hemorrhage in labour to be allowed to nurse? In my opinion they ought, if no other reason interfere, be-

of December that on the 5th of it appears to me very probable that chronic application, as a stimulus to contraction, and relaxation after early abortion (indepennent from its refrigerating power. With redently of hemorrhage) being so much more gard to the ergot of rye in cases of protracted frequent than it is after delivery at advanced menorrhagia, the specific action of that periods of pregnancy, is attributable to the remedy is strongly confirmative of a belief want of the manmary excitement. But the that those discharges are often dept, dent nursing we may find it necessary to pro- on the relaxed state of the uterine fibres hibit beyond half or a quarter of the usual we have been considering, constantly lead-period. Every day's experience convinces ing to a suspicion of organic uterine disease, us, that one woman will suffer more exhaus- a suspicion which a vaginal examination tion by three months' nursing, than will an rather tends to confirm, the organ being thus produced is, I have reason to believe, os nteri tumid and puffy; and I am strongly this very condition of the uterus. It is perfectly well known that when nursing disagrees, or has been too long continued, the dame Boivin, 23rd Plate, Fig. 1, which she prominent symptoms are precisely those describes as "a scirrhous tumefaction of the which accompany a relaxed uterus induced posterior lip of the os uteri, taken from a by other debilitating causes, and from examinations made under such circumstances, after an abortion in the sixth month. I have learned that the condition of the uterus which I have been describing is very frequently induced in a greater or less degree. In July last I saw a lady, of apparently sound constitution, who had been nursing for nearly seven months, and mesented many of the morbid effects of undue lactation, such as derangement of the digestive organs, pain in the back and left side, with almost constant slight red discharges, and occasional lencorrhora. found the vagina greatly relaxed, the uterns slightly descended, enlarged, and softened, and the os uteri sufficiently open to admit the end of my finger. Immediate weaning, attention to the digestive organs, tepid saltwater baths, tonics, and sca-bathing, soon completely restored her health. Dr. M. Hall says that "the uterus suffers," but he does not specify how. I have only to add to what he has said, that what "the uterus suffers" is relaxation, both of its tissue, by which its vessels are allowed to discharge their contents too readily; and of its connexions, by which it acquires a tendency to prolapse: and when patients who have unduly given milk, conceive within a short time, they very generally miscarry.

The remedies that will do most service are in these cases, preparations of cinchona, gentian, colomba chalyheates, mineral acids, country air, sea bathing, and cold topical ablution. Should the hemorrhage burst out profusely, the tampon with pressure, in-stantly, and the ergot of rye, are the means on which generally our greatest reliance ought to be placed. Occasionally an opiate, or the application of cold, may be used with advantage; but I cannot avoid observing, that the indiscriminate liberality with which both these remedies are applied in practice is greatly to be deprecated. A napkin is ing they can often soaked in cold vinegar and water, laid ground,

cause the mammary effitement which ac- on the external parts, and removed smokcompanies the early part of lactation, pro- ing with heat; this is only a pretence of dopagates its influence to the uterine system, ing good. The general principle on which promoting there active contraction. Indeed, cold should be used, is that of its sudden other by twelve; and one of the ill effects found increased in size, with the cervix and disposed to believe that this is really the condition of the uterus represented by Mawoman who died of pulmonary consumption,

POISONING BY HYDROCYANIC ACID.

By T. G. GROGHEGAN, M.D., Prof. of Med. Juris. to the Coll. of Surg. in Ireland.

THE particulars of the following instance of poisoning with hydrocyanic acid were related to me by the individual himself, and those who witnessed its effects: -

A gentleman, aged 21, being subject to uneasiness in the stomach, was induced to have recourse to hydrocyanic acid. He commenced with one minim of the acid of the Dublin Pharmacopæia (sp. gr. .998); this dose he repeated twelve times the first day, without any perceptible effect. On the following day he took half a drachm, on the third a drachm, which he repeated on the fourth day, and on the fifth day a drachm and a half; all without effect of any kind. On the sixth day he increased the dose to two drachms, and two minutes afterwards (a sensation of extreme bitterness being produced in the month), having walked a few paces, he experienced a feeling of great confusion, with headache, and loud ringing in his ears. With difficulty he retraced his steps, leaned forward on a table, became insensible, and then fell backwards, remaining in this state three or four minutes, during which time he was violently convulsed, and, to use the expression of the medica gentlemen present, affected like a poisoned with the acid. After come insensible, and while table, his thighs w extr

clenched, the solid sesqui-carbonate of am-convulsions frequently, if not generally, pre-monia was applied assiduously to the nos-cede coma. trils, and he was shortly able to swallow a lin the case detailed, vomiting was not little fluid. (Two drachms of the spiritus present at first. This symptom is mentioned ammonize aromaticus were diluted with a by some writers as indicative of a fatal terexception of pain and a feeling of distention favourable one. In the present case it was in the head, which continued for the day. followed by great relief; and Coullon men-His old complaint was completely removed tions many instances in which even alarm-

its whole course by persons competent to Thomson. observe the symptoms, thus affording an opdom to be obtained where this agent has slight increase in the quantity produces form of poisoning in the Annales de Chemie, of considerable importance, and leads to the weight and pain in the head, succeeded by

also rigid; and on drawing them from the a feeling of anxiety, which lasted about six side, they forcibly reverted to their former position; the eyes were shut, and the muscles of coma is often well marked previous to the the face violently convulsed. The teeth being convulsions. In animals, on the contrary,

littewater to give to the patient.) Vouit- mination; but recorded instances affording supervened with great relief, and in reason for concluding, that although late in half an hour he was quite well, with the the order of symptoms, it is generally a by this extraordinary dose. The acid taken ing symptoms were dissipated on spontaneon the various occasions was diluted with one vomiting. In its toxicological relations water; the total quantity consumed being a there can be no doubt of the propriety of little more than six and a half drachus of classing it amongst the narcotic poisons, an acid, the per centage of real acid in though it seldom produces sleep. Its thera-which, according to Ure's table, should peutic action, however, appears to demon-be 1.5.* 1.5.*
strate the propriety of placing it amongst
The above case was witnessed throughout "sedatives," as has been done by Dr. A. T.

The property of hydrocyanic acid, been taken by accident, or for self-destruc- violent effects, appears to have been hitherto tion. In a paper on the treatment of this little noticed by writers, but it is obviously vol. 43, by MM. Persoz and Nonat, the consideration, whether under any circumsymptoms are divided into three stages; stances it can be considered as possessing 1. General malaise (or giddiness); 2. Tean accomplative power. Whether there be tanus; 3. Interrupted respiration, or what conceded or not to this poison a power of Orfila occasionally terms the stage of flac- accumulation, it should be borne in mind for cellity and insensibility, during which the many reasons, that minute difference in pulse rapidly fails, and finally becomes extinct. I have frequently observed animals to which this acid had been administered, acid presents the most extraordinary anomaperform rapid motions with the mouth and lies in its action. Thus, Richard knew a jaws, as if a powerful impression had been patient take even twelve ounces of laurel produced on the nerves of taste. Couling water, prepared by one of the first phar-(Paris, 1819) states that in experiments on maciens in Paris, in the twenty-four hours, his own person, he experienced from doses without any symptoms of poisoning. Dr. varying between twenty and eighty-six drops Montgomery failed in killing a cat with a of the acid (of Vanquelin?), an insupport-ably hitter taste, nausea, hurried pulse, and a half of the same acid (kept for three years longer) almost instantaneously destroyed a rat. In the great majority of experiments which I have made on the subject, young animals have been less sensible to its action than old ones. The interval which may clapse between the swallowing of the poison and the commencement of its action, became a question of great importance in the trial of Freeman for the murder of Judith Buswell at Leicester, April 2, 1829. Five drachms of the medicinal acid had been taken, and the bottle was found corked and wrapped in paper beside the hed of the deceased, who lay in a composed position. The question arose, could the deceased, after taking that quantity, have had time to perform the various acts which her position and surrounding objects indicated? In the instance detailed first in this paper, a ---tity equal to twenty-five drops of the

^{*} From a careful examination of two distinct portions, I assertiant of the per centage of real neid to be 60. Therefore the reported strength of the said of the Dublin Planmacoportal is 29 times that of the fail employed in 101s case; and the per centage of the acid generally used in Eogland, if correctly preared and carefully preserved, is five times as great, from ratenhation, however, grounded on the quan-try of materials employed, the strength of the acid if the Dublin Pharmacopech should be about three per cent.; the acid which was used in the instance nuder consideration was prepared from the ferro-cyanide of potassium, and it should be mantipued, at its chemical exantination was not umbrusken for weeks after its employment; it had been, and possessed strongly the charac It is also well known to an. com the ferro-eyanide
the atrong, will rethat of day, unthore than two

English acid, of thee per cent., commenced to act in about two minutes. Should twelve times as much, or five drachms, begin to operate in the one-twelfth of the time, or ten seconds? Within that period the acts of Judith Buswell could certainly be accomplished. A proportion not differing very materially from this may be found to exist. As to the smallest quantity capable of pro-ducing death in the case I have detailed, the quantity of real acid amounted to 7 of a grain, which was almost the same as that about her heart." The following notes were taken by the epileptics in the dreadful acci- taken as soon as she was placed in hed:dent which occurred at one of the Parisian Incoherent, very restless, uneasy in everhospitals, and by which seven patients lost position; pulse 80, soft and regular; tongue their lives. The case related in this paper clean; eyes clear; skin natural. On pla illustrates very strongly the beneficial effects cing the fingers lightly over the apex o of ammonia or its carbonate, in consequence the heart, a sensation is communicated of its stimulant powers. Chlorine, which to them not milke that which emphy decomposes the poison, most probably also sema of the cellular tissue would occasion effects a good deal by its stimulant action. Ent it is lost on the least increase of pres sure. Resonance very dall over the whole in this lost is reasonable to the control of in which this agent can be applied, is rarely of the precordial region; impulse consider at hand; at present, however, chloride of able as high as the clavicles, and peculiarly lime, or soda, is as likely to be easily pro- strong in the epigastrium; a loud bellow cured as any other medicine, and either of murmin over all the region of the heart these can be made to evolve its chlorine sometimes with a rasping noise; the latter rapidly by the addition of vinegar, or any of is best heard in the second sound, the for the ordinary acids. Very possibly after the mer in the first; vesicular respiration every patient has been to a certain degree restored where distinct. by the use of these antidotes, his recovery might be promoted by an emetic, and for and has not since spoken. this purpose the sulphate of zine, mixed liable to produce depressing effects, than some other medicines of the same class.

I add a few particulars of the dissection of a case which terminated fatally:-A schoolmaster of Dublin purchased an ounce of the medicinal acid (Scheele's), and swallowed it. Next morning he was found dead. The stomach in particular exhaled strongly the smell of the poison. The only morbid appearance of note discovered, was a patch of dark-red extravasation under the mucous membrane of the stoniach, near the pylorus; an appearance which seems to have been mistaken for gangrene, in a case related by Hufeland. This appearance I should conceive to be allied to the black warty extravasation observed in cases of irritant poisoning. The stomach exhaled the odonr for three days, at the end of which time the poison was detected by the usual means.— (Condensed from the Dublin Journal, Nov., 1835.)

DURATION OF PHTHISIS .- Of 114 cases, observed by Louis, rather more than twotenths died between the first and sixth months of the disease; four-tenths between me, as some medical fries the sixth and twelfth months; rather less than a fourth between the first and second years; and less than one fifth between the stupid, and second and twentieth.

PULSATION IN VEINS OF THE ARMS.

By CHARLES BENSON, M.D., Surgeon of the City of Dublin Hospital.

MARY OLIVER, æt. 60, of middle stature

Aug. 15. She became comatose last night

While feeling her pulse, I was struck with with some stimulant fluid, as wine, or brandy an appearance or pulsation in a samination with some stimulant fluid, as wine, or brandy back of the hand. Further examination showed a distinct pulsation in every superficial vein of the two upper extremities, but I could not feel it. Some of the pupils, however, assured me they felt it. The pul-sation was isochronous with that of the radial artery, but a little later, following it after an interval of time, which, when carefully attended to, could be satisfactorily appreciated. I could learn very little of this woman's previous history, though I sent an intelligent pupil to her late residence. He could only ascertain that for the last six months she had suffered very much from palpitations and headaches; that she was often intoxicated, and had often received wounds on the head, and followed her usual occupation (selling fruit) until a few days before; and that she was a Scotchwoman.

In the evening I took ten ounces of blood from her arm, and was surprised to find that it did not come per saltum, although pulsa. tion was observed in some of the veins below the bandage. The veins, after the bleeding, seemed much more diminished in size than I expected from the quantity of blood drawn off, and all pulsation ceased! This last circumstance dis visit her next ma was decidedly multuous.

16. Still comatore, but is very sensible to irregular slit-like opening, surrounded with timul? The veins are collapsed, and to- cartilaginous and osseous deposits. irtery 80; 90 when roused; heart's action as at first report.

19. Very little alteration, until this mornng, when her left arm and leg were found to be flexed, and somewhat rigid: The veins ned resumed their distended appearance, and pulsation was distinctly misible in all as it first. My colleagues and the hospital pupils now joined me in observing the pulsations. The veins rose and fell with the jected from the brachial artery, but not a respiration, becoming turgid towards the end of expiration, and flaccid when inspiration was nearly complete. In both states, however, their pulsation went on rerularly, heating as often as the artery, 80 in minute, but a little after it. There was no loubt of this, though the interval was very ninute. No change in the cardiac sympoms. The question as to the cause of the curious phenomena before us was now considered, and the discussion induced us to 1st, that the pulsation was derived from the 'eft side of the heart, sending on its blood brough the capillaries into the veins; 2nd, hat it was derived from the right side of the scart, and depended on regurgitation.

20. As blood-letting had benefited the of eight ounces the pulsation ceased. No doubtless, retard the rate at which the imnotion in the veins of either extremity pulse was transmitted. bould afterwards be seen. She died on the

ollowing night.

Autopsy twelve hours after death.

rom disease; not even congested. heart was at least twice the usual size. turicular appendages, especially the left, were remarkably large. The right anricle was dilated, and a little hypertrophied. The right auriculo-ventricular opening was very large and gaping. The right ventricle was lilated and hypertrophicd. Its cavity was wice as large, and its walls twice as thick 18 usual. The floating margins of the tricuspid valves were thickened, and studded with small cartilaginous nodules. The pul artery valves somewhat thickened, corpora sesamoidea much devericle was enlarged, and

ally devoid of pulsation. Pulse in the radial left ventricle was dilated, its walls a little thickened, but softer and paler than those of the right. The mitral valves contained calcareous and cartilaginous deposits. The aortic valves were greatly thickened, and filled with osseous matter. The aorta too had osseous deposits. Careful examination evinced nothing peculiar elsewhere in the whole body and vessels. One of the arms removed from the body was carefully inparticle of injection passed into the veins, The valves of the latter also resisted the passage of a fluid from a trunk to its branches.

I think the post-mortem decided the queson as to the cause of the venous pulsation. It is to the right ventricle that we must look for the efficient cause. This ventricle we find hypertrophied, and the auriculo-ventricular opening dilated; so that regurgitation into the auricle was inevitable; and as this would acte more particularly the circumstances of occur with considerable force, it is easy to he case. Two opinions were supported conceive how the impulse would be communicated along the dilated veins, even to their small ramifications. The valves intercepted the shock when the veins were flaccid; but in the distended state of the vessels the shock was sent from valve to valve, even by the very force with which they were patient before, a few ounces more were thrown across their tubes. And this may be It flowed distinctly per saltum, supposed to take place without any imperreterial in colour, but much thinner. The sephalic vein near the bend of the arm was sephalic vein near the bend of the arm was sephalic vein near the bend of the arm was sephalic vein the triple of the arm was sephalic vein near the bend of the arm was sound. The pulsation following that of the refered in order that it might not be inclected, in order that it might not be in arteries may be explained by the more yield-ing structure of the veins, which would, doubtless retard to recent which the control of the veins, which would,

Venous pulsation has very rarely been observed to extend beyond the jugulars. Hombert (1704) mentions a case in which the pulsation in the veins did not correspond in frequency to that of the arteries; that it was The laugs almost universally connected only to be observed during paroxyms of o the costal parietes by old adhesions. No asthma; and that the post-mortem exhibited luid in the plears. The lungs quite free great dilatation of all the cavities of the heart. The with thinning of their parietes, and large polypi extending from the ventricles into some branches of the aorta and pulmonary arteries. He attributes the pulsation in the veins to regargitation during the morbid palpitations of the heart, whilst the arterial pulse was occasioned by the regular action of the ventricle. Dr. Elliotson mentions a young lady with violent cough, in whom all the veins of the back of the hands and forearms distinctly pulsated synchronously with the arteries. This is all he says. Dr. Ward relates the case of a debilitated woman in whose hands and arms venous pulsation was observed for three days, but as the woman and the lining recovered there was no opportunity of deand opaque termining the cause. Dr. Davis relates a case in which the only morbid appearance it was an discovered on dissection was, that the left

ventricle was somewhat enlarged and firmer | vantage. Tepid drinks should also be given, than natural. Dr. Graves mentions two cases of venous pulsation; but he gives no details, nor does he offer any explanation of their cause. I do not think that either of the foregoing cases affords any proof that it depended either on the force of the left ventricle, transmitted through the capillaries, or on any independent action in the veins themselves. All the arguments in favour of either of these opinions might have been, and indeed were, advanced in the case v bich I have related. And yet the disse 'ion proved, I think, incontestably, that hy ertrophy with dilatation of the right ventrale, was the true cause .- Ibid.

NEW TREATMENT OF CROUP.

By Dr. KIRRY, Prof. of Med. in the R. C. S. in Ireland.

treating croup, pursued by Dr. Lehman, Staffend. The cough, which sometimes con-Surgeon at Torgan, consisting in the applications for a few days, appears to me to be in his hands when seasonably applied, and vantage. that it had been used successfully in several families, before his assistance could be pro-cured. My own personal experience for blood from one or both arms, or from the nearly twenty years in the efficacy of a some-jugular vein. Now, I am quite awarc of the recommend during the first hours of an atperspiration, which should be perfect; and
tack of croup. I believe there is a disposi- I believe that it not uncommonly disturbs families; and when one suffers, I think it diseases of the respiratory apparatus. prudent to examine the other members of the group, and advise such precaution as circumstances may suggest.

My first advice is, that the neck shall be surrounded with a flannel bolster of hot salt, probably be thus brought into a state of quickly heated to a temperature of which diaphoresis. I remember a remarkable inthe hand is impatient. A woollen stocking will do, not too tightly stuffed, to accommodate itself to the form of the parts fered from the highest inflammatory stage with which it is to lie in contact. This re- of cronp, when I was called to perform venemedy acts as a rubefacient, and much be- section, which had been several times atyond the limits of its contact. The face and thorax soon become florid. The tempera- a patient of so great corpulency, I doubted ture of the whole surface of the trunk and my success, and therefore opened an artery is accelerated, with a fulness and softness and the alarming symptoms rapidly disapwhich promise a copious perspiration; and peared. when that is established, it is astonishing to witness the rapidity with which the uneasiness about the larynx, the almost pathognomic cough, and the cubarrassment an expression of of respiration, disappear. A triumph over venesection; the disease has now been obtained, but the withholds remedy is to be renewed, to confirm the ad- motes a thi

and even small quantities of cold water. which is exceedingly grateful, and eagerly wished for. The medicine I uniformly prescribe is a mixture of ammonia, saturated with vinegaz or lemon-juice, and a few drops of laudanum, the doses of which I alternate with two-grain doses of calomel and James's powder. Diaphoresis may thus be continued for twelve hours. It may then be allowed to subside, by changing the application less frequently, and employing a lower temperature. But these remedies should not wholly be laid aside for two or three days, or even for more, should there be any cough, or the slightest trace of preternatural laryngeal sound. While the perspiration continues, I do not risk its suppression by purgatives; but when it has nearly ceased, I administer tincture of jalap, magnesia calcined, electuary of scaumony, and water. This combination agrees well with the stomach, acts in small doses, and its operation is more certain than any other medicine I am acquainted The attention of the profession has been with. The discharges are sufficiently abunvery properly directed to a new method of dant, and the whole business is soon at an cation of hot water to the region of the best treated by low diet and mucilaginous larynx, at the commencement of the disease. mixtures, to which squill, hippo, and lau-Dr. Lehman affirms that it has not yet failed damum, are sometimes added with much ad-

The annotator on Dr. Lebman's mode of what similar plan gives me the greatest con- value of the abstraction of blood under ceradence in his report, and I am encouraged tain circumstances, but experience assures to lay before the profession the treatment I me that it may frustrate the secretion of tion to this disease in the children of certain an important curative function in sudden

If the means I advocate disappoint expectation, and the lungs participate in the disease, the attendant distress will be alleviated by a full bleeding, and the skin may stance to the point. A fine child of seven years of age, and of unusual obesity, sufextremities is soon increased, and the pulse on the instep. Diaphoresis soon followed,

> Emetic tartar being mentioned by notator as a remedy to be ye section, I cannot clos

she result of its depressing influence, inch and a best in length. Mr. Costello then Leecher and blisters are often the resource made some remarks on the anatomy of the of men who pursue a practice of routine. I parts to accrued in the operation, which we have never seen these means decidedly use- shall postpone to another occasion. The ful. I have known leeches to be prescribed child slept well the first night, and was proin such ill-judged numbers that the child died of hemorrhage almost before they were disengaged. The delay in the action of a blister is an insuperable objection to it. The valle of a counter-irritant is strongly displayed in the following case. A boy aged two years was brought to the hospital in the most unpromising stage of croup. I said I had no hope, but I would try an experi-ment. I applied a piece of lapis infernalis, extensively to the back of the neck, as if I designed to establish a large issue. The boy was quickly relieved, and rapidly recovered. Mercury is a remedy upon which reliance cannot be reposed. To wait for its effects is to waste time. In conclusion I shall observe, that I never saw a case in a child, of twelve hours' duration, which did not resist all the usual remedies of routine. It is high time to pass from a fruitless track into a new course. That, however, which I revasion .- Ibid.

WESTMINSTER MEDICAL SOCIETY.

Saturday, October 24, 1835.

Dr. Addison, President.

THE balloting box was kept open until a adults, connected with stone, as he believed quarter before ten o'clock this evening, for these to be contested points. the election of new officers, when a scrutiny was taken, and the following members de-clared to be elected: -Mr. Richard Quain, son, Gridith, H. Johnson, Horne, Laycock, Streeter, Walce, Winslow, and Dr. Ryan, don't walve, and forested that the operation of lithot-members of the Committee.

UBETHOTOMY AND CYSTOTOMY. relating the case of a child seven years of patient under thirty-five years of age; and age, the offspring of a soldier, who he had infrentimes he was confident that when that been requested to see during the past week gland was supposed to be affected in persons at Canterbury, who had a stone in the below that age, the symptoms depended on urethra, and one in the bladder. The nature of the case had previously been over-disease was recognisable through the reclooked, and he now decided that not lithot- turn in patients under forty-five years of the but lithotomy ought to be adopted, and age; for as life advanced, the prostate beaccordingly performed. The mode came firmer and of a denser structure. regards the line of incision,

The PRESIDENT requested to know,

whether the bladder was much thickened; and, also, whether, in adults, Mr. Costello had found that the degree of thickening was proportionate to the straining which

calculous patients make.

Mr. Costello replied, that he did not believe that the bladder was prone to thicken, prior to pubcrty; no doubt, however, violent efforts of straining were a cause of thickening.

Mr. House asked, in what condition the bladder usually presented itself, when the calculi were found situated in the kidneys.

Mr. Costello presumed that this depended on the fact of that viscus remaining quiescent or active during the renal affection.

Dr. Appison alluded to two cases, which were designated cases of "irritable bladcommend is suited only to the period of in- |der;" where the sufferings experienced from the bladder during life were most exeruciating; although, after death the bladder was found to be healthy, and a strumous diathesis affecting the whole substance of the kidneys, was discovered.

Dr. RYAN requested to know from Mr. Costello, what was the earliest stage at which he would recommend the breaking down of the stones in children, and what was the carliest period at which he had found diseases of the prostate gland in

Mr. Costello answered, that the youngest advisable age was four years; he had performed it on a child at seven years of age, Junior President; Mr. F. Hale Thompson, and numerous cases were on record at the attended with less pain in children, than that of lithourity. As to the earliest period of life at which he had met with diseases of the prostate gland, he could say that in his Mr. Costello opened the discussion, by own practice he had not met with it in any

Dr. RYAN said he was aware that an enthe rule laid down largement of the prostate gland was the ocks, the first " condition of old age," as surgical writers nearer to termed it. He would next ask if Mr. Costello here stones had tried in these cases the use of iodine. He maring one had himself, in two cases, afforded considerable relief, especially to one sufferer, who | had been discharged from our public hospitals without deriving the least benefit from the measures there adopted; and who, although the gland was very much enlarged, obtained case from the disease very rapidly; and no doubt the cure would have been complete had the nationt, who was very poor, and resided a long distance from the infirmary, been able to continue his attendance. He believed that the injection of Whiting's account. iodine into the bladder, thereby carrying the substance into immediate contact with the gland, would produce much benefit.

Mr. Costello regarded ionine as beneficial in cases of simple engorgement; but of the abdomen, a large and prominent tuequal benefit would result from scarifying mour, slightly moveable, and evidently conthe gland. He would remind the doctor taining fluid, with three or four other tuthat the cavity of the bladder, although it mours, less distinct and prominent, all conwas lined with a nuncous surface, had not taining fluid, of various degrees of consistence, the power of absorbing injectious; in proof and reaching down into the pelvis. of which he would state, that if one grain origin was obscure, and the fact was uncertain of onium in solution were injected into the whether they spring from above, or (though rectum, it would produce more effect than more probably) from the liver, perhaps contwenty grains thrown into the bladder. He neeted with the ovaria. They were of the therefore considered that advantage would hydatid species, and pressed all the abdonot be derived from the use of iodine in- minal viscera far out of their natural situajected into the latter cavity.

learning what had been the result of sing physic, he had some claims to a know-

the bladder. (See LANCET, No. 632, p. 861.) but he had no doubt that the time was ap-

water, were employed, great benefit was the under the pectoral muscle was similar in charesult in cases of catarrh of the bladder af- racter to these, and that the latter might fecting persons of advanced age, which be interfered with as well as the former; scarcely admitted even of palliation by any but he (Dr. J.) maintained that there was a other kind of treatment. The mode of very great difference between a timour using the instrument, and its construction, situated external to the pleura or the peritowere described, but as Mr. C. considered mean, or within either of those cavities, for, that it would be better understood by seeing in the latter case, should the contents of the it, he promised to show one to the members tumour escape into the cavities, pleuritis or at the next meeting.

Some further remarks were made on the therapeutic powers of iodine in the treatment of diseases, and then the Society adjourned.

LONDON MEDICAL SOCIETY.

Monday, October 19, 1835.

Dr. WHITING, President.

ABDOMINAL TUMOURS.

THIS Society commenced its meetings for general treatment the tumous the winter on the first Monday of the pre- smaller, but more sent month; the 19th, however, being the Iodine had been first day of which we are enabled to report proceedings. On the previous Monday evening a case had been related by Dr. attachment

WHITING which was regarded as one of so much interest, that an opportunity was afforded, we believe, to the members to pay the patient, a young woman named Martha Collard, a visit. Dr. Johnson, it appeared, had availed himself of the occasion; and the report before us of his statements, and the discussion which ensued, runs thus, from which must be gleaned the particulars that are necessary to a general knowledge of or.

Dr. Johnson said he had found the young woman to be very respectable in her station, and communicative. On examining her person he discovered, deeply buried in the cavity tions. To an operation for their removal Dr. LEONARD STEWART Was desirous of the could not agree, -although, while profespassing a continual stream of fluid in and ledge of surgery,—and at the present moment out of the bladder, while the patient was he should refuse to assent even to the evalying in bed, by means of a peculiar appa- cuation of the fluid, unless it was designed ratus, in cases of mucous discharges from that the patient should perish on the table; Mr. Costello answered, that whether de-mulcent fluids, or an alkaline solution pre-pared with the liquor potassæ and distilled maintained that an hydatid tumour situated

peritonitis would assuredly result. Mr. PILCHER, under whose care Martha Collard was placed conjointly with Dr. Whiting, agreed that whatever propriety there might have seemed some months ago, when the chief tumour was less prominent, and did not fluctuate, in removing it, he was satisfied that if now attempted she would die; but still if she and her friends particularly wished it, he would have no objection to use the knife. If guided by his own judgment, however, he would puncture the mort prominent to remove its contents, establish a drain. Since she had been

Mr. Jones moving to

were not so extensive as was generally pre- | when in the erect position, and a dreadful concerved.

Dr. Johnson alluded to Lizars' successful removal of a gigantic abdominal tumour from a woman, where the incision could not have been less than fourteen inches in length. But where one similar operation succeeded, ninety would fail. Here the subject dropped.

CÆSAREAN OPERATION FOR THE REMOVAL OF A PETUS FOURTEEN MONTHS AFTER CONCEPTION

Mr. HUTCHINSON read a case of uterine pregnancy, in which the fortus was removed from the andomen fourteen months after conception. Mrs. J., aged twenty-eight years, of an active disposition and good constitution, had been married eleven years without having children; the catamenia were regular until August 1834, when they ceased, and she believed herself to be pregnant, in which belief she was supported by her medical gentleman, who found every symptom attendant on pregnancy. From the month of September her breasts enlarged considerably, a milky fluid was secreted in abundance, and the areolæ around the nipples were strongly marked. The uterns enlarged more rapidly than is usual in the early months of pregnancy, so that by the middle venience for a day or two after, from the portions of putrid skin and membranes. however, the abdomen continued to enlarge, and her legs became ordeniatous-From the latter part of May she gradually wasted, and the breasts and lower extremities fell to less than half their former dimensions, except the abdomen, which remained, as to size, stationary, but her general health suffered materially. Such was istory of the symptoms up to the 14th when the patient first consulthinson).

sense of suffocation when in the recumbent. On examination per vaginam, that canal was found to be shorter than natural, and its sides were compressed by the protrusion of a large tumour, occupying a portion of the pelvis, situated between it and the rectum, and the os uteri was indistinctly felt, the fundus appearing turned downwards and backwards, its mouth being forced up behind the pubes. On the 8th of July she was much altered for the worse, and yet more reduced; pulse 115, respiration laborious, tongue dry and furred, and the bowels constinated; constant vomiting; pain in the back; continual desire to micturate; she suffered also from frequent labour pains, and bearing down, with cramps in the legs, and her nights were restless. Ramsbottom now also saw her, and after examining the tumour externally, and by the vagina, he (Dr. R.) was of opinion that the case was one of ovarian disease, and that paracentesis abdominis ought to be had recourse to. On the 12th of July the Doctor and his father met, when, from the distinct sense of fluctuation communicated to the hand, he believed that there was ascites, complicated with ovarian enlargement, and the senior physician concurred in the propricty of evacuating the fluid without loss of September she was of very great size. of time. Accordingly on the 15th of July, She now suffered from pains in the back he (Mr. Hutchinson) introduced a largeand the region of the stomach, occasioning sized trocar through the linea alba, about syncope from their severity. During the two inches above the umbilious, where the next month the movements of the child tumour was more prominent, when about were felt, and it went on increasing in ax pints of a dark chocolate-coloured fluid size. After December the child was regularly felt, and seemed to become gradually not a fetid odour. This operation afforded stronger. At the end of April she was considerable and almost instantaneous reseized with periodical interine pains, at lief. Dr. F. Ramsbottom expressed surprise tended with strong hearing down, and she at the character of the fluid, having been then considered herself in labour, especially previously impressed with the conviction as the ninth month, according to her calculated that the fluid was contained in the peritolation, had arrived. The pains continued ucal cavity. At the expiration of a fortnight through the night, attended with a slight a lock of feetal hair escaped through the openbloody discharge, and after the passage of ing in the tumour, which had not healed, two or three stringy substances, they gra- and other pieces afterwards repeatedly passdually subsided. She suffered great incon- ed through, as well as globules of oil and restlessness of the child, after which the hard circumscribed tumour could now be movements were no longer sensible; still, felt through the abdominal parietes, in the left hypochondrium, evidently betokening the presence of the head of a child, and the nature of the case was then apparent to all. In September her symptoms became aggravated, and she suffered much from constitutional irritation. On the 21st of Septemher Mr. Hutchinson proposed to remove the feetal head, to which Dr. Ramsbottom objected, in consequence of the advancement of putrefaction, which would prevent an en-The symptoms tire removal of the remaining feetal substion, but the stance. After the original wound had been ; pulse 100; enlarged, the consultants not agreeing as to and she suftending the opening, it and she suf-the propriety of extending the opening, it tof the back was deemed advisable to call in a " pure"

son in his view of the case, Dr. R. acquiesced medical gentlemen who attended the case, in a proposal that the child should be rethough errors in one sense of the word, moved without delay. Mr. Hutchiason, were not so physically speaking; but still, therefore, performed the operation, by en-larging the wound both above and down he had his doubts of her perfect recovery, wards, to the extent of five inches, Mr. Mayo owing to the ulcerative process which had assisting, who introduced his hand, and commenced in the alimentary canal, indigrasped the right upper extremity, which he cated by the presence of fecal matter in the brought out of the wound, but the cross discharge which issued from the wound in position of the futus prevented its being the abdomen. extracted without separation with the knife at the shoulder-joint. Then followed a foot, and afterwards the tronk, but the head was too bulky to be brought away entire. The funis was divided. A portion of it with some membrane was left bauging out of the wound. On examination the placenta was found to be still adherent, and it was not removed. The wound was simply dressed and poulticed, and an opening was left in the lower portion of it, to allow the free exit of any fluid which might still remain in the cyst. The fectus was as large as an ordinary feetus at the full time of utero-gestation, and the cuticle was entire, except over the scalp. On the 24th of the month the patient had passed a good night, expressed herself as being much relieved, and appeared to be cheerful; the pulse 115, but evidently excited by the presence of the medical gentlemen; she was free from rigors or sickness, and experienced no pain in any part of the abdomen; the bladder and bowels spontaneously acted, and no medicines were prescribed. On the 25th the placenta was removed through the aperture, and had the appearance of baving been macerated for a long time in water. On the 2nd of October, a slight gastric uncasiness supervened, but decreased until the 8th, when she was attacked with constant pain on the right side of the abdomen, with sympathetic fever, but fomentations and salines afforded relief from these, and since then the general symptoms have remained the same, although the countenance has decidedly improved; the discharge is occasionally feculent, but granulations have sprung up, and the wound now does not extend to more than about half an inch in length. The softness of the abdominal parietes has entirely disappeared, and the poor sufferer appears to be in a fair way of restoration to health.

The unanimous thanks of the Society were returned to Mr. Hutchiuson for the detail of the case; remarks were offered upon it by several gentlemen, but these we withhold from publication in the present report, as every reason existed for expecting that others would be given at the next meeting, for at the hour of adjournment, seven or eight members were on their legs evincing anxiety to speak on the case; and it will be better to review the whole at once. One of the learned members observed,

surgeon, who concurring with Mr. Hutchin- that the various opinions formed by the

THE LANCET.

London, Saturday, October 31, 1835.

If we were to congratulate the profession, the public, and, above all, the parents and guardians of the eight hundred children who are domiciled in the town and country establishments of Christ's Hospital, on the election of that candidate for the office of resident surgeon, who, from his age and manifold professional qualifications, was the best fitted to discharge the highly-important functions of the station, we should, we regret to say, offer those congratulations on an event which has not occurred.

The cause of inhumanity, of injustice, and of intrigue, have once more triumphed in a medical election; but that triumph is so tainted and tarnished with disgrace and dishonour, that it has given the last stamp to the expressive seal which is attached to the decree of fate wherein is proclaimed the downfal of our entire system of hospital and medical misgovernment. There are upwards of four hundred governors of Christ's Hospital,-gentlemen of affluence and elevated station in society, who have become electors through the payment of a subscription of 400% each, or of 200%, through being the nominces of aldermen, - who, being aldermen, have become governors ex-officio. These gentlemen, insta electing Mr. PLUMBE, who gaged in the pres ing a period his tin

of pathology during upwards of twenty-six | pital without being educated, in consequence years, who for a long period was the of the check and interruption which their senior-surgeon of the Metropolitan Infirmary for Children,-and who, besides, is the well-known author of an approved work on the diseases of the skin,-these wealthy, respectable, disinterested, and discerning governors, have turned aside and spurned a practitioner thus qualified and recommended, in order that they might place in the office of resident-surgeon of the hospital, a wonth of the name of Thomas Stone, an assistant in the apothecary's shop of St. Thomas's Hospital! After such an exhibition of -we really know not what to term it,-on the part of the electors, we feel no hesitation in asserting that it is the bounden duty of Parliament to take from the governors of the whole of our medical charities, that patronage and those functions which they now enjoy and exercise in the appointment of medical officers. On the institution of a National Faculty of Medicine, the transference of the powers which, up to the present time, have, in almost all instances, been so improperly exercised by the lay governors of our institutions, to a high, an efficient, and a competent authority, would not only be a matter of easy accomplishment, but would be rendered an imperative act of duty.

Leaving corrupt and all other indefensible motives out of the question, what do we observe in the election which has just terminated? Why, the supineness alone which has been manifested by the governors, would call for and warrant the interference of the Legislature. Good God! How can such men pretend that their proceedings are influenced by motives of charity? They know that the boys in the establishment have been suffering intensely for above a quarter of a century from that scourge the ring-They have seen that their medical it not in their power to remove

we known that hun-

for the full

scholastic pursuits received from the ravages of the contagious scourge; and yet, with a knowledge of all these distressing and painful disasters, only a fraction more than one-third of the governors attended to give their votes at the election, and, strange to remark, the favoured candidate is a youth of twenty-four, and the second on the list is a youth of twenty-three years of age.

On what principle, then, did they proceed

in the contest? Really we are compelled to state, and it is with pain that we place such an allegation upon record, that the governors appear to us to have been influenced by every motive and consideration, save and except that of feeling the slightest interest in the welfare of the children who are committed to their charge. Only a hundred and fifty-seven votes were given on the occasion: yet there were ten candidates. every one of whom had some supporters,the winner who gained the victory in this extraordinary contest, obtaining only thirtynine votes. Three or four of the candidates had ten and twelve votes. Others had seventeen and eighteen, and so on; indicating in every instance the exact force of that degree of private family interest which could be employed in their favour. The circumstances, taken altogether, on being presented to the public view, render it a most lamentable and disgraceful exhibition. If the governors will but examine the oath which they take on being admitted to the hospital. they will scarcely centend that they do not falsily the spirit of that oath, if the whole of their official conduct be not regulated by an carnest desire to employ the funds of the hospital to the greatest advantage for the children. The terms of their oath are calculated to nullify every feeling of self-interest on the part of the governors. The ob. ligation, in fact, enjoins, directly, the most conscientious and scrupulous discharge of their duty. In connexion with that sacred left the hos- injunction, therefore, voluntarily undertaken. let us set before the public, and the LAURIE, are now called upon to make. parents and guardians of the children in possibly, a sacrifice of their health, and of Christ's Hospital, the words of Sir Peren many, if not of the whole, of their worldly LAURIE, an alderman and magistrate of the interests, on account of benefits which were City of London, and one of the governors conferred on the ex-ufficio governor. Even of Christ's Hospital. Let us take the words the ballot, powerful shield as it is against of this occupant of the judgment-seat, - corruption, furnishes no security for talent of this manager of a great public charity, or honesty, when men choose to be governand by those words let us test the conduct, ed in their conduct by such motives as have the disinterested and henevolent conduct, of been exemplified in the behaviour of Sir his brother voters. We shall give his words PETER LAURIE. At any rate the worthy in a dialogue which occurred between Sir knight was frank. He stated why he gave Peter and one of the candidates:-

calling to solicit the honour of your support Hospital.

Sir PETER LAURIE.-Your name is fa-

my vote is engaged.

CANDIDATE.-If it were not taking too great a liberty, Sir Peter, would you, as I am anxious to ascertain the relative strength of my opponents, state to whom your vote; is promised.

hoped that my qualifications for the office would have been preferred to those of a youth; of being taken into account. Still, Christ's who is not yet out of his pupillage in an hos- | Hospital is a " charity," and the governors pital.

Sir Peter .- I admit the propriety of your observations, but to tell you the truth, the regarded as charitable men. FATHER of the young gentleman has serred me on several occasions, and I felt, on being; canvassed, that I could not do less than promise my rute to his son.

tion, must perceive that if he had sold his LLOYDS, and the EARLES, have been deof such sale could not have operated with their nominees in the medical office of the worse effect on the interests of the children, neighbouring establishment. In preferring in Christ's Hospital, than his having at- the assistant-apothecary of St. Thomas's tempted to place over them a person, Hospital to persons who were recommended merely because the father of that indivi-, by the medical officers of St. Bartholomew's dual had rendered him a personal service. Hospital, some, at least, of the governor It was right, of course, that he should feel have proved that they were a grateful to his benefactor; but why make ignorant of the inca other parties pay the cost of his gratitude? magnates of 84 The poor children, and not Sir Peter wage a succe

his vote to the youthful and inexperienced CANDIDATE. - Sir Peter, my name is candidate. There was no disguise about , and I have taken the liberty of him, and instead of attempting to justify in the election which is about to take place his conduct, he offered an apology for his for the office of resident-surgeon in Christ's vote,-the only excuse which the circumstances could seem to warrant. The fether miliar to me, sir, but I am sorry to say that of the candidate had served Sir Peters LAURIE, and therefore the vote was given for the son. The health, the happiness, and the well-being of thousands of children. for many years to come, were items so triffing, insignificant, and unimportant, in this affair, they were not deemed worthy of that institution, we suppose, must all be

Gloomy as is the picture which this disclosure presents to the view of the moralist, yet it contains one point of relief. What chance has merit in an electoral Thomas Stone was not an assistant discontest when motives such as these can in- penser in the apothecary's shop of St. Barfluence the conduct of the voters? Sir thalamere's Hospital. The Vincents, the PETER LAURIE, on examination and reflect Stanleys, the Lawrences, the Hues, the vote for one hundred pounds, the tendency feated in their attempt to plant another of enemy as the ringworm. A new officer, therefore, is selected, from another establishment, and let us hope that the improved system of diet and treatment which was recommended by Mr. Plunks when he was consulted by the Special Committee, will not be disturbed by Mr. Thomas

Tonk.

from Mr. Tarbutt, one of the Governors of the hospital, that not one of the royal or endowed hospitals or charitable establishments of this metropolis, should be excluded from the operation of the new Charity Commission Inquiry. Since the year 1816, whenever the Act for reviving the Commission was renewed, it was always managed

But some sad misgivings oppress our thoughts on this subject. We fear, indeed, that the assistant-apothecary of St. Thomas's Hospital was chosen by King HAR-RISON and his brother treasurers, because the vonth has shown that he is endowed with that pliability of disposition which will always render him subservient to the word of command in the office of apothecary to Christ's Hasnital. Such a quality of mind was held, we believe, by the majority of voters on this occasion, as infinitely to be preferred to a knowledge of the diseases of children, - a supposition which received some show of confirmation from the fact. that Mr. Eyseniys Liovo had threatened to resign his office if Mr. Peumbe should be called upon to discharge the duties of resident surgeon. The importance of this threat may be estimated by the governors, as, also, may be the value of Mr. Laoyo's survices; though, for ourselves, we are utterly at a loss to understand the weight of either the one or the other, more especially after having observed the miscrable figure which Mr. LLOVD has cut in his ten-year fight against the ringworm. Fortunately, then, as the assistant dispenser of St. Thomas's Hospital is elected to the office of resident surgeon in Christ's Hospital, Mr. LLOYD will not carry his threat into execution. He will not resign the office of visiting or consulting surgeon, which is a subject of congratulation for posterity.

We cannot conclude this subject, and take ur leave, for the present, of the Governors toppilal, without expressing our hose Ministers of the presentation Commons,

of the hospital, that not one of the royal or endowed hospitals or charitable establishments of this metropolis, should be excluded from the operation of the new Charity Commission Inquiry. Since the year 1816. whenever the Act for reviving the Commission was renewed, it was always managed in the exemption clause, to provide that the affairs of certain of the hospitals should not be made the subject of investigation. In the Act which passed the Legislature at the close of the last session, and in which measure it is ordered that the inquiry into the whole of the remaining institutions shall terminate in, or before the commencement of, the month of March 1837, -only seventeen months from the hour in which we write,-no such nefarious exception was allowed to be introduced. Even in some of the institutions where the inquiry was not pushed so far as the demands of public justice required, it will be renewed and prosecuted with the utmost vigour. The pecuniary and other concerns of Christ's, St. Bartholomew's, St. Thomas's, and Guy's Hospitals, will soon be subjected to a scrutiny which cannot be concluded without advancing the best interests of those great national institutions. Had there been less of jobbing in some of those establishments. less of corruption in electing their medical and other officers, they might again have been included in the exemption clause of the new Charity Commission Act; but as their aluses had become too manifest and odious to be defended, they are committed, without restriction or complaint, to the scrutinizing researches of the Commissioners appointed by an executive government, the members of which are pledged to promote and support the cause of national medical reform.

In placing the letter of Mr. Rumser (page 187) before the practitioners of medicine in this country, we feel called upon to express a hope that the questions which

have been proposed by that gentleman will Lincoln's-Inn-Fields. The members of the not remain unanswered by his professional junto, the self-perpetuating clique of twentybrethren. With reference to the subject one, have passed over the name of Mr. W. of his communication we can only observe, Kingdon, in the list of members who are that the proceedings which are still manifested in several of the Unions relative to thus insulted Mr.W. Kingdon has shared the medical contracts, are altogether at variance with the assurances which were given, both to the Kent deputation, and to ourselves, by the noble Lord the Secretary of State for commonalty. Be of good cheer, then, Mr. the Home Department in the House of Commons, and by the Poor-Law Commissioners at their apartments in Somersct-House. The There is one more reformer who we could Commissioners contend that the Board of not so have named had the Council been Guardians are at liberty to make as many contracts with medical practitioners as they Mr. Kingdon being one of the "quiet and may think proper, and we have every rea- the peace-lovers," he would have remained; son to believe that this allegation is strictly stranger to the exertions which reformer: and faithfully correct. If, therefore, the make for the benefit of their fellow-crea-Board of Guardians, who have a permissive tures, had he not been spurned at a moauthority in this instance, fail to discharge ment when he hoped to be caressed. Bu their duty in accordance with the dictates Mr. KINGDON has altogether mistaken hi of humanity, and in compliance with the position. His perceptions approach his in behests of the members of a most useful and | tellect through a mist. Can his characte honourable profession, the Poor-Law Com- suffer by his exclusion from the College missioners will be called upon to interfere, | Monstrous thought! Had he been choses and compel the parochial functionaries to by the junto as a fit associate for them, then obey their command, as a just punishment for their having failed to exercise a judicious authority.

engage the attention of the House of Commons at the commencement of the next session of Parliament, unless some effectual remedy for the grievances of which the profession and the sick poor complain, be applied in the mean time. Mr. Rumsny, and the Committee of which he is so able a member, are entitled to the gratitude of the public and the profession, for the active part they are taking in order to remove a most serious and cruel evil.

There is a letter at page 188 of this week's LANCET, from Mr. W. KINGDON, in which that gentleman complains of his ex- College of Sa clusion from the Council of the College in ruary, 182

"eligible" for seats amongst them. In being fate of HUNTER and of WARDROP, of JOSEUA BROOKES and CONSTANTINE CARPUR, and some hundreds of other members of the KINGDON.

We now have an accession to our ranks. honest in the exercise of their discretion in truth, he might have bewailed the loss o reputation in the profession. Behold the fate of WILLIAM LAWRENCE! He wa We will take care that this subject shall elected. He is one of the set. He acts with them, he sits with them, he persecutes with them, he prosecutes with them. And wher is WILLIAM LAWRENCE? He is THERE and THERE only. It is the burial place o his reputation. No. no. Mr. Kingpon, Hayou been elected, your character for honest would have been lost. You now preserv your integrity, at a cost of three hundre pounds a year; and considering your high regard for the honour of your fame, yo will feel and acknowledge with us that th receipt of the pounds sterling would hav proved but a sorry recompense for the

At the great meet

of your character for integrity

- "firm but respectful remonstrance to the subject with your "hats off," and a report of " heads of the College, -a firm but respect-
- " would achieve the object that the members
- " of the College had in view."

Before we say another word to Mr. KING-DON on the subject of his exclusion from the Council, we commend to his notice the brief speech that was delivered by him at that meeting :-

"Mr. KINGDON.-1 think we had better proceed to remedy the evils we now feel, than go to evils that we know not of. It appears to me that there is great inclination on the part of those gentlemen who are at the head of the institution, to redress the evels of which we now complain. cries of "no," and marks of disapprobation.) Gentlemen, it has been said that each member present has a right to express his opinion with respect to the business upon which we are met; and, certainly, upon a subject like this, if he can by possibility have more than a right, I feel that he has more than a right to express his sentiments. (" Hear, hear." And I do repeat that such strong resolutions, coming from such a meeting as is here, will have such a tendency on the conduct of those men at the head of the institution, that a remonstrance made to them, firm, but respectful, will procure a redress of our grievances. A firm, but respectful remonstrance in that quarter will have the effect of remedying the evils complained of. (Applause and disapprobation.) And I beg of those gentlemen to consider well how they hastily throw off from themselves their present charter, for, if they let it slip from them, they may get that which will interfere with them a great deal more; and I cannot help thinking that the objects of the profession will be best promoted by their doing that which this meeting seems inclined they should do, and which a respectful remonstrance will have the effect of procuring."

What say you now, Mr. Kingpon? Was a "remonstrance" the appropriate remedy? Really we are anxious to know what you would have said of the conduct of the College, or of the constitution of the Council, if you had been chosen one of the Council--if (that is), by your premeditated rou had been enabled to pocket per amum of the LAWRENCE ence on this

the proceedings at the conference shall ap-"ful remonstrance in that quarter, - a pear in the pages of THE LANCET, for the " firm but perfectly respectful remonstrance, benefit of the uninitiated members of the protession.

> A CORRESPONDENT informs us that some blockhead of a lecturer has been accusing this Journal of being influenced by its selection of articles for insertion in its pages, by the tender of pecuniary bribes. As the writer has promised to send us the passage in print, we shall refrain from saving more on the subject until we see the specific charge. Accusations of such a character, however, are by no means unacceptable. Every ass thinks his own bray the best, and if his paper be not received, attempts to account for it to his friends by saving that "his " purse is not long enough to ensure the " insertion of his communications."

We rely on the performance of the promise of our correspondent.

QUESTIONS

RELATIVE TO MEDICAL ARRANGEMENTS UNDER THE

POOR-LAW AMENDMENT ACT.

To the Editor of THE LANCET.

Sir .- At the last unniversary of the Procincial Medical and Surgical Association at Oxford, a committee was appointed to consider and report on the best means of affording medical relief to the sick poor, especially with reference to the Poor-Law Amendment Act.

As Secretary to this Committee, I am desired to solicit you to further their objects by inserting the present communication, and by supporting it with such arguments as your own just views of the subject may suggest.

The lamentable effects of recent measures. both on the sick peor and on the medical profession, and the determined attempt to continue and to justify them, evinced by the last report of the Poor-Law Commissioners (dated August 8th, 1835), demand the most decided and unanimous conduct on the part of the profession. Our opposition will, however, possess but little moral force, if it

be not supported by substantial reasons, and these reasons can only be deduced from a correct and ample compilation of facts, which, unfortunately, exist in such profusion where the new law has been carried into effect.

These considerations will, we trust, induce our professional brethren, residing in those parts of the kingdom already under the operation of the Poor-law Amendment Act, to supply us largely with answers to the subjoined queries. By so doing, the labours of this committee will be rendered more efficient, and it is hoped that, in consequence, a more suitable, a more just, and a more humane system of parochial medical relief will be adopted. I am, Sir, your obedient servant,

H. W. RUMSEY. Secretary to the Committee. Chesham, Bucks, Oct. 26, 1835.

The subjoined questions are addressed to individual country practitioners.

- 1. What has been the mode of appointing and paying medical officers of parishes in your neighbourhood for the last few years?
- taken place since the introduction of the Poor-law Amendment Act?
- vided for the poor as formerly?
- district or districts entrusted to the care of one medical officer?
- 5. What is the greatest distance of patients from the medical officer, and is that distance greater or less than it was under the old system?
- 6. How are orders for medical relief obtained in ordinary cases? and how in urgent?
 7. Have "tenders" been required? and

extent:

8. What are the amounts of the stipends? Are they fixed annual sums? or are they payments per case? If the latter, is any gradation, according to the numbers or distance of the patients, allowed? and is any limitation to the sum total exacted?

9. Are the forms of the contracts in any of their clauses degrading to the respect-

ability of the profession?

10. Have there been any instances of distress and danger to the sick panpers, and to what direct causes are they attributable?

11. Are there any other particulars, bearing on any of the above questions, that occur to you as being worthy of remark?

As the prosecution of this inquiry is likely to be attended with considerable expense, it is suggested that, on public grounds, communications addressed to the Secretary legal ineligibility to should be post-paid.

EXCLUSION FROM THE COUNCIL OF THE LONDON COLLEGE OF SURGEONS.

To the Editor of THE LANCET.

SIR .- Will you have the goodness to grant insertion of the accompanying letter in your Journal of next Saturday, and oblige, Sir, your very obedient servant,

W. KINGDON.

2, New Bank-buildings, Oct. 26, 1835.

TO THE MEMBERS OF THE

MEDICAL PROFESSION.

GENTLEMEN,-Having of late been treated with injustice by the majority of the Council of the College of Surgeons, and having learnt that he who tacitly submits to injustice becomes an instrument to his own degradation, I take this, I believe the most proper, method to protest against the measure of exclusion which has been practised towards me. Thinking that such a body would not willingly treat any one with in-2. Has any alteration in the above mode justice. I suspected there must have been, anknown to me, some disparaging report abroad, and therefore addressed the Presi-3. Is an equal number of medical men pro- dent and Council to inquire if, to the belief of any of them, such report existed. 4. What is the population or extent of the some time I received an answer avoiding the question, and thus in effect admitting that if they allowed me an unsulfied reportation, they damnified their own conduct. On the same showing, however, their conduct was calculated to damnify my fair fame,--more valued and estimated by me, as more essential than life itself to the welldoing both present and future of myself and Without power to question this tamily. have they been furnished? and to what conduct, shielded as it is by charter, granted we may presume by a gracious sovereign, for the benefit and not the oppression of his subjects, I still have the power possessed by every English gentleman to see that my reputation do not suffer by the partial or selfish conduct of others, and it is for this reason that I now address my professional brethren. After more than twenty years of public and private practice as a surgeon in London, I must be known to some of you; and I address you to intreat that if any of you know, or think you know, anything disparaging to my character, you will have the goodness to inform me, and thus confer the greatest favour that man can confer on man; for I am conscious that any such disparagement need only to be made known, to proved as resting on misappreha founded on falsebood.

render

my College, 1

imply that L tensional o

for election. respecting me, given to the Parliamentary Committee by the then President of the College (which he afterwards made all endeayours to correct that gentlemanly feelings could prompt), has been deemed a sufficient cause to throw me out of my fair professional course; or unless my not having an hesitate to tell him that the amount of adinterest in common with surgeons of hospital, or a mind easily led to surrender its own views and see things as others wish, be deemed a sufficient cause, and neither of these can be supposed to influence the minds of honourable men, I must remain under the stigma of exclusion for my own demerit, did I not make this appeal to my professional brethren, so as to make known to them that on the majority of the Council rests the responsibility of having used their power unjustly. Such conduct needs only to be canvassed, for the reprobation of the right-thinking to fall on those who practise it : and I have felt it my duty to offer my character for the strictest investigation, in order that the majority of the Council may have the benefit, if anything can be found against it, as an excuse for their unprofessional and unjust conduct. It is the conduct of such men that drives the quiet and the peace-lovers to seek and enforce change. It is the conduct of such men that renders futile the best efforts of the honourable and the able to place the affairs of our country on a footing of fairness and stability. I am, gentlemen, very faithfully yours.

W. Kingpon. 2. New Bank-buildings, London, Oct. 26, 1835.

ENGLISH EDITION OF LEBAUDY'S PLATES.

To the Editor .- Sir, - I was happy to find in the notice which appeared in the last number of THE LANCET, on the Anatomico-Chirurgical Plates of M. Lebaudy, that the only objection against the work related to the price at which it is published. By correct information as to the number of plates contained in the fasciculus sold in Paris, and considerations of the expenses necessarily attending publication in England. I feel assured that the writer of that article will soon be convinced of his mistake in estimating my profits on so exorbitant a scale, and I shall trust to the known character of your contributors in general, for a contradiction of this imputation against my racter as a man of fair and honourable The fasciculus of plates published of twelve plates (not lish copy contains), exper, without

d the duty

Unless erroneous information | upon them, let the writer add that of translating, printing, and putting into boards, and he will find, after defraying these expenses, that my profits are by no means exorbitant. In case, however, the writer of the notice in question have not the data for making the estimate I mention, I do not vantage I derive from the sale of each copy of the Atlas, to the trade, is precisely three shillings. Trusting that you will do me the justice of inserting this in your next number, I remain, Sir, your obedient servant, J. B. BAILLIERE.

219, Regent-street, 27th Oct., 1835.

WESTMINSTER HOSPITAL.

THE officials of this establishment have abandoned their old and ruinous abode in the smoky region of Petty France, and have domiciliated themselves in a spacious edifice in the broad sanctuary on the north side of Westminster Abbey. Of the architecture of this building the critics say that it is of the "Tudor collegiate style." The plan of the architects may have been laid to complete the building in that fashion, but the funds of the building committee have not been extended far enough to perfect it. The pile, as it stands, is typical of the Hottentot Venus, having an apron of ornament in front, with the back and sides in puris naturalibus. 2501. would have sufficed to cover the nakedness.

REMOVAL OF A LARGE MALIGNANT TU-MOUR OF THE CHEEK WITH A PORTION OF THE BONES OF THE PACE.

SATURDAY last was regarded as a regular "field-day" at this institution, in consequence of the performance of the above operation. In perambulating the wards, we observed a case of scrofulous disease of the ankle-joint, one of necrosis of the tibia in a child, in which, considering the small portion of bone removed, the wound appeared to be outrageously large; there was also a case in preparation for lithotrity, and one of severe burn and scald of the left lower extremity, which was covered with large vesications, and small collections of matter were forming and burrowing under the muscles. One of these was, in the language of the surgeon, ordered to be "scratched." " Now, sir," said Mr. GUTHRIE to a pupil of St. George's Hospital who was present, "show the young gentlemen into the operating theatre; let them get on the upper seats, and leave the lower one for the old men, the white-wiga." In a few minutes the operator entered, followed by the rest of the hospital staff, amongst whom were Messrs. STANLEY and KEATE.

visit to the patient in Queen Anne's ward, where we found a pallid female, about fortysix years of age, lying on her bed, wrapped in a flannel gown. This female was to become the subject of the proceeding.

molares also lost their hold. The facial tumour likewise steadily increased in size, assuming a conical shape. In March last she applied at a dispensary in the country, recommended to come to London. Soon after her admission into the Westminster Hospital, Mr. Guthric made an incision into emancipating some pus. This aperture did not close, but communicating with the subjacent disease, became fistulous; the fetid sanious discharge fell into the mouth more profusely, and being swallowed, produced nausea and vomiting. In this way her appctite was destroyed, and the constant lancinating pain in the tumour broke her rest. She has recently become much emaciated. The catamenia have been irregular for four years. During the last year they have appeared four times. The bowels have uni-formly acted well. Since her admittance pointed knife. the scope of the treatment has been merely alleviatory. Some difference of opinion existed among the surgeons as to the propriety of the operation; but, it being determined in the affirmative, Mr. Guthrie made prepa. discased mass, was rations for its performance.

The patient was placed in a chair, having terior order the head supported on pillows, and kept employments

Previous to the operation we paid a brief | steady by an assistant. A vertical inclaion was made through the integuments, extending from just below the tendon of the orbi-cularis palpebrarum muscle, to about half an inch within the angle of the mouth, which divided completely the upper lip. By this Her name was Mary Brown, and she had incision the coronary branch of the facial been for some years a resident of Codicol, artery was divided, and a little hemorrhage in the county of Herts. She was admitted was produced, which however soon ceased. into the hospital under the care of Mr. Another incision was carried somewhat shouthrie, on the 8th of July, 1835, with a liquely outwards and upwards, so as to tumour on the right cheek. She has been avoid the parotid duct, towards the lobe of married and has had fourteen children, of the ear, and a rhomboidal flap of integuwhom six survive, and are, apparently, unment was then obtained, by making a third
affected with any disease. The woman herincision from the outer extremity of this to
self had always enjoyed good health until
the temple. This flap was then speedily but
the development of the present disease. carefully dissected, as far as the lower eyelid,
She has for some years been employed in from the surface of the tumour, which was
nursing, and for eighteen months previous thus exposed, having the remains of the zyto giving up her employment, she was occu- gometic and other muscles of the face pied night and day in attending an elder stretched over it. As the tumour had a ly lady; but during all this time she was somewhat loose connexion with the adjacent not conscious of, nor did other persons no-surface of the maxillary bone, and from its tice any deterioration in, her bodily health. protuberance was likely a good deal to im-About Michaelmas, 1834, the superior max-pede the further steps of the operation, Mr. illary teeth of the right side began to ache, Guthrie removed it at once, by making a the gums became spongy, the same teeth few incisions around it with the scalpel. A became loose, and an offensive discharge large mass of dense scirrhous structure, of distilled into the mouth. At the same time ulmost cartilaginous hardness, was thus rethe cheek of the same side gradually swelled. moved, which proved to be the anterior She sought no medical advice; but of her paries of the antrum, and which had become own accord applied fomentations and other the seat of this form of abnormal formation, mild remedies, without deriving any bene- attended with the absorption of all traces of deial result. In the course of last spring the bony tissue. By this means the max-she found clots of blood descending into illary sinus was of course had open, and its the mouth from the teeth, two of which posterior wall exposed, which was found fell out; afterwards the bicuspides and involved in a similar state of disease. Mr. Guthrie now divided the zygomatic process of the jugal bone by a stroke or two of the mallet and chisel, and by the same means separated its ascending orbital process from where she was supplied with a lotion, and the external angular process of the frontal, which did not require any great degree of force, owing to the softness of the osseous tissue. In this way the bone was perfectly the apex of the tumour, for the purpose of freed on the outer side from any attachment to surrounding parts. Directing his efforts in a similar manner to the inner side, the maxillary and palatine bones were separated from their fellows in the line of the palatine suture, by insinuating the chisel between the two front incisor teeth. An opening being made into the right nostril by piercing the cartilage of the ala nasi, the masal bone was separated by the chisel from the nasal process of the superior maxilla, and the lachry mal bone and the orbital plate of the ethmoid were cut through with the blunt-

The superior maxillary nerve where it lies in the spheno-palative fossa, having first carefully divided with the GUTHRIE, by placing hi its situation calpel was

as effected with considerable difficulty, in assequence of the impediment caused by e motions of the tongue. When the mass as brought away, part of the posterior igle of the diseased sinus, where it often mmunicates with the ethmoid cells, was und to be left behind, and required sepate and rather tedious dissection, as did adpart of the glandular structure of the ft palate, and the amygdalæ, which had articipated in the disease; as well as a poron of the pterygoid plate. Here of course ie greatest care was incumbent on the perator, from the proximity of the carotid, hich he afterwards stated he was in great ar of wounding. Upon the division of the ranches of the internal maxillary artery, me hemorrhage occurred, which occaoned a good deal of distress to the patient, y the blood accumulating in the fauces. was, however, expelled by the expiratory forts, which were increased in violence as ie blood accumulated. The mouths of the ivided arteries very quickly contracted, ery little blood being lost during the operaon, and not a single ligature being required. Ir. GUTHRIE now requested Mr. WHITE to camine the surface from which the tuour and its excrescences had been reloved, in order to ascertain whether any estige of it remained behind. A little was etected at the upper and posterior angle of ie cavity, most probably in the walls of the pheroidal sinus, which being seized with a ook, was, after a little tedious dissection, moved. The bone was afterwards scraped. The removal of the disease now being acamplished, and forty-five minutes having lapsed, the patient was allowed to rest a ttle, and some wine was administered. ler wet and bloody linen was removed, and ac was placed in a bed which had been rought into the theatre for that purpose. he edges of the divided integuments were rought together, and retained in apposition, -in the situation of the outer incision, by neans of two or three stitches of interupted suture, metallic wire being employed viously. istead of silk; whilst the incisions in those arts of the check and lips which were unupported by any subjecent bone, were losed by means of the twisted suture, about ve hare-lip pins being employed. A little imple dressing was laid over the check, and bandage was lightly applied.

The operator was assisted by Mr. THOM-ON and Mr. SOADEN.

Although the operation lasted forty-five sinutes, it was borne by the patient with a

scessary to remove these connexions, which | " I want something "that will cut here!" "A pair of curved scissors!" "A hook!"
"A blunt hook!" "A curved hook!" "Hot water here!" "A sponge!" "My little short scissors!" and sundry others (not all of them the operator's exclamations), which were occasionally varied by, "You bear it very well, my dear lady!" "It is almost done!" "By the blessing of God, my dear soul, it is nearly over!" "Give her a little wine!" "Don't go yet, STANLEY, I want you to see it quite done!" These remarks were throughout accompanied by the clanking of scalpels, knives, and scissors, in a pewter basin, close to the patient's ear, producing altogether a discord more horrible and distressing to the sufferer than we have ever witnessed before, or hope ever to witness again.

> Tuesday morning, Oct. 27 .- No antoward symptom has occurred since the operation. The patient slept for two hours immediately afterwards, and has since been free from restlessness or febrile excitement. She has taken nourishment, chiefly warm milk and arrow-root, and, at her desire, occasionally, small quantities of wine and water. Deglutition has been performed with very slight difficulty, and respiration not at all affected by the operation. She has taken no medicine, but it has been necessary to keep the bowels open by injection. The wound is every where uniting, the skin is sound, and round the fistulous opening in the cheek rapidly recovering its healthy appearance. There is slight tumefaction of the lids on the outer side of the orbit. The pulse has continued at 120, the same as before the operation, no variation being detected until this morning, when the beats amounted to 102, which are regular, and more sthenical. Some time after the operation, on attempting to speak, the expectorated breath distended the affected and boncless cheek in a hideous manner, but this we understand does not occur now. The patient states that she has been much easier since the amputation than she had been for some time pre-

Convenient mode of contradicting FACTS WHICH CANNOT BE DISPROVED .-" The Lancet and the Medical Institutions of Ireland .- We consider ourselves imperatively called upon to state, for the information of those unacquainted with Dublin, that the articles which appear from time to time in THE LANCET, respecting the profession and courage. Not an exclamation of pain its institutions there, contain such gross and Mr. Wriss, jun., and other impudent falsehoods, that no confidence were present, with every should be reposed in them. We do not state aid the operation.

this to avert these calumnies; they have been, strange as it may appear to simple hely-censur-people, of singular advantage to the objects of them, but constructed as some of them

have latterly been to impose on experienced for a great work on the nervous system, students at the approach of the medical The Professor is between fifty and sixty session, we consider ourselves called on to years of age, of lofty stature, and amiable interpose."-Dublin Medical Journal, Nov. manners. While in London he sat to an 1835.

"Called upon to interpose," in order to "Called upon to interpose," in order to be "calumnies" from continuity of the Hotel Dieu, in Paris, has also been any longer to be "of singular advantage to here within the present month. He visited the medical institutions of Ireland!" These shallow-pated dividers of the spoil under corrupt systems of medical government should confine themselves, when speaking of medical reform, to stating something less, and proving something more, than is their custom, taking especial care, however, that pital, to be performed by Mr. Earle. they do not shoot beyond their mark, and " prove rather too much."

artist for a portrait, which, we believe, is about to be published by Mr. Schloss of Westainster. M. Chomal, chief physician the various metropolitans, and found one or more of them "not very clean or very decently furnished." M. Jules Cloquer is also in London, and designs this day (Saturday, October 31st) to be present at an operation for osteo-sarcoma of the lower jaw on a male patient at St. Bartholomew's Hos-

CORRESPONDENTS.

PROFESSOR TIEDEMANN, of Heidelberg, left London on Saturday, the 24th inst., after having spent a month in England and Scotland, where he has been collecting materials and where he has been collecting materials and at the acquired and sent a month of the name meationed by our Correspondents, nor thand, where he has been collecting materials as an attendant at the acquired as a contraction from the name meationed by our Correspondents, nor that we know that such a person as is described was an attendant at the acquired that the scotland of the name of t

THE EANCET .- The two volumes of this work, consisting of fifty-two weekly Numbers, for the year 1835-36, were commenced on the 26th of September 1835, and will be concluded on the 25th of September 1836. These two volumes will contain, in addition to other interesting and invaluable matter, REPORTS of CASES admitted into the great METROPOLITAN HORITALS—REVIEWS of all the new English Works, and every important Foreign production, published within the medical year—Reports of the Debates at the chief Medical Societies of London verbatim, Reports of Clinical LECTURES delivered at the various Hospitals by the medical officers - EDITORIAL CRI-TICISMS on the most prominent medical events of the period-Abstracts of the original papers worthy of analysis in contemporary Medical Journaus, British and Foreign-And at least Two Courses or Lectures on subjects of the deepest importance to practising physicians and surgeons, to be delivered by Professors who rank amongst the most celebrated physiologists and pathologists in Europe. The publication of one of the courses will be commenced in the ensuing month of November.

in the state of th METEOROLOGICAL REPORT.

(Extract from a Meleorological Journal kept at High Wycombe.

Lat. 51° 37' 44" North, Long. 34° 45" West.)

Days.	Thermometer.		Barometer.		Rain,	Wind.	: Weather,
	Highest.	Lowest.	Highest.	Lowes!.	Ins. Dels.		1
Oct. 19	50.	28.	29.84	29.52		E.	Very fine for the season.
· 20	46.	32.	.62	.51	0.08125	S.W.	Fine in morn : afterwards rain.
21	53.	28.	.51	.51	1	S.W.	Dull morning; afterwards fine.
22	39.50	36.	.26	.18	0.40625	N.W.	Heavy rain evening and night
23	52.	42.	.45	.33	0.41875	S.	Day fine, heavy rain in
24	51.75	37.	.43	.36	1.1375	S.	Fine throughout
25	50.	28.50	.18	28.90	-		Heavy raise
	<u> </u>			25.0		1	

Oct. 27, 1835.

THE LANCET.

Vol. I.]

LONDON, SATURDAY, NOVEMBER 14, 1835.

Г1835-36.

ST. THOMAS'S HOSPITAL.

CLINICAL LECTURE

ON THE

DELIRIUM TREMENS.

(Illustrated, in part, by a Case reported at page 161),

DELIVERAD BY

DR. ROOTS,

On Monday, November 2, 1835.

You may remember, gentlemen, that when I last had the pleasure of meeting you, I concluded with an avowal of my ignorance of the precise condition of the brain and nervous system in that particular disease which is called "delirium tremens."

With respect, then, to the termination of the disease. Sometimes, if the attack has been very slight, the disease will run on for three or four days, or more, the patient will fall into a profound sleep and awake comparatively well. This, however, is not a very frequent termination, when unaided by medical means. More commonly, and more especially if it be a second or a third attack. the symptoms will increase in intensity, and perhaps terminate in convolsions, of an or two more recurrences of these convulsive attacks. It may terminate in apoplexy, and occasionally it will terminate in mania. The latter, however, certainly is not a common termination, but still it is an occasional termination of delirium tremens.

Prognosis .- Then as regards your progis; if it be a first attack,—if the constitunot been materially enfeebled, generally be favourable. ore doubtful in proed comittion deful if it

increased if, in addition to the irritation, you find accompanying it inflammation.

Diagnosis .- Then as regards your diagnosis. This is certainly a subject of the greatest importance, because upon the correctness of your diagnosis, will depend the DIAGNOSIS, PROGNOSIS, AND TREATMENT probability of your patient's recovery. If you should by chance mistake true delirium tremens-and I am speaking now of the true form of the discase, - and treat it upon the principles of inflammation of the brain, the chance is that you will destroy your patient's life. Well, then, the history of the case, the history of the patient's previous babits, whether he had been addicted to the abuse of spirituous liquors, or of apium; or if to neither of these, whether, having been exposed to great bodily privations and mental anxiety, the disease had supervened upon them. Next you must bear in mind, in true delirium tremens; the absence of the flushed countenance, the absence of the suffused eye, the absence of excessive heat of head, the tremor (the general tremor of the body, to a greater or less extent), the tremulous condition of the tongue, and also its moist creamy coat,-these things being considered in connection with the state of the pulse, which is perhaps at first rather slow and soft, speedily getting quick, but still soft; and, in addition to all these, the peculiar illusion of the mind-the illusion in true delirium tremens being perfectly different from that which is observed in inflam-mation of the brain. The patient here, it epileptic character, occasionally, or perhaps is true, is suffering under an abberration of frequently, recurring, until the patient dies; mind, but it is that which is easily conor it may terminate in apoplexy, after one trolled. He gets out of bed, but is easily got back again; he is subdued with very little difficulty. This is not the case in delirium arising from inflammation. These are only intended as practical remarks for your observance, and as we have not time to go more deeply into the subject, I shall go at once to the treatment.

Treatment. - Now supposing you were called to a patient who was labouring under the carly stage of delirium tremens, where there was no question whatever as to the nature of the disease. Your first object in such a case would be to ascertain that the bowels were sufficiently open; and to ensure will be that you would give him, probably, a warm

stimulating purgative, with, most probably, the degree of irritability in each particular a small dose of calomel,—say three, four, or case, and also to the power of the inde idual, five grains, with two or three drachms of In slight cases, small and frequently rematter of course, as I have before observed, the secretions cannot be otherwise than deranged; in the existing state of the brain and nervous system, you could not expect that the accretions, under the strongly recommended the employment of mercary. Now I am of opinion, and that until sleep was procured. If you find, after from practical observation, that it is exceedingly proper to give occasional doses of that the excitement still goes on,-that there mercury, perhaps every other day, or, it is still a want of sleep, and the same degree may be, once in three days, for the purpose of irritability and illusion, and perhaps of producing the effect of what, in older without the pulse being augmented (withtimes, was called an "alterative;" I think it is right to give "alterative" doses of mercury, just sufficient, perhaps, to change, not think you would do any good, -on the diminished, then I should not hesitate to contrary I am quite satisfied that you would do harm, by giving mercury, in true delirium tremens, in such quantities as should produce the specific effects of that medicine on is, that mercury, generally speaking, sets up, along with its specific action, irritation in the system. You have already excessive irritability of the brain and nervous system, therefore I would not give mercury in sufficient quantities to produce its specific effects, because I think its administration would be likely to increase the very irritability which I wished to subdue.

What, then, after all, is the indication in delirium tremens? Why, it is to allay the peculiar irritability of the brain and nervous system; to induce sleep, and afterwards to restore the secretions to their healthy character. Allay the irritability of the brain and nervous system, procure good sound sleep, and increase the patient's strength by giving moderate tonics, aided, perhaps, by stimulants, and the secretions will, in all likelihood, return to their healthy condition, without the necessity of employing the specific influence of mercury.

What, then, are the means by which we sleep? You all know, gentlemen, that in find that your patient awakes amazingly irritation of the system generally, or in irri- lieved; in some instances perfectly, tation of any particular part, no means with the caution I has which we are acquainted are so powerful in haps, be best illust allaying that irritation as opium. Then opium becomes, I may say, our sheet-anchor during th in the treatment of delirium tremens, and to see. that must be given in doses proportioned to intelligent

were not readily acted upon, you would give him some of the neutral salts with phis, the acetate or guriate, will be sufficient; it. But I am quite sure you will find that say from ten to fifteen or twenty minims in very active purging will do no good. As a slight cases, repeated every three or every four hours, until sleep is procured. But if the irritability is great, you must then . hve recourse to larger doses; in which I should say that it would be useless to commence with a dose of less than forty or fifty or even circumstances, would be natural; and, sixty minims, and I should prefer the latter, on this account, some who have written if of the tineture of opium; or from three to on the disease, being aware of this de- five grains of pure opium, or from a quarter praved condition of the secretions, have to half a grain of the muriate or the acetate of morphia, to be repeated every four hours the patient has taken three or four doses, out there being the slightest proof of inflammatory action in the brain itself, or in the membranes of the brain), and that the in some degree, the secretions. But II do delirium seems to be increased instead of give an increased dose. For example, if I had been giving half a grain of the muriate or the acetate of morphia every four hours, and after the third dose found the irritability the constitution. Now my reason for this not allayed, having waited the proper time after the exhibition of the last dose, I should then give one dose of a grain. Observe that I say, after having waited the proper time. Now my reason for saying this, for advising you always rather to commence with a small dose at first, and to wait the effects of thatto feel your way, as it were, than to commence with the boldest dose at once, is this. that though in a great many instances you will find success attend the exhibition of the larger dose, yet it has occurred to me in two instances, and it has also been related to me by one of the best practical physicians of the present day in this town, as having occurred to him also in one or two instances, that by commencing with a dose, say of a grain of the muriate or the accrate of morphia, such an impression has been made on the brain and nervous system, that the patient has never been aroused from it; knowing, therefore, that such an effect may take place, it becomes our duty to exhibit opinm with caution. When sleep has been procured,would endeavour to allay this irritability of and when it is procured it very generally the brain and nervous system, and procure runs on for six, seven, or eight hours, - you

The caution I have ju you the folio he ind practitioners

a lady who had been ill for some time; and it was necessary, as a matter of course, though painful to her friends, to acquaint me with the cause which had brought her into the condition in which we saw her. She had unfortunately contracted a habit of drinking brandy. Now I found her suffering under true delirium tremens. There was the tremour, the quick pulse, and, being in an advanced stage, the tremour of the whole body, the tremour of the tongue, the profuse perspiration, the absence of pain and heat of the head, and there was the creamy moist tongue. The only symptom wanting to make up the disease appeared to me to be the illusion, which I could not detect; still I was satisfied that the disease was delirium tremens, and I was very nearly quitting the bed side, with the impression that it was a peculiar case of delirium tremens, unaccompanied by illusion; but just as I was about to go, I said-" and so you have not slept any night for some time past; you did not sleep at all last night I suppose?" She replied, " How could I sleep? We had workmen in the house." This was the fact, for there were workmen about the house; but she went on to say, that one of them had attempted to get into her room at night, a and that he was constantly at the door.
"He packed up all the plate," she said, " and took it away with him. He has since been apprehended, and my husband is now at Bow Street, attending his examination." Now this was all told so deliberately, and appeared to me to be so natural a chain of events, that I thought it must be true, and turning to a female relative or friend who was standing at the foot of the bed, I said-" Is that really so?" The answer showed that there was not a word of truth in the statement, except what related to the fact of the workmen being about the house. The existence of illusion was now manifest enough, and I directed half a grain of muriate of morphia to be given every four hours, and that if, after the third dose had been exhibited, the irritability of the system was not allayed, a dose of a grain should, after waiting the proper time, be given. Two doses were given, but still the irritability remained, and in about an hour afterwards a dose of a grain was given, the united effects of which three doses were such, that the medical man was obliged to be fetched, when he was under the necessity of pouring down brandy and ammonia, and using constant friction to seep the patient in a state of agitation for a

derable time, in order to counteract

of the narcotic, from

the patient did per-

d man had

ce is that

In addition to optum, cold applied to the head is another most useful remedy, either in the form of evaporating lotion, or applied in the shape of ice.

I have already stated to you my objections to mercury. I do not think that in this stage of the disease, or in this particular species of the disease, blisters are of much service, unless you imagine there is some slight degree of congestion, or of inflammatory action going on, which you are afraid to attack by depletory measures; then perhaps a blister may be used, but otherwise I should not have recourse to it.

Well, now, during this period, in conjunction with the opium, the powers may be so enfeebled and exhausted, that the exhibition of some stimulants may be proper. Now, of those, the Materia Medica presents a great variety; and you will find suggestions to give camphor, ether, ammonia, asafeetida, valerian, and a host of others; but I don't mind making the avowal to medical men, that in a case of this kind, as regards stimulants, and especially those which come under the denomination of " antispasmodics," I have but a very sorry opinion of them. I know what a moderate quantity of wine is capable of producing; I also know what may be gained by light nutritious diet, but I confess to you that I am not quite satisfied as to the quantum of stimulating effect that may be produced by five, six, or eight grains of carbonate of ammonia repeated every six, or every four, or every three hours. Or, if the quantum of stimulus be ascertained, still I am afraid you will give it at the risk of nauscating the patient's stomach, and preventing him or her from taking that which, in the way of nutriment, you ought at the same time to administer. However, there can be no objection, though I dare say there are many who think differently from me, for those who see their way more clearly with these remedies than I do, to giving moderate quantities of carbonate of ammonia, of camphor of other, or, if you think that it is a good stimulant, of asafeetida. I confess for myself, that I should be much more inclined, if I wanted a mere stimulant, to give some good porter, or some tolerably good ale, taking that stimulus more especially to which the patient had been previously in the habit of resorting, only giving it cautiously, and watching its effect.

The food ought, as a matter of course, as I said before, to be light and nutritions,—say milk, good strong beef tea, animal broths, and, in some instances, where the patient's stomach will bear it, I should have no objection to allow him a mutton chop, or a slice of meat, always being careful so to graduate the exhibition of stimulants, anot to produce over-excitement; if you do that, then you will get the second species of delirion tremens; you will then have

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inflammation of the orain in addition to irri-

Supposing, then, that the opium has procured sleep, after having been obliged to resort to a larger dose. I would still continue the exhibition of the opium in small quantities-that is, if I had been giving it in the form of the muriate or acetate of morphia in doses of half a grain every four hours, then having afterwards resorted to one grain, in consequence of the previous small dose not having been sufficient to procure sleep, that one grain having had the desired effect,-then, after the patient had awoke, I should continue the small dose for a certain time every four hours, the object being, as soon as the irritability of the patient was sufficiently diminished, to diminish, also, the frequency of the dose of opium. This, however, must depend upon practical observation. It is quite impossible to lay down any positive rule as to when the quantity or the frequency of opium ought to be diminished. That must depend upon the degree of irritability remaining.

Next, as regards restraint. Now, if that can by possibility be avoided, it ought not to be employed. As I before observed to you, the delirium is, generally, of that peculiarly passive character which does not require forcible restraint, and where it can be avoided it ought, because it only produces increased irritation. One or two people, generally, ought to sit at the hed-side. It is quite sufficient to persuade the patient, merely leading him back to bed, instead of confining him with a strait-jacket, as the patient was obliged to be confined who was labouring under the second species of delirium tremens, and whose case I brought

before you last week.

Supposing the irritability of the brain and nervous system to have been subdued by these means, it may then become necessary to resort to some mild tonic, and perhaps some of the vegetable bitters, some quinting perhaps may be best adapted for restoring general strength to the system. It becomes also a positive daty, an unpleasant one in many instances, more especially in private practice, to represent most strongly to the patient the risk he runs by again indulging in the vicious habits which brought on this disease, for in ninety-nine cases out of a hundred, it does arise from the abuse either of spirits or of opinm.

Second Species of Delirium Tremens.—
(Case of Grey.)—Well, then, with respect to
the treatment of the second species,—that
species under which Grey was labouring.
Now in such a case the treatment must, to
a certain extent, be of an opposite character,
and, to a certain extent, ultimately, of a
combined character. He had been twice
bled before he came in. He was bled, properly bled, by Mr. Stonz, when he came in.
of the deli-

saw him that he was suffering under deliriun tremens, yet I was equally satisfied that h was labouring under delirium tremens accompanied by inflammation of the brain or its membranes, or both; for I do no hesitate again to confess my inabilit positively to say when the brain alone is in flamed without there being any inflamma tion of the membranes of the brain o when the membranes of the brain are alon inflamed without there being any actual in flammation of a portion of the brain itsel: It looks very well on paper to make thos distinctions, but you will find it difficul enough to make them when you come tpractise. Satisfied, then, that this inflam ination existed, and that a sufficient o nearly a sufficient quantity of blood has been taken, and that it would not be pruden to risk general depletion further, I did no hesitate at that time (continuing cold to th head) to direct further local depletion b taking eight ounces of blood from the occi put, and at once giving him after that (i. conjunction with the mercury, - Mr. STON having ordered him three grains of calonic every six hours, and which I then directe every four hours) half a grain of the muriat of morphia, every four hours. You say the result of this. After the second dose of the muriate of morphia, his delirium di minished, and he obtained three hour and a half of sleep. When I saw him th next day, there appeared to be still sufficient proof of excitement about the brain or it membranes to warrant a further abstrac tion of blood, although I continued the mu riate of morphia, and eight onnees more therefore, were taken from the occious After this no further depletion, either gene ral or local, was necessary. He went on fo two or three days progressively amending and now I come to an error in my ow: practice. Finding so much amendment. was willing to diminish the frequency of th exhibition of the muriate of morphia, and a he answered perfectly rationally, as ther was no proof then of any inflammatory ac tion about his head, as the tremour wa lessened, and, in point of fact, as he wa in every respect better, I said, " Give th muriate of morphia every eight hours in stead of every four." Well, now, what wa the consequence? Why, that within four and-twenty hours after that, his deliriun increased; he became almost unmanage able. Mr. STONE was called to him, and very properly gave him a grain of the mu riate of morphia, which quieted him, he went to sleep. This incdicine was resurged in doses of half i hours, and continued of time wholly Now you I

much by had practice as by good. I can-didly admit, that I ought there to have con-binued the muriate of morphia a day or two tient has been suffering under such a disionger, as frequently as it was given before. ease as that upon which I am now making You will observe, too, that here was another my observations. or asalectida, but to a small quantity of rium tremens, namely, that which is accomporter, which he bore very well, that is, his panied by inflammatory action; and that brain and hervons system bore it well, but it as, very frequently, the stomach in delirium was not agreeable to his taste, therefore in tremens is so irritable as to make it an obtace ourse of a day or twoit was changed to ject with us to tranquillize that organ very a small quantity of wine; the wine also he speedily, I certainly cannot imagine anti-did not like, and that was changed, ultimony to be useful in the true delirium tremately, to a small quantity of brandy, a mens. I should hesitate very much before tablespoonful twice in the course of the I employed it in the second form of the four-and-twenty hours, properly diluted disease. with sago, arrow-root, or grael.

that in the treatment of the true disease, tain whether it has been employed in this 1 myself did not believe it to be neces- country; but it has been said to have been sary, or that it would be advantageous, used, and in doses which excite at least my sary, or that it would be advantageous, used, and in doses which excite at least my to give mercury so as to produce its spessive,—in doses of a drachm,—of sixty cific effects upon the system, and I gave minims every two, three, or four hours, fremy reason for so thinking; but still merquently repeated. I only mention that cury was given here. But then, here were such facts have been brought before the two diseases; there was inflammation of the public. They may be true, but I am quite brain supervening on delirium tremens, and satisfied that I never should have felt warthe mercury was given on the principle of ranted in employing such a remedy in most its being one of the best adjuncts which can of the cases of delirium tremens which it be cuployed in conjunction with depletion, general or local, in diminishing inflammatory action in any of the tissues of the body, excepting the mucous membrane of the with respect to delirium tremens, so as to bowels; that is, in my opinion; but here it discriminate the true delirium tremens; was given—and I think it is probable that and it has just occurred to me that I did I should have given it myself—twenty-four not allude to one circumstance which should hours before I saw the patient. I say I have been mentioned. If perchance you think I should have given it myself. Still mistake true delirium tremens, in a very you are to remember what it eventually did. shattered constitution, for inflammation of It set up excessive irritation in the nuccous the brain, and treat it as inflammation of membrane of the bowels, so that we had a the brain, I stated that you will most proharassing diarrhea, which we were obliged bably lose your patient. Now, I saw an to combat with astringents and doses of instance of that some fifteen or sixteen opium, even after the irritability of the brain years ago. The case was one of a butcher, and nervous system had so far subsided as who had drunk exceedingly hard, and there to render the further exhibition of morphia was a consultation of three medical men unnecessary. Nay more, the mercury went on to produce something beyond irritation; so I presume, from the nature of the dis-be supposed to have now, but still it ap-charges from the bowels. Certainly there peared to me to be decidedly a case of deli-

delirium

an effect of

modification of the treatment, because with It has been suggested by some practi-the exhibition of the optim, which is not pro-tioners that antimony might be of service per, if you have merely inflammation of the in delirium tremons, given in large doses. brai or inflammation of the membranes, it Upon that I have no right to offer any obwas necessary, and speedily too to give him servation, because I have never seen the some good beef tea, and in addition to the practice earried into effect; but I may take beef tea it was necessary to give him some the liberty of stating what my idea is on the stimulant. I confess that I did not here subject. I think that if useful at all, it can have recourse to musk, camphor, ammonia, only be useful in the second species of deli-or asafectida, but to a small quantity of rium tremens, namely, that which is accom-

It has also been stated that digitalis has With respect to the exhibition of mer-been given with advantage, I think by an cury, you remember that I stated to you, American physician; I am not quite cer-

upon his case. Of course I had not then the same degree of experience that I may of inflammatory action set up, rium tremns, and as such it was proposed to treat it. A difference of opinion, however, ong the track of the existed as to the remedies, and so satisfied heat there, was one individual in consultation as to his and, sub-view of the matter, that he said we should certainly destroy the patient if blood was This is not abstracted, either generally or locally.

- Alleria Co.

MA SHARLES BELL ON MESSAGE EDUCATION, AND

and twolve ounces of blood were directed to be taken from the occiput. Immediately upon removing the glasses the marriel into convulsions and died. Now I do not bridge that that result would have happened if this depletory measure had not been adopted. It might. It is impossible to say that it might not. He had not previously suffered convulsions; but I do think that the fatal termination would not have happened had the blood not been abstracted.

I am anxious, gentlemen, to recal your attention, to prevent misapprchension, to one part of the case of this man Grey. I mentioned to you that the medical gentleman who had seen him before he came into the hospital had very properly directed his feet to be put into warm water, and I added that they had indeed been put into warm water.-that they had been put into boiling water; and I am anxious just to recal the fact to your minds for the purpose of now saying that this immersion was not the act of the medical gentleman who saw him, but an error of the friends of the patient, or the people about him. The medical gentleman had no kind of intention of putting his feet into boiling water. It was the error of others, not of him.

I was about to call your attention to two cases of gastric affection that have occurred in the hospital,—one a well-marked case of ohronic gastricis, and treated as such; the other of gastric irritation—one, at least, which I myself believe was not at all of an inflammatory character, though it was thought right in, some measure, at first to treat it as though it were; but as it only wants five minutes of the hour, it would be absurd now to enter into a consideration of swo cases which are of considerable interest, and therefore they will occupy our time at our next meeting.

*** In the lecture by Dr. Roots, published on the Shi alt, the suggestion of the term "delirium cam tremore" was, through misapprehension, ascribed to Dr. Copland, in whose "Dictionary of Practical Medicine" the term is, we believe, applied to the disease commonly called "delirium tremens." The same, however, was first employed by Dr. Elliston in the following passage, which we extract from a lectare delivered by that gentleman in 1831:—"The disease to which I allude is called delirium trancus, which is rather as improper word, because the delirium cannot tremble. It would be better to say delirium cannot tremble. It would be better to say delirium cannot tremble. It would be better to say delirium cannot tremble.

MIDDLESEX HOSPITAL.

LINICAL LECTU

ON CASES OF

DISEASE OF THE SPINE,

SIR CHARLES BELL

On Tuesday, November 3rd, 1835.

I EXCERDINGLY regret, gentlemen, that you are occupied so constantly, - from morning to noon, and from " noon to dewy eve, -attending lecture after lecture on medical subjects. It is hardly possible, under these circumstances, to be a usefully diligent student, for you are apt, amidst the perplexities, to forget the great object for which you have come to London, which is to pursue the study of anatomy and surgery,two points that will ever be well taught in London alone. A gentleman once rose in the House of Commons, and declaimed with great emotion about the danger to which his Majesty's liege subjects were liable, of being poisoned in consequence of the ignorance of boys in apothecaries' shops; when another member rose and said, that they managed those things better in Germany And so a certain class of members of Parliament take up the matter, the Government being always glad to see the House of Com-mous occupied on a subject in which they incur no personal responsibility. The present principles of medical education have gone on developing themselves, until all the birds of the air have given to the Apothe caries of London, the power of deciding what lectures students shall attend, and the studies they shall pursue, and the result is that a system prevails under which no in dividual can do much; for it is requisite in order to accomplish the curriculum, tha the lectures which you attend should be se multiplied as to keep you on the move, with hardly an interval of time between them from one theatre or one lecturer to another until one is put in mind of Matthews's ac count of the sweepstakes, where the horse are all neck and neck together, and al come to the goal at once.

Well, now you must consider it my duty if I am so unfortunate as to be against Companies of Apothecaries, Colleges of Physicians, Councils of Surgeons, and Parliament to hoot, to remind you, that your in London is to study

learn thoroughly anatomy, with pathology

resent to address yo

liar advantage. I formerly gave my time book to read an account of the cases. tures, because when I looked around, I three or four different schools, with no ideas common to us all, with no principles such as I could conceive to be correct, and, therefore, with no combility on my part of being usefully employed in commenting on the progress of cases. Now, however, the case is different, of which I will give an example. Supposing that you were to go into Clayton's ward, where there is a man lying with a wandering mind and a bewildered stare, a very pale face, and a deepcoloured extravasation around the eyes, and grumous blood issuing from the ears. man has fallen on the top of his head, and were I to enter upon the case in the hearing of those who were uninitiated in the doctrines delivered here, I should be obliged to the principles of the entire machinery on which the skull is built. But now, in half a sentence, I can say,-There is an example of the case of which I speak. There is a man with a blow received upon the upper part of the parietal bone, the effect of which is visible on the temporal bone, and in the ear. Or here, again, is a man lying with a fissure in the base of the skull. Would it not be necessary, in lecturing upon such a case, that I should go into the whole anatomical relations of the fissure. I should merely need to say, that here is an illustration of such and such facts, or principles, as I had endeavoured on a former occasion to inculcate. The same thing would avail me in a case of fracture of the humerus near its head, for instance, of which we have an example. On such an occasion I need hardly speak of the necessity of particular appliances in the treatment, such as saying, that if the lower part of the bone be not properly disposed, such and such effects will be produced by the pectoralis major and other muscles. One word will now be sufficient for those who are properly initiated, as I shall take hem to be, in anatomical demonstration.

After this preface I shall beg your attention to some diseases of the spine, principally taking up that which is termed " lateral curvature." There is, amongst others in the hospital, a case of extreme curvature, with scrofulous caries of the bodies of the vertelese; there is also a case of inflammation and scrofulous disease going on in the upper vertebræ of the spine; there is a case of irritation and spasmodic affection Merno-cleido-mastoideus; there is a ment rigidity of the sternod a case of distortion star series of study by ration for

take advantage

unwillingly to the delivery of clinical lec- first is that of Elizabeth Millross, who was admitted so far back as April the 23rd, an found that the pupils before me belonged to indolent girl, who, like many other indolent girls, is the subject of curvature of the spine. The distortion became evident from the circumstance,-remarked by her parents,-of an awkwardness in her gait, and they now conceive that the right shoulder is "out," and so, indeed, when you take off her clothes, and expose the back, you find that the right shoulder is very prominent, that the scapula is elevated,—that there is great protuberance of the ribs and scapula. The "shoulder" in this case is not at all to blame, - but there is expansion of the ribs on the left side, in consequence of a curvature in the spine, below there is another curvature, forming the spine into the shape of an italic S, the cause of which is to be found in the following manner: - An describe the whole structure of the head, and indolent and weak girl, with a constitution disordered by the first attacks of uterine irritation, experiences a pain in the back, and suffers great weakness and languor. To relieve herself from the pain and debility, she "hangs," as they express it in the North, "upon the strong foot,"—that is, the right one, and eases the left one, the result of which is, the twisting of the spine to the right side, and the tendency to curve the whole body in a corresponding direction, but as this cannot take place, it begins to poise itself, producing a second curve in the spine, which second curve throws out the ribs. Here is an instance in a poor girl who died in this hospital from disease produced under these circumstances. The spine is seen to be first inclined to the left side, and then to the right, forming a curve the convexity of which is towards the right side, and the concavity towards the left. Thus the left ribs are drawn together, and, while the whole mass of the thorax is diminished, the right shoulder is thrown out. You thus perceive also how there comes to be an inequality in the shape and position of the pelvis,-the cause there is for the mother or the instructress to observe deformity in that part. All this is the mere result of a defective constitution,-of a constitution irritated by the first changes in the uterus, thus operating, chiefly, in consequence of habits of indolence, -from the want of that activity which I need hardly remark is essential to the strength and perfection of structure. You have an excellent opportunity of observing the truth of this in bones while they are recent. The spine consists not only of bone, but of cartilage and ligaments, with muscles going from point to point. Now the bones do not grow by themselves, nor do cartilage, ligaments, and muscles, but they all belong to one constitution, and fail or become perfect together. Therefore it is quite wrong to talk of an affection of the spine being peculiar to e dresser's the yertebral bones, or to the muscles, or

the ligaments. The whole substance of the [We know that the bones, the ligament, and spine in such cases is debilitated, that action which is the great stimulus to its perfection having been wanting during the period of its growth. Hence the basis of health in these parts is activity, and that activity should be directed so as to counteract any tendency to curve in the spine. It must, however, be recollected, that you cannut bend the spine as you would a twig. You must persevere gradually in your attempts to make it grow in a right direction.

The next case to which I shall call your attention is that of Ann Hutchins, atat. 20, who was admitted on the 9th of September, stating, that about a year and a half ago she was affected with pain and weakness in the loins, after which she lost the entire use of her lower extremities, and soon after was admitted into the Salisbury Infirmary, where tion of the spine, not exactly resembling the she continued for six weeks, during which period various remedies were administered for her relief, issues amongst other means being applied on each side of the affected of the vertebra. Pray let this specimen part of the back, but without producing my make a due impression on your minds. advantage. At present there is very little pain, and she is comparatively easy when in the recumbent posture, but when made to sit up, she complains of a sense of weight and weakness in the back. Her lower extremitics have lost all power of voluntary motion, but sensation is not entirely gone. At one time she had great difficulty in passing her urine, but now that symptom is much relieved. On examining the spine there is a projection backwards of some of the last dorsal vertebra. The catamenia appeared when she was first affected, and have not occurred since. Her general appearance (says the report; is that of a person in good health. When the extremities are moved, it is apparently without her knowledge. There is no relaxation in the abdoshe can tell when her feet are cold, or when cold is applied to the extremities.

Here you have the brief relation of a case of scrofulous caries of the vertebrae, with acute curve of the vertebral column. The first point to arrest your attention in this case is, the formidable contrast which is afforded in it at least to the constitutional weakness, or predisposition to the disease, which existed in the other patient. The disease here is not actually formed in what may be called a vital part. The bones of the vertebræ, especially, are of a spongy and light texture, and are proportionably liable to become the subjects of scrofulous inflammation. There is some little debate among pathologists whether the disease of the spine in these cases commences in the But what more do you ligaments, in the inter-vertebral substance, raise the surface -or in the bodies of the vertebra. On dis- from the surface section we find that all are affected, and it are already is a vain speculation to endeavour to determine which of the parts is primarily affected, whole of the

the cartilage, are the parts of the body most liable to scrofulous action, and in this part they are more intricately combined than elsewhere. It is stated in the history of the case that she had experienced a wrench in the back, or, at any rate, that she had been in the habit of raising heavy weights. Now it is very possible that this may have han the origin of the disease, though I do not quite agree with my friend the dresser, that the patient appears healthy. On the contrary. I should say that a distinctly scrofalous diathesis is marked in her appearance. However, this girl may, by raising weights, thus have given origin to the disease.

Here now is an illustration of the advantage of a (concentrated) school. I am able to produce you a specimen of lateral distorlast case, but presenting an acute projec-tion, directly backwards, formed by the wasting, ulceration, and absorption, of some When these facts are placed before you, I need hardly point out what is the great doctrine for practice which the opportunity of observing them points out. But to return to the case. I stated that there was pain in the loins, and this is a remarkable circumstance; yet it is one which I observe in all these cases, and the reason of it is apparent. The power of motion is entirely gone in the lower extremities, but sensation is only partially affected in them. Sometimes, however, it is entirely absent. On referring to the spinal marrow, you will find that the nerves of motion are so directed, in issuing out from the chord towards the bodies of the vertebra - that should inflammation take place in the bodies of the vertebrae, it must affect the motor nerves at an earlier minal muscles, no bagging of the belly, and period, and to a greater extent, than those o sensation. We observe the fact, and this is the explanation that I give of its occurrence The circumstance leads to another question There are persons in London who profess to cure diseases of the spine, and who ridicule the regular surgeon for not attempting and effecting the cure of scrofulous caries of the vertebræ. These spine doctors " care " the disease by raising the body and stretching the spine. Now does this suggestion offer or not a very important remedy to our no tice? Ought you to adopt the same plan in similar cases? It is true that you may lead the patient to believe that you can use fully extend the length of the patient some inches, and having done so, you m port the body at that length b

ammation

nents, and allow

separation of the vertebræ, and there is | that centre, it is your business to keep the actual caries destroying one after another patient in the horizontal posture, and to of the vertebre. Then of what use is extension of the body? I know that it is quite jection of the spine, that the latter can sink possible to stretch these persons, to raise into the former without injury. The pathem up; but what can you expect to follow that raising? There is a large gap, a vast hiatus, between the upper and the lower pales of the diseased hones, so that anchylosis cannot possibly take place between them, although it is to that very process is asserted by some persons does no good, that you must look for the union of the vertebrae, and the mending of the diseased spine. Unless then the parts be kept perfeetly at rest, and in apposition, how is it possible that we can expect a core, knowing for a certainty that a cure never did feets in the constitution of the patient, and take place in any of these cases, except endeavouring to rally its powers to get rid through the process of anchylosis? Besides the prevention of this cure, there is also the danger,-though this may be only a speculative suggestion, -of a falling down again after it is raised, and support is removed. I look with horror on the conscquences of such a fall after the bones have been thus upraised by mechanical means tending to separate them. The effect of a sudden fall would be not only a new curvature, but an injury of the spinal marrow itself. What then does this quachery mean? It must be productive of great harm if the disease have not proceeded to anchylosis, though it may do some good when anchylosis has taken place, by twisting and moulding the upper and lower parts of the body, so as to accommodate them to the fixed position of the anchylosed portion of the colump. That is all which there quacks can But suppose a person to labour under this disease, the inflammation to have subsided, the anchylosis to take place, the whole mass, by the solidification of anchylosis, to be strengthened, and the quack then to begin his forcible process of stretching, hoping to do no harm by it, but endeavouring only to cause the upper and lower parts to accommodate themselves to this permanent curvature; even then it should be remarked that he goes to work with the danger of breaking up the longceive that the preliminary cure requires a of disease in which I am sure I do not exaggerate, when I say that motion alone is seeping up the disease of the patient. It is he joints, it is so in ulcers, which nch trouble, and it is so in cessant soul motion of the pa

tient must be so guarded, that if she moves at all, there should be no motion in the inflamed parts.

The next point for consideration is the treatment by counter-irritation, which it though I am unwilling to admit the correctness of that denial. Counter-irritation by issues may be beneficial, but the greatest portion of benefit is to be derived by attending to the origin of the disease, the de-

of the cause.

Before I quit this subject, I must make one further remark, because I have seen it stated in a book, that there are no diseases which present a greater variety of forms than affections of the spine. This seems to me to be a very extraordinary statement; but I know how it happens; it results from persons mistaking a sympathetic affection for the real disease. When there is actual caries of the vertebra, and an actual falling forward of the spine, the symptoms may vary in consequence of the inflammation reaching to the spinal marrow itself, or it may be attended with more or less pain, and there may be more or less paralysis. But people class together fifty different affections under the head of caries or disease of the spine. I do not, after all, however, so much wonder at this, for I can assure you that there is nothing more difficult than the diagnosis where the spine is affected. There is a languid girl, for instance, who, when she walks, has great pain in the loins, and a suspicion arises that some disease exists in the spine. You strip her, examine her, and feel down each process of the vertebræ; you come to a particular spot where there is acute pain, and you say, " Do not deceive yourself; are you sure that there is pain at this part?" She will repeat that she nositively feels pain in that particular established connection of the hones, or tear-ing asunder that union which is not yet bone but only ligament. Thus you per-pal source of derangement, in by far the greater number of such cases, is uterine irstate of perfect rest. On looking round the ritation. If you place her on her back, and hospital, you will see hundreds of instances confine her to that posture for months, you ruin the constitution. You are just doing that which excludes all hope of amendment, for amendment depends on exercise and freedom of air,-on the restoration of contole, and it is so in stitutional strength, and the return of the So long as a person uterine functions. By following a course of there can be no practice not indicated by the disordered bout a correuterine action and the pain in the back, as and as there sympathetic of the original disease, you deritation kept vote the poor creature to a condition in diverging from which she lies without a chance of improvement. I have raised up at least twenty to disease. This case no doubt must appear young women out of this condition, when more formidable to you than the last. Inthey had been from eight to sixteen months fiammation in the spinal marrow is serious rest to be essential to the cure.

admitted on the 6th of October, on account i instantly follows as if an animal had been of a distortion of the upper vertebrae of the "pithed."

neck, which throws her head towards the left shoulder. There is a tumour, extending on perceiving such a mass of disease around from the occiput, of five fingers' hreadth, the upper part of this patient's spine. At down the spine. The third and fourth verithe same time, however, it is obvious that she had rheunatic fever, which continued swelling began. She has no weakness of the arms and fingers, and never had: there is occasionally a difficulty of swallowing, or, rather, she has had that difficulty, for it is now removed. She herself attributes the difficulty of swallowing to tension caused by the pressure of the tumour. There is an issue in the neck, and she has taken liquor potassæ, and aqua calcis. Her head is more upright now than when she came into the hospital.

The first reflection that I shall make on this case relates to the long-continued fever. On inquiring into these cases of affection of the spine, you find, for the most part, that it is such long-continued fevers and long confinement that produce this scrofnlous diathesis. A course of mercury will produce the same effect. In fact, whatever reduces the power of the constitution below par, will render the patient liable to scrofulous action, from a slight injury done to any of those parts, which, I repeat, are particularly liable

in the horizontal posture,—not labouring enough; but inflammation in the medulla under disease of the spine at all, but merely oblongata, or pressure upon it, must produce suffering from sympathetic pain there, arisinstant death. There have been in the hosing from other internal disorder. The ori-pital some melancholy cases of sudden death ginal cause is sometimes in the bowels; it resulting from fracture of the spine, and a may be in many other of the viscera; affections even of the lungs will produce it; affections of the heart will occasion pain in as you perceive them to be in this case, the spine. Pain in the mamme, or disorder for the ligaments must also partake of the in the colon, or disease of the uterus,—all disease, and therefore the bones are particularly liable to displacement. If a wrench of the production these are pregnant sources of error, pro-larly liable to displacement. If a wrench of the production the second of the production of the production of the line of the line of the liable to displacement. If a wrench of the production of the line of the ducing the very symptoms which may be the neck or a displacement of the vertebramistaken for carious disease of the bones of occurs, the medulla oblongata becomes the vertebræ. These are very different cases nipped, and instant death ensues. If presfrom those in which I have before described sure be made there,—that part of the nervous chord being the source of all the nerves of Another case in the hospital is that of respiration -not a word is afterwards spoken, Mary Blaymer, zetat. sixteen years, who was not a breath more is drawn, but death as

tebrse project, but they are only obscurely there is some interposition between life and felt to do so, in consequence of inflammation : the fatal event. It somewhat resembles the and hardness of the tissue surrounding the disease called "pole-evil" in the horse, vertebra, and occupying all the upper and There are ligaments connecting the horse's back part of the neck. She cannot turn her head to the thigh and hursa, and when he head without pain, and the chief motion is reined up suddenly he is very liable to takes place at about the fifth cervical ver- injure the union of the head with the spine; tebra; that is, when she attempts to move but, luckily, this occurs not in internal but the head, she turns it on probably the fifth in external parts, and gives rise to a swellvertebra of the neck, all the upper part of ing, abscess, and suppuration. This is a the spine being consolidated. An example scrofulous disease in the pole of the horse, of this disease is now on the table, and here and I apprehend that the same kind of is also another specimen, proving what an scrofulous disease may be set up in the huextraordinary defect may exist in the upper man neck, by a sudden wrench, followed, pervertebræ. In the summer, says the report, haps, by anthylosis of the vertebræ. The discase happens, in such case, externally to the for four months, and on getting better this theca, which, you will remember, is very thick. You remember the ligamentum infundibuliformis, the powerful ligament, which, like a funnel, runs down from the dura-mater and occiput to the spinal marrow. It is that which affords protection in this case, and allows the girl to move her head about with a degree of fearlessness which would otherwise make me shudder

to see her move at all. As to the cure of the case, it must be conducted by paying attention to the constant fixing of the part, preventing all lateral motion, and inculcating upon the patient the necessity of avoiding all acts of violence. I hope that if this advice be attended to, time will solder the parts together, producing chylosis, and that the girl will as regards her life; but by this, lose all motion the imperfect sales ed at the level par tehrm. I make the marks preparate

notice of a case which I believe will prove parts of the body; proving that the obstruc-a source of much interest to you,—that in tion, whatever it was, was partial, and acted which a woman has an affection of the sterno-cleido mastoideus, which is a very peculiar disease, of which I have seen a great deal; and this again will lead to the mention of another case, in which there is permanent rigidity of the sterno-cleido mastoideus. I shall speak of these patients on another day, and then advert to some interesting cases of disease of the face.

ST. GEORGE'S HOSPITAL

CLINICAL LECTURE

ON CASES OF

DISEASE OF THE HEART, DISEASE OF THE LIVER, CONTINUED FEVER, AND PALSY,

DELIVERED BY

DR. SEYMOUR,

On Saturday, October 31, 1835.

I HAVE very little to say to you, gentlemen, this afternoon. The fact is that the greater number of cases which remain for me to notice are getting well, and I have spoken of almost all of them to you in the progress of recovery; however, I shall allude to them in their present state, and then I shall speak of those cases of palsy which are in the house, the only cases of any great interest at present here, the others being in a progressive state of convalescence.

OSSIFICATION OF VALVES OF THE HEART (?) - There is a man of the name of who, according to my idea, -but any body may be wrong,-according to my idea, is labouring under a degree of ossification of the valves of the left side of the heart, without increased size of the heart, and mattended with dropsy, but it is sufficiently diseased to prevent the proper return of the blood from the lungs to the heart; hence there is extravasation of fluid into the chest, and a very irregular pulse, partly dependent on the state of the valvular apparatus, and partly on the necessary irregularities of the action of the heart in forcing on the aid. He has been treated for inflammatory ich I am satisfied never existed. He had all the sympchest,-difficulty of

more on the circulation of the blood through the lungs, than on its circulation in the other parts of the body. The blood was freely brought to the right side of the heart, but impeded in its progress to the 'left side of the heart. I put him on low diet, and gave the infusion of digitalis, with the oxymuriate of mercury, and the tincture of cantharides. He has made, ever since, a large quantity of water-two quarts, or more, in the course of the four-and-twenty hours. The consequence is that the startings in his sleep have been diminished-are gone, in fact; he sleeps quietly; the pulse is losing a great portion of its irregularity, is becoming full, is 84 in a minute, and the man expresses himself as being well. The prognosis in this case is dangerous. If the cause remain which produced the effusion into the chest, the patient will probably die suddenly.

ENLARGEMENT OF THE HEART, DILA-TATION OF ITS CAVITIES, ADDRESSON OF THE PERICARDIUM (?) FOLLOWING RHEE-MATISM, WITH RENAL DISPASE.-Going, then, from that ward into Cambridge ward, there is a man of the name of Foster, who labours under dropsy-enlargement of the heart, with apparent dilatation of its cavities, and adhesion of the pericardium. He had been subject to rhoumatic inflammation, which has produced the pathological condition of the heart-the uniform condition which accompanies this disease in general the pericardium adhering to the heart. Two years clapsed from the rheumatic attack, without his suffering any inconvenience. The heart then began to dilate, and at present it is quite clear that it is so much dilated, that the valvular apparatus of the heart on the left side does not meet and fully close the cavity; hence the blood is forced out somewhat irregularly, - in gushes, Shepherd, of whom I spoke to you last, and as it were, and in larger streams. The pulse is larger, in this particular case, on this side of the heart than it usually is, because the valves are not closed; at least that is my explanation of it; there may be a more scientific one, but that is my explanation, and I am only here to teach you my own views.

The remedies employed in this case had the effect of getting rid entirely of the water. He was treated with calonicl and opium in the first instance, with a view to diminish any inflammatory action that might be going on in the pericardium. He had some return of rheumatic inflammation, and he was bled. His mouth became a little sore, and I ordered him to take the nitre draught, two or three times a day, with ten drops of irregularity of lanness of the tincture of squills, and a grain of opium are not in the circumstantity, and he was then ordered to read in quantity, and he was then ordered to read in the squills, in ointment, which is the plan

has appeared to me, in more cases than one, lunar valves. to be effectual. On the 26th he voided five quarts of urine in two days. On the sore from the mercury, which had the effect 27th the anasarcous appearance had disappeared. To day there is doubt whether heart heats with less violence. To day I there is any fluid remaining at all. The ordered him a slight dinretic, combined with heart is permanently diseased, and, con- a little tonic medicine. sequently the prognosis is unfavourable. It does, however, occasionally, happen, that after having got rid of the fluid, and having all events these are chronic cases, and adthe urine coagulates very strongly-another unfavourable prognosis. He is not able to retain his water for any length of time.

some respects, of what we saw hefore,both, however, labouring under disease affecting the valves of the heart,-the one with an increased, and the other with a is small, the converse of that in which a large quantity of blood is sent out from the The same thing, as to the small stream of blood to the vessels, takes place, where any obstacle to the circulation arises, health is much improved. as in ancuryam of the great vessels; more particularly where it appears to be anenrysm at the bifurcation of the aurta. In all those cases the disturbance in the chest is very great. I have often quoted to you, you will recollect, the case of a little boy who died here of rheumatic pericarditis, with an enormously enlarged heart. He had been four or five years the subject of the disease. He had various paroxysms before his death, and you could hear his heart beat as you went up stairs; but the pulse in that boy was always remarkably small. His heart occupied more tinued fever, which is always than a third of the chest, and yet the pulse was so weak that it could not, or could a scarcely, he felt. When he died, that was easily explained. The aorta had not grown from his infancy, and the heart had enlarged ten times beyond its natural size. The same of the face was very hot,

I am now adopting in some cases, and which effect occurs here from disease of the remi-

However, this man's mouth became very

DISEASE OF THE LIVER (WITH ABSCESS?) -There is the case of a person of the name reduced, in some degree, the inflammatory of Mills, in York Ward, which has excited action, the patient does well, and goes on considerable interest. He had laboured without feeling much inconvenience. At under inflammation of the liver, and was attacked with pain just where the lungs mitting of great relief. This patient like- and diaphragm meet; he had a short dry wise labours under disease of the kidneys; congh, with occasional shiverings and sweats; and I was induced to look upon it as inflammation of the liver, with suppuration. Since coming into the house he has lost the pain in his side entirely; he gets better sleep, and, by giving him small doses of HYPERTROPHY OF THE HEART ?) - Apa- magnesia, and sulphate of magnesia, his tient of the name of Ingram also labours stomach and bowels have been restored under disease of the heart, but in a different to a healthy state, and his tongue looks way. He does not appear to have suffered a great deal better, but he still labours from rheumatism, and his case is called, acquired a severe cough. To-day he has spit cording to the language of the day-1 will up a little puriform matter. Of course if not say the jargon of the day, from fear of there has been inflammation of the lower giving offence to any body,—but according portion of the lung, in consequence of to the language of the day, "hypertrophy of inflammation in the neighbourhood, there the heart." The heart appears to be enlung larged, and the walls are greater in proportions the substance of the lung, which would not tion than its cavities; and it is in this way get well without his spitting up a considerthat secretion is produced and dropsy takes able quantity of mucus; but I still look place. This patient's case is the reverse, in upon the disease of the lung as altogether secondary; however, as the pulse was quick and rather sharp, I have ordered some blood to be taken, that we may see how far inflammatory action is or is not going on in diminished flow of blood through them; this part, and, if necessary, to continue the and, consequently, in the one the pulse bleeding, watching him. If there be disease of the liver with abscess, as I have supposed, it is of the posterior part of the liver, where you cannot get at it by pumture: but, on the whole, the man's general

> COMMON CONTINUED FEVER, WITH UL-CERATION OF THE SMALL INTESTINES .-Among the female patients there is scarcely any that I shall have occasion to speak of. There is a little girl on the left-hand side in Queen's Ward, whose case is of great interest, because it affords an instance of disease which at present exists to some extent,which, indeed, is almost always falling umler the care of the practitioner, and which has proceeded very well under the ordinary treatment. It is a case of commen this country, and which

Always

The abdomen was other was very cold. tender to the touch. The stools were very much like water in which cabbage had been boiled, leaving a deposit at the bottom of the vessel of a glistening appearance, something like metallic antimony. This was attended with very great inflammation of the bowels. The practice was to give her five grains of Dover's powder, and five grains of ydrarg, cum creta, three times a day, and enough of beef tea to support her strength. Dr. Horg saw her and recommended a blister to the abdomen, which is very good treatment, and castor oil every other marning. Under this very simple treatment, the efficacy of which I can speak to in dozens of cases, the patient is entirely convalescent. But there is always fear of relapse in these cases.

Let us see what is the pathological state of the case. The glandular structure of the intestines, which is always pouring out fluid, partly to shield the bowels from obnoxious matter, and partly consisting of matter which is to be thrown out in the stools, is very extensively diseased. Of course, where it is very largely diseased, there is a constant thin and sanious discharge from the ulcerations. I am talking no romance to you. I have seen those cases of alceration of the bowels over and over

again.

Well, what is the method of care? Of course you can do nothing in a hurry. You must induce a healthy action of the excoriated surface, and that is done by exhibiting alterative medicine, of a soothing and oily property, which helps to move the bowels at the same time. This is the modus operandi of the medicine, and the philosophy of the treatment. We owe a great deal of our knowledge upon this subject to the pertinacity of the French. They certainly overdid the subject, but we improved upon their treatment, and there is much credit due to them.

As the disease advances, however, this may happen. The alcerations may be more extensive in one part than in another. They may now and then become very deep, and I have seen suddenly ulcerate through. more cases than one of that sort. There was a patient up-stairs, in whom symptoms of this sort came on. Violent sickness occurred on the preceding day; one of those ulcerations penetrated through the peritoncal coat, inflammation of the peritoneum came on, and the patient died, rapidly, from extensive inflammation. You have always to fear some accident of this sort. It is very it may not happen in one case in it may happen. Another The patient may be

give castor oil, moderated, as to the dose, according to the necessity of the case. You may give from a tablespoonful to half an onnce, or six drachms. Remember that in women, when they are the subjects of such disease, they are very greatly distressed, because the frame and nervous state of women are more easily excited than those of the other sex, and you must with them, probably, resort to musk and camphor. Some will perhaps say that this is an inflammatory disease, and that you are ordering sti-mulants. Well, but you are to keep in mind what you are to do. It may be true that you are for the time supporting a very serious injury to a part at a distance, but then you are not relaxing your efforts to core the disease. I have dilated upon this more than perhaps I otherwise should have done, because at this time there are a great number of such cases, and I am quite sure, from my experience, that if they are treated as the case you have seen has been treated, nine out of ten will do perfectly well, even if you never see them again, should the same treatment be continued long enough. Still, you have always to fear a relapse,sometimes a sudden fatal termination. I remember having seen two cases in which perforation of the bowels took place from illeration, just at the time the patient seemed to be getting better. I have seen those alcerations of an extent varying from the size of a pin's head to a size only a little less than that of the palm of my hand, with large raised edges and slonghs. Such cases, however, in later years, have been more rare; but in one year, when an epidemic prevailed, there must have been as many as twenty-three cases in this hospital, all of which were declared to be labouring under this disease. Latterly we have been very free from it. I had some drawings, gentlemen, to show you, but the darkness of the evening will not a luit of it; I shall, however, take care that at our next meeting we shall have lights, when you will be able to examine

state of healing, but the process of cure had

not been carried far enough, when some-

thing obnoxious was taken into the stomach

and bowels, and then the vital parts became more affected than they were in the first

instance. There is more heat of skin, more

sinking, and the patient is worse than ever-

What you have to do in that case is, to endea-

your, as far as you can, to cure the disease,

and to support the strength at the same

time. Here wine may be given, and even uonrishing food, with great advantage. Sometimes if the bowels are exceedingly

irritable, it is necessary for a time to give

injections of starch and opium.

There are several cases of the progressive ease," as it is called, now in the house.

bout may be taking What is them. There is that unhappy man Noland, who has would least suspect it. They may arise universal palsy. There is a man in the bed from slow disease of the brain, of the naopposite to him, the "sneezing man," as he is called, who labours under a very peculiar state of the nervous system. There is another man, in the same ward, of the name of Williamson, who does not appear to me to be quite right in his mind, with paraplegia. I think these are the only three cases of importance. I am very fortunate in this respect at present, because in general I have a great number of those brokendown cases.

Now, then, there are two conditions in functional and its structural conditions. You are to remember, as a general rule, that the functions of the brain may be disturbed to any extent, without any percepti-ble organic disease. But when there is permanent loss of sensation and motion in any of the limbs, and more especially if it be confined to a single limb, and is not the effect of rheumatic inflammation, it is a proof that there is organic affection of the brain; and dissection shows us, invariably, then recovers sensation or motion in any of his limbs, there is generally organic disease of the ban. When the patient has lost in labouring under universal pa the use of his limbs, and that loss is at- arms and both legs were tended with trembling - when he sees was nothing alive but double, or when he sees only half an ob- bowels. At that ject,—there is great reason to suspect dis- and the function ease of the brain, and such cases are very brain were disputed took dangerous; they are dangerous when you from him, as it ther case; pu

ture of scrofulous tubercles, or even what has been termed "softening" of the substance of the brain, which, as far as I know, in the adult, is a disease of the extreme arteries. All these are cases of organic disease of the brain.

When a patient has had what is called an "apoplectic fit," and he recovers with loss of sensation or motion o one limb, you are pretty sure that there has been on the opposite side of the brain an extravasation of blood. Though the extravasation has not which you are to look upon the brain,-its been sufficient to destroy life, it has remained there; the red colouring matter which it contains has been absorbed, the mass of matter has been, as it w re, drilled through with small holes, and remains there doing no harm. That I think is the most common cause of palsy; and the case is called " recovery from apoplexy," though the limb still remains impaired. Sometimes we have extraordinary instances of this, We had a very extraordinary case of it in the hospital the other day. A man tumbles organic disease of the brain. If a patient out of a gig and gets a violent blow on the is paralytic,—not a young woman, who head, or a severe fall,—or, like a friend of does not know what the devil she would ours in the hospital the other day, he gets a be at,-her case may be hysteria; but devilish good licking, and becomes paraif the patient have paralysis, where there lyzed. There was a man twenty-five years has been a fit, that case is one of organic of age, a prize-fighter, who got what is disease of the brain. Ordinarily speak-called "a belly-full," or, as I should rather ing, if there be paralysis of a limb and say, a "head-full," for he came into this loss of sensation, and it has come on very hopital perfectly paralyzed in all his limbs, gradually, there is disease of the brain. In He did not see double, nor did by see half the great majority of instances, disease of an object; his mind was perfectly undis-the brain is first shown by some loss of turbed, nor was any portion of the body power, or diminution of scusation, in some more affected than the other. I looked one or other of the limbs. If a lower upon this as a case of congestion of the limb is affected alone, it is called "para- brain, or such an injury as to cause a larger plegia;" and I believe that the term em- portion of fluid than natural to enter the ployed is the same where there is an affec- brain, -not enough to destroy life, but suffition of a leg and an arm, as in the case of cient to interfere with the proper functions our "sneezing" man. If it be on one side of that organ. When he came under my only, it is called "homiplegia." These are care, I cupped him every six weeks from the common expressions that are used in men-back of the neck, took a small quantity of tioning cases of paralysis. Now it is a most blood from him, gave him calomel, applied uncommon circumstance to meet with these in blister to the spine, and dressed it with diseases, without there being organic dis- mercurial ointment, and in the space of ease within the brain. In very old people, little more than two months he was able to simple pressure of blood upon the brain walk about. He then began to move his will produce palsy. In those cases, and arms, and after a progressive state of imwhere the palsy has come on without a fit, provement he went out by his own desire, it is very easily cured, which is a matter of 1 have no doubt that that treatment, if it great importance; but where there has been had been kept up, would have entirely a fit, and the patient has been deprived of cured him; but I have no idea that his was sensation and motion for a long time, and a case of organic disease of the brain-it was a mere case of extravasation of blood.

Well, then, as to Holland who came

and put a succession of blisters on the spine, themselves. I remember having been callparts on which they are depending, or which depend upon them; but be that as it may, of his legs also.

they are diseases of the brain itself, be- creeping on. cause, if they had been, I do not think I

could have cured them.

house-a young physician -and his case will suspected that organic disease was going on illustrate to you how these affections go on - in the brain at the time, and I told his fawho had headaches; his stamach was out, mily so. He got a great deal better. He of order, and he thought it was devilish odd consulted me again three years afterwards that every now and then he saw double, for diarrhea, just at a time when he was He went to Mr. ALEXANDER, whom he con- going to get married. I suppose he thought salted, and Mr. ALEXANDER said it arose diarrhor an inconvenient thing on such an from the state of his stomach. He next occasion, for that was what he complained went to Dr. Maron, and I think the Doc- of, and of that I cured him. Two years affor had some sort of suspicion that it had terwards I was sent for again, when I found something to do with some previous vene- him perfectly sensible, but looking very ill. real attack. Then he went to another gentleman who recommended him to take steel, pains in the region of the liver. He had Then he was ordered to ride on horseback, taken mercury and employed leeches. I Then some other gentleman called his affect; saw him first with Dr. Nevinson, and next tion "hysterical." I don't know law ve- with Dr. Chambers, but he was no better, nereal and hysterical affections agree toge- notwithstanding all that had been tried. His ther, but, however, we were all at a botanical father then said to me, "Do year remember lecture here one night, when the late Mr.; the opinion you gave five or six years ago, Bunserr was with us; and weall went into the next room, and were very merry,—the cumstance recurred at once to my recollection physician as merry as any of us,—but too, and I said that I did remember it. In he was found dead in his hed next morning, about three months after that time my pafrom effusion in the brain. I believe there tient had paraplegia; he lost the use of his was no organic disease of the brain in his limbs and died, and no less than five scrocase, but only a disposition in the vessels to pour out blood. Why it is so I do not This was a very remarkable circumstance, know, but palsy occurs from simple effusion and the case altogether shows how long of fluid into the brain, which fluid may such affections may go on, who may itself be got rid of, and the tendency to fatally or producing very characteristic which effusion may be got rid of also.

and put a succession of busters on the spine, themselves. I remember having occur cambilds of dressed with mercurial ointment, edup two or three years ago to see a genHe became a little better, and I then left them who had consulted Sir Benjamin boff this treatment, which was pretty severe. Broote, and who had some pain in his lie was, however, still a good deal affected, head, and who told me that he sometimes and upon a consultation with Dr. Cham- forgot himself. I was very much fatigued BERS, it was agreed that I should give him at the time of my visit, but this circumthe tincture of cantharides, and he has, con- stance of his forgetting himself weighed sequently, been taking thirty drops three much upon my mind. He said he was go-timed a day for two months. It has pro-duced no strangury, and he makes more mended to travel. I called next day, and water now than it would appear he has said to his wife, " I should not advise your ever done before. Whether that may have husband to travel. It strikes me, that this stimulated the sacral nerves I don't know, loss of thought, which he has mentioned to but I dare say it did, because by stimu- me, is more dangerous than you seem to lating organs you sometimes stimulate the think it. Take him out of London to a place where he can have just enough of company to amuse his mind, and keep him he has recovered the use of his arms, as you as quiet as possible." She did so, and I saw may see, and he is fast recovering the use him no more for above two years. I was afterwards called in to see him again, in Now I look upon the two cases I have consultation with Sir HENRY HALFORD, last mentioned, not as cases of organic dis- and he was then raving. He is now in a ease of the brain, but as cases of effusion of state of confinement. Now this is a case in fluid into that organ. I cannot believe that 'which you see disease of the brain gradually

Some years ago a gentleman consulted

me about some obscure pains in the head, There was a young gentleman about this attended by some absence of thought. I symptoms. There was no affection of the s disease of the brain advances mind in this case. The mind was clear and cometimes there is no palsy unaffected up to the last day of his life. cases little short beaten to a jelly by his antagonist, was clear and unaffected throughout. In the case of the young physician of this hospital, the unit was as collected as no solid. last moment. Renect, then, on the one hand, how often it happens that the mind is disturbed without organic disease of the brain, and how often it happens that organic disease goes on without what you would take to be corresponding derangement of the functions of the mind.

With regard to the treatment in these cases, that must vary very much. As to the treatment of the patients who are now up-stairs, it has been very similar in all of them. There are various remedies for palsy, after the cause of the disease is at an end. In the first train of cases in which there have been fits, and the patient remains paralytic, local stimuli, and setons on the neck, a succession of blisters, and stimulating the parts with elec-tricity and strychnia, are recommended, course of lectures by any one in the metro Such cases I find to be best treated by blis- polis; consequently the attempt which I an tering the spine, and dressing the blistered this evening about to make, presents more surface with mercurial ointment. By that than the ordinary difficulties of a first lectreatment I have seen a great many obstiture, and must plead for the exercise of more nate cases really recover; but it is one that than an ordinary degree of indulgence. Init is difficult to pursue in private practice, stead of entering directly on the matter of because it is so very painful. I think also the course, as should be done, were the that cantharides is useful, and it strikes me general nature of the subjects to be dis-that electricity might have often a good cussed thoroughly comprehended, I shall effect. With strychnia I can do no good. I after examining the history of Hygeine, enhave tried it in fifteen or sixteen cases, but deavour to lay before you an outline of the I do not think I have ever derived the least whole course, and direct your attention to advantage from its use. The most effectual some illustrations which may enable you to remedy is the blistering, and the next is appreciate, at their just value, a few of the electricity. Another plan, particularly with points of view from which we are about to aged persons, is that of taking away a small examine Human Life. quantity of blood by cupping, six or eight | ounces every fortnight or mouth, and keep- taken from the Greek vyisia or vysia, health, ing the bowels open.

There is one thing to be observed with re- be gone, and man may remain, spect to the use of setons in hospital practice, and that is, that they are rpt to be attended with crysipelas, and therefore I never order them. I am sorry to have brought you ont such a night as this; but next time we may have a finer evening, and then we shall have lights, and perhaps more curious shall have lights, and perhaps more curious except the direction of the direct spect to the use of setons in hospital prac- "Sansteeth, sans eyes, sans taste, sans everything,"

LECTURE

INTRODUCTORY TO A COURSE ON HYGEINE,

OR THE PRESERVATION OF

THE PUBLIC HEALTH,

WILLIAM FARR, Esq., SURGEON, LONDON.

Delivered October 28th, 1835.

GENTLEMEN,-The subject of Hygeine, ...

"Hygeine" is a naturalized French word, In its present form it is not, as Dr. Formes Now, gentlemen, this brings me for the present to the conclusion of what I have to graphy," very agreeable to the English car; say to you of paraplegic cases, and the treatment of disease of the brain. There is really logy, but from the dread of attempting two little to be done in them. However, I shall innovations. It is considered equivalent to be able hereafter to illustrate my views far- the art of preserving health; and while the ther, by a reference to other cases in the exercise of Therapeuties restores the sick to hospital as they occur. Our old gentleman health, Hugeine is said to teach how life is I do not expect will get much better; but preserved Life is valuable, -- "All that a man Noland, I think, will, as well as the man hath will be give for his life," - and health from whose head I have endeavoured to is a blessing which sweetens every other produce a discharge. He is now getting joy, or hears men up even against misery; better, and that discharge is in effect the so when private individuals only are consame as if a seton had been applied. You sidered, health and the extension of existence are thus keeping up a constant discharge by the use of mercury, effecting a considerable to be attained at the expense of almost any drain from the vessels that supply the head, sacrifice. Every member of the body may and, probably, coming nearer to the sent of the lust, all its form and loveliness may have injury than you could approach with a seton. perished around it, the intellect itself may

heart, to sure which -to

vivendi,-hygeine itself offers no incentive.

Although the preservation of health and the prolongation of life are the great objects constantly to be kept in view in private hygeine, they are subordinate in public hygeine, where nations are considered to the higher end of developing the human faculties, and raising them to their greatest possible degree of organic perfection. Regarding mankind with a general eye, would an intelligent being desire to see a feeble, imbecile, effete population, vegetating through an antediluvian age of some eight hundred winters; or would be attempt to call forth all the energies of humanity, to flourish for a few years or generations, and then to ebb with terrible revulsion? Would be not rather seek to temper the intensity of life, so that, when multiplied by time, the greatest possible sum of vitality might be produced

"Hael," the Saxon root of "Health," implies strength-hence we have "a hale man: "-and "Healer" was a bestower of Health. "Physician" and "Saviour" were translated by the Saxons "Healer." In In speaking of the preservation of health, I wish its enactments. Moses was learned in all health to be understood as implying not only the wisdom of the Egyptians, and adopted that smooth course and conlibrium of the functions which is now commonly indicated by the word, or the state to which patients are restored after sickness, -but the strength bondage to a land overflowing with natuand continued energy of the mental as well as the muscular system. " Cultivation ' would be a more appropriate term than "preservation;" as the latter implies only continuance, while "bygcine" curploys all! external influences, and all our knowledge of the organs, the functions, and the habitudes of the human economy, not merely for its preservation, but for its improvement.

The true object of hygeine, then, is to increase the sum of ritality by extending individual life to its full term (averting death) ; by ohviating sickness; and by increasing the energy of all the vital forces, whether nutritive, formative, locomotive, or sensitive and intellectual.

A history of life, of the natural and supernatural means which nations and legislators have employed for its preservation, the plans proposed by enthusiasts, and the valuable precepts which medical men and philosophers have successively deduced from the observation and experience of mankind, would afford us abundant instruc-

in these lect

solemn duties, friends, country, or truth, for pagainst some false doctrines, which float like life, and so, propter vitam perdere causas warning wrecks on the surface of its past history.

Egypt was considered by the ancients to be the sent and source of medicine. The observance of great bodily cleanliness, strict regimen, mild dict, from which the use of several animals was proscribed; vomiting, purging, and fasting, for three days successively every month; and a simple, invigorating education, inuring the youth to hardships,-these were some of the doctrines of the Egyptians, and formed part of their laws. Physicians were included in the learned class, constituting one all-powerful priesthood, to whom a third of the land was allotted. They practised their art for the advantage of poor and rich indiscriminately, their endowed riches raising them above the necessity of requiring fees. In the time of Herodotus, it is said, the plague was entirely unknown among the Egyptians, many of whom attained a great age.

The four last books of the Pentateuch unfold a great system of hygeine, not constituting a mere philosophic unapplied theory, but enforced by legal sanctions, and carried out in practice to the very letter of several of their practices; but together with the great idea of emancipating his countrymen, and carrying them from a land of ral riches; came many profound principles of truth, resulting from the study of the moral and physiological condition of mankind, and a thorough knowledge of the external circumstances - of the country the wilderness, - through which people were to be led. On account of the relation of miracles mingled with the narrative of Mosks, some persons object to references being made to the Pentateuch; or to considering it as historical authority for scientific truths; but internal and circumstantial evidence proclaims its authenticity too strongly to justify the rejection of the facts which it contains, whatever differences of opinion may attend their interpre-VOLTAIRE SAYS that every thing tation. about Moses is supernatural: "Chaque people a ses prodiges, mais tout est prodige chez le people juif." After examining the records collected in the Pentateuch, the manners and the style of the Arabs, and all the other attendant circumstances, I think you will come, if not with WARBURTON, at tion; as it would show the human mind least with MULLER and ROETTECK, to a issue with a problem of the greatest different conclusion. I shall here assume mortance, and the highest spe- that the facts are historical, and proceed to My first step, however, develop a faint outline of the Mosaic system of Hygeine; important, because it is the literators of hygeine; first recorded with detail, and because of the mighty principles it involves. The great theological system revealed by Moses, I am and to guard neither qualified nor called upon to discuss;

in hygeine we have only to do with the ter sying creeping things were, probably physical facts.

Moses, after carefully distinguishing the contagious diseases of the Israelites, commanded that the infected should be isolated .-In Leurosy-a cutaneous affection allied in character to Tubercular Elephantiasis-the suspected man was brought to the priest, who pronounced him "unclean;" or, if there were any doubts, shut him up for seven days, until the symptoms of the case became well marked. The "unclean" were put without the camp, and only visited by the priest : their clothing was burnt. When the people possessed settled habitations in Canaan, unhealthy houses were directed to be examined, and "scraped within and round about," the dirt thus taken off being carried out of the city to an "unclean" place. The worst buildings were to be entirely broken down and removed.

In the disease of Gonorrheea, the identity and antiquity of which, will, I think, appear indisputable to those who read the 15th chapter of Leviticus, every thing and every person touched by the patients, was declared "unclean"-to be set apart and purified by washing. Seven days of purification were prescribed for the cleansing of the impure person; who afterwards offered before the congregation "two turtle-doves or two young pigeons." The minute regulations on this head deserve your attention; so do those relative to the menstruction of females, to their purification, and to cohabitation, particularly in the East, and among the Arabs. Circumcision, still practised among the same races, and, in some tribes, upon females, was intended to promote cleanliness; perhaps to prevent some diseases of the prepuce; or to obviate phymosis and paraphymosis. It was peformed on the eighth day after birth; and often must have destroyed the most weakly children, who would bleed to death, or die convulsed: at least such a result has sometimes been observed among the German and Polish Jews. "A bloody husband," said ZIPPORAH to Mosks, "art thou, because of the circumcision."

Animals were allowed for food, but a great they were remuncrated received offerings on the property asys the Jewish law, "parteth the hoof, is cloven-footed, and cheweth the cud, condition of their hy ye may eat:" swinc were excluded because they did not ruminate; coneys and hares because their hoof was not divided. The prohibition of hares would recalt on mind the modern Game Laws, were it not in conformity with a principle; and did we not know that Mossus always carried out his principles to their most rigorous consequences. Birds of prey, "whatever in the waters hath neither scales nor fins, what-soever goeth upon its paws," and all flying creeping things, except locusts, grasshoppers, and boetles, were forbidden. The late the statement of the creek of the single meal which are less defined which are less defined which are less defined which are less defined which are creeked to be a consequence of the single meal which are less defined which are l

not unacceptable in the wilderness? The ox, the sheep, the goat, the deer, and the chamois, were orthodox food; in fact, the classification excluded few animals which we now eat, except swine, hares, and rabbits. Everything that "dieth of itself" was pronounced inedible; and the blood of all animals was to be poured out .- "Ye shall catable blood of no manner of flesh; for the life of all flesh is the blood thereof." Lev. xvii, 14. Blood is rarely taken by Europeans, although it is drunk by some carnivorous animals and savages. It is not very palatable, but I am not aware that blood is indigestible. Some think that this enactment was intended to prevent cruelty; in support of which, Bruce relates, that somewhere in Abyssinia, the fierce nomads drive their cattle and cut steaks from them as they are needed; but this very much resembles MIZELD's story of the goose.*

The enactments relating to marriage, which are now adopted in Europe, were founded on the physiological law, that a degenerate offspring results from the intercourse of animals which are nearly related; and that a proper mixture of alien blood, can alone give birth to an untainted and vigorous race. Consins and near relations, by being brought into contact when young, and when the affections are opening, too often lay the foundation of matrimonial alliances which infringe upon the general laws of Hygeine. What would have been the result of allowing the commbial union of nearer relatives? denouncements of adultery, which was punished by death, and the strict investigation of virginity, discouranted promisenous intercourse, - destructive of the honds of families, calculated to yield a degenerate spurious issue, and likely to involve nations in exhausting pernicious diseases. Such a restraint was necessary, and justified by the truths of physiology, as, in the language of BEAUMARCHAIS, man is the only animal " qui boit quand il n'a pas soif; et qui fait l'amour en tout temps.

The Levites (the priests or learned easte) were the medical advisers of the people; they were remunerated from the tithe, and received offerings on recovery. Jenovan himself was his people's physician; and on condition of their hygeinic and religious obedience, declares, "I will take sickness away from the midst of thee; the number of

^{*}Animal food is so abundant in some parts of South America, in Chili, for instance, that it is not uncommon in that country to kill a large legal which a few travellers can make the sake of the single meal of a few possets which a few travellers can make of its carcase, the remainder belt to appear the hunger and a male which are less that when feet has been for heat of a climate within a feet the statement of a few may have a feet the statement of a few may have a feet the statement of a few may have a feet the statement of a few may have a feet the statement of a few may have a feet the statement of the statement of the feet the statement of the feet the statement of the state

thy days I will fulfil "-the great aims of waste occasioned by death or war, on num-

of the population at his disposal.

avowed purpose was to put the Israelites Turning now from Egypt and the southern in possession of Palestine, already fenced shores of the Mediterranean, let us direct supplies of food, and converting a race to a high degree all the physical and psychio were rendered dastardly and feeble by chical powers of our nature.

The constitution of Sparts, founded on an externinating people, to extend its num bers from Lebanon to the Enphrates. Led mined purpose, the development and equal to action in the first year, the unwarlike distribution of physical strength and vitality combatants, affrighted by the Egyptians, and among all the citizens, presents another recasily turned aside by other small tribes, markable example of the influence of hygeinic were driven back by the America, like agents on races of men. Some degree of swarms of bees. Moszs, from the moment of that defeat, devoted the entire generation Lacedemonia and that of its lawgiver Lyto death in the "terrible wilderness," where cureus. We do not know in what precise pestilence, thirst, and hunger, in the course hygeinic condition he found and left that of forty years, destroyed all that bore arms people; but it is almost certain, that after (above twenty years of age), and only allowed the stronger children to grow up for of Minos, comparing the effects of Cretan the purposes of war, disciplined by the Mosting that I with I ontan luxury, and making

bering the Israelites a second time, at the Mosks, assisted by the princes of each expiration of thirty-eight years, the great tribe and the High Priest, made two enu- legislator records with dignified satisfaction. merations of the people, distinguishing that the males of twenty years old and "their families by the house of their fa upwards still amounted to 601,730, anithers, with the number of their fames, mated by a very different spirit, and a far every male by their poll, from twenty years higher degree of vitality, than languished old and upwards, all that were able to go round the whitened bones which were forth to war in Israel." The first census sleeping in the desert. With the prophet was made by assembling the congregation called to curse them, gazing on one hand over together on the first day of the second the country they were about to possess, on month, in the second year after they were the other over "Israel abiding in his tents;" come out of Egypt: 603,550 males above his curaptured lips might well exclaim, "Who the age of twenty were enumerated. The can count the dust of Jacon? How goodly force of each tribe is stated; the Levites, a are thytents. O Jacon! and thy tabernacles, month old and upwards, amounted to 22,000; O Israel! As the valleys are they spread the first-born of all Israel to 22,274. The forth, as the cedar tree beside the waters, males above twenty in western Europe con- Goo brought him forth out of Egypt. He stitute about a quarter of the total popula-couched, he lay down as a lion, and as a tion, so that 600,000 males imply a total great lion, who shall stir him up!" Thus population of 2,400,000. Many believe that Moses left the Israelites, a numerous nation, there is an error in this enumeration, but it raised by great principles, a system of laws, is not necessary to examine the arguments and hygeinic adaptations from slavery, and on either side here; I only call your atten-tion to it as the first census recorded, and he accomplished one of the most interesting to the fact that Mosss employed this can-physical regenerations recorded in early his-meration of the males of twenty years old tory. In contemplating this mighty work, and upwards, as a measure of the strength shadowing forth preconceived ideas, and the result of theoretical principles, rigorously Before him were the thousands of Israel and sometimes cruelly enforced, the fugireline taulty form from slavery, debased in intellect, and corrupted by circumstances, but Sinai, standing before a rebellious people, now safe from Egyptian pursuit. Let us ask what was the hygeinic problem which must remain for ever sublime in character, Moses had to solve?" His great and as he was conceived by Argelo.

with walled cities, and guarded by a war- our attention, northwards, to the coast of like population; the difficulties to be over- Asia Minor and Greece, where the first temcome were the traversing of an unculti- ples were raised to Escularres and Hyvated but not extensive desert, obtaining GRIA, and where human culture developed

ic laws. In the accomplishment of his himself acquainted with the physical conditawgiver spared no lives: at tion and the philosophic doctrines of the of his own people were surrounding nations, Lyoungus returned conquered tribes were to Sparta, and established a new legisla-ter riches were uppro-tion, founded on education, which he looked to only who had not upon "as the greatest and most glorious were the to augment the work of a lawgiver." The children were children. Nowithstanding the taught to endure labour, to fight, and to duced from them might be the same. At men which we now call " barbarians." certain festivals they sang and danced, unpresent a picture sufficiently revolting to the better feeling of this age, to us of the nineteenth century, who send foundlings to hospitals, nurse scrofulous infants, and educate the children, even of the labouring poor, in workhouses. Yet revolting as this system seems, it formed LEONIDAS, and the three hundred who fought and died at Thermopylæ " to obey the sacred laws of their country." It was founded on physiological laws, and realized at a great expense of suf-

gree of vitality. This investigation of the hygeinic legislation of the Hebrews and the Spartans, appears to me to preclude, to a certain extent, that these cold-bath are a the necessity of further historic inquiry into stitute for both the Spartan exami

extraordinary energy and an uncommon de-

conquer; they were lodged in the country; the hygelne of ancient and harbarous na-went barefooted, played naked or wore one thons, for their institutions embody the prac-upper garment, and slept together on tices not only of the carly, but of the modern rushes. They were fed on coarse spare dict, exposed to alternations of hunger and scattered over the earth, and present them in thirst, bodily suffering, and fatigue, and a tangible, but improved and refined system. practised severe gymnastic exercises. After Hunger and necessity exposed the North an animal is born, its character and nature (American Indian to the hardships and danare cast and fixed. So the education of Ly-gers, the alternations of heat and cold, the curacts began before birth. He sought at inquition and fulness which the Spartan laws its source and root to fashion the Spartan enjoined; the Indians were taught manual race in the iron mould of his system; for dexterity; their eye and senses were keen; this purpose he first reduced, according to they too could endure corporal suffering, ARISTOTLE, the women to some rule: "he and smile in the very pangs of death; they ordered the virgins to exercise themselves also disciplined their women, and abandoned in running, wrestling, and throwing quoits their weak children. And so it was not only and darts; that their bodies being strong in North America, but in South America, and vigorous, the children afterwards pro- and among all the vigorous races of savage

In order to understand a system which apparelled, but with all modesty, before attempted to augment the sum of a people's apparence, but with an industry, increase and the fathers, the young men, and all but the vitality, by eliminating and printing remocked and scorned bachelors of the city; morselessly away all the weak shoots, and, to use the expression of Plato, drew imagine 1800 children born on the same day the young almost as necessarily by the at- at Sparta. They are taken before the elders, tractions of love, as a geometrical conclusion and a certain number are rejected; those follows from the premises. On marriage, that are strong and well-proportioned are the bride was carried off by violence; and carefully educated, and their bodies are temonly seen illicitly by the bridegroom, neither pered by discipline to the circumstances in oppressed by wine, nor enervated by luxury which they are destined to move; after the (Plutarch). The father could not rear his expiration of twelve years, only 1000 reown offspring before he had carried it to the main. Now conceive the same number elders; who, if the child was strong and well- 1800, born in a n ighbouring city, where proportioned, left it with the mother, and the circumstances are nearly the same, with gave orders for its education by the the exception that all the weakly children state; but if it was weakly and deformed, are tenderly brought up, till they are driven commanded it to be thrown into a deep care by necessity from their parents arms. How wern near the mountain Taygetus. The many of such children would be alive at the women, too, washed their new-born babes end of twelve years? Not all, but probably with wine, to try, PLUTARCH correctly adds, more than 1000; more lives would exist than "their habit of body; imagining that sickly at Sparta, but the vitality of many of these and epileptic children would sink and die saved children would be feeble, their lifeunder the experiment, while the healthy time would be impaired by sickness, and would become more vigorous and hardy." afterwards, in youth and in manhood, they The public education began at the age of seven would be swept away by the implacable seyears. For further details on the Spartan verities of a rude and uncivilized state, if these ARNOPHON, and PAUW. These outlines lived to possess offspring, and that offspring extended to three or four tuberculous, scrofulous, enfeebled generations, their proportion would be augmented; while organic debility was weeded from the Lacedemonians, the North-American Indians, and vigorous barbarians, in its germ, by the laws, and by the stern discipline of nature.

The Russians, in an extreme climate of rapidly alternating heat and cold, still bathe their young infants in the cold rivers, and then bring them suddenly to the warm fering and life, the idea of Licungus, in stoves, to harden their constitution, accord producing a chosen nation, endowed with ing to Rus-ian writers. I shall provi experiments, and the relative infants in the warm and extreme cold destroys blooded animals; wh

the deep cavern near Taygetus. That some | you will find that the system of breeding

Wales, for the first five years of life, were tion of domesticated animals to the human 46 per cent, in the six years clapsing between 1818-24. Admit that the mortality laws we have just passed in review; many in infancy had been greater, and that many of the weaker children had perished, is it not probable that the mortality in manbood five years of age, die annually per thousand; the influence, and the means of and in manhood, between twenty and thirty the influence, of hygeinic agents. years of age, 9; between thirty and forty, exactly 10 per thousand perish; while, at the same ages in England, 10 and 12 instead of 9 and 10 per thousand are lost. You perceive here an oscillation in the line of vitality,—in the proportion between the dying and the living. If it is lowered at one time, it rises correspondingly at another. Again, where the temperature, the place, or the social condition, renders life difficult of preservation,-where the external hygeinic conditions on which our physiological processes depend are unfavourable. -the deaths in infancy are immensely augmented, in order to raise the subsequent period, destined for the production of the species to a certain pitch of vitality, below which its generations would cease. In the cold climate of Sweden, instead of 45, as in England, 90 per 1000 died annually in infancy (1755-75). Between the ages of twenty and forty, however, the mortality was not quite so great as in this conntry. In Stockholm, out of 3000 born, only 1000 survived the twelfth year. You conceive, perhaps, now, that notwithstanding bave been as great in Sparta gorse climates, where cold or even in the same ata were reared.

great cause of mortality exists among the and training-directed not to increase the Russian children none will doubt, when longevity of those animals, but to give them they learn from Sir Francis blvernors, imuscular strength, velocity, and sagacity, or that at Nigni, near Novogorod, out of 1000 simply weight and ficsh,—has been eminent-baptisms, 661 die before attaining their ly successful. I will not here dwell on the fifteenth year; but whether the cold-baths, system which those who breed these anithe cold climate, or the want of food, conmals adopt; I shall recur to that on another timutes most to this lamentable destructoccasion, and now only call your attention tion, we cannot decide. It is generally to one fact-viz. that they invariably reject, agreed that there is a considerable propor- and never breed from, those animals which tion of old men in Russia, and this has been do not possess that vigour, sagacity, or well-adduced in proof of the longevity and health favoured aspect, which they aim at render-of the entire population.

If every sickly, Among the most civilized nations of puny, cowardly, stupid individual, was nemodern Europe, out of 1600 or 1800 chil-| cessarily retained, and all were allowed to dren born, only 1000 remain alive at the end associate promiscuously, the present perfect of the 12th year. According to the accurate animals would speedily degenerate, like negcalculations of Mr. EDMONDS, founded on lected uncultivated vegetables, to their prithe last population and parish register mitive state of wildness. The extension of returns, the annual deaths in England and these principles, deduced from the observaof which are now, happily, discountenanced, alike by humanity, and a more enlightened hygeine, and by all the governments of civilwould have proportionally declined? The ized Europe, except Russia. In the next state of mortality in Belgium entitles us to becture we shall examine the hygoinic. answer this question in the affirmative. In doctrines of HIPPOCRATES, GALEN, and the Belgium, 66 infants, between birth and moderns, and present some illustrations of the influence, and the means of measuring

ON THE

TREATMENT OF FRACTURES

WITHOUT THE AID OF SPLINTS.

By W. C. RADLEY, Esq., M.R.C.S.L., Newton Abbutt. Devoushire.

(Continued from page 17 k)

THE importance of the primary treatment of fractures during the first three, and up to ten days, of itself constitutes an apology for stating what every surgeon knows, viz., that the weak lotion of a solution of superacetate of lead, in the proportion of a drachm to a pint of pure water, can be converted into a decided astringent and repellent, in cases of tumefaction, by adding sixty or a hundred grains of alum to the lotion. I know of no better lotion to fulfil the latter intention than such an application, to wet a bandage. "Pour le plaisir de changer," we have the liquor aluminis compositus of the London Pharmacopacia, perhaps too strong by twice over; but that can be modified od libitum. With of sheep, of ores, in this coun-nectrace of English race-horses,

our Gallic neighbours in the use of their |" Treatise," which relates to fractures of "Eau de Vie," in every case of recent in- the lower portion of the thigh, in the joint. jury. When, indeed, there is danger of a The treatment is thus described:—
loss of vitality through gangrene, we may "The limb is to be placed on a pillow in apply a firmentive cataplasm of yeast to the the straight position, and evaporating lowound, and bathe the surrounding parts tions and leeches are to be used, to subduc with the brandy aforesaid; but as this state the swelling and inflammation. When this of things is the inevitable consequence of object has been effected, a roller is to be previous and too violently increased action, applied around the knee, and a piece of ster running into mortification, the surgeon will pasteboard, about sixteen inches long, and use every gentle means that mercy can de- sufficiently wide to extend entirely under vise to prevent such a catastrophe, the best the joint, and to pass on each side of it, so being found in proper agents to allay heat, as to reach to the edges of the patella, is to which spirit or brandy would create and ex- be dipped in warm water, applied under the cite.

tise," contains his "general directions for the form of the joint, and this form it will the treatment of compound fractures of the afterwards retain, so as best to confine the fore-arm," which run thus:—" The arm bones. Splints of wood or of tin may be should be supported upon a splint, so as to used on each side of the joint, but they are be kept perfectly free from motion." And apt to cause uneasy pressure. In five weeks I should for the same reason place the arm, passive motion of the limb may be made, to What! rest a sore limb on the marrow line of a splint board? Bid me repose on the bars of a gridiron! To think of keeping a constraint fractures, but new light soon limb "perfectly free from motion" there, is absurd. If you wish your patient not to be because twenty years ago II confess at easy, not to enjoy repose, nor to keep his that time I had not read Pott), from the limb still, lay it on a splint. Again; "eva- first day to the last of my attendance on a porating lotions should be applied;" but of case of fracture, no other basis was employed what use can they be when the immorcable on which to rest the limb, but a pillow and bandage confines the hot vapours close the bed, nor other restraint used than a band-around the limb? "And the limb should aging nor other means than lotious, to acnot be disturbed,"-true, but foreign aid complish a core. creates more disturbance than the injury The case of Sir Astley is one of the worst Itself,—"unless the patient has symptoms of fractures, and as it is a most painful one, of a suppurative process, when a small opening should be made in the bandage, to allow low, with a piece of pasteboard sixteen of the escape of pus, but still the bandages inches long and of goodly width, interposed should be suffered to remain,"—that is, all between it and the injured joint,—a splint in nust remain in statu quo: no one must exmust remain in statu quo: no o the dressings in which his limb is ineased. Immoveably straight a fractured limb; car"The bandages are suffered to remain." penters, with their heards and glue; teaThe patient treated in this way, finds that he tray-makers, with japanned splints; ironhas much to suffer besides the bandages. mongers, with tin splints; blacksmiths, with "The patient should be bled from the arm iron-plate splints; Hindows, with is the innammation and constitutional irri-spinits (better be applied to some backs tation be considerable." Certainly," said I, than broken legs); and/orw from the Arctic two years ago, after perusing the "Treatise," seas, with Martin's whalebone splints; and transcribing the passage, in the excite-millimers with pasteboards, for Sir Astley's ment of the moment I added the following splints; and breeches-makers, in the rear, remarks:—"If it was, for some unknown with straps and buckles to bind the broken rritation to active inflammation, I know of ought long since to have passed the range plan of treatment so likely to produce of humour and raillery, and journal of the produce of humour and raillery, and journal of the produce of humour and raillery, and journal of the produce of humour and raillery, and journal of the produce of humour and raillery, and journal of the produce of humour and raillery, and journal of the produce of humour and raillery, and journal of the produce of humour and raillery and humour and raillery and humour and raillery and humour and raillery and humour and humour and raillery and humour an those mischievous effects as the above-re- oblivion. Had the words commended long-continued pressure on a pierced, lacerated, and fractured limb, where the natural sensibility is vastly increased by diseased action."

I now retrograde to page 173 in the tem needless. Had Sir Astley pill

knee, and confined by a roller. When this Page 382 of Sir Astley Cooper's "Trea- is dry, it will have exactly adapted itself to

if the inflammation and constitutional irri-splints (better be applied to some backs reason, a desideratum to produce local and ends of bones together. How many more constitutional irritation, and to urge on that I cannot stop to say, for really this system

his patients, as I do mine, I should not now | time to time, that in proportion to that mohave been attempting to do my best to save tion is the quantity of callus produced." future painful threes to those whose nerves of course callus means ossific matter. The are racked with pain in and out of hospitals prore motion, the more bone. Nothing can under the torture of tight bandages and be plainer. So much for the theory of hard splints.

therefore they are soft and yielding; what as to the due quantum, "wisdom should harm, then, can they do?" I ask, "What be present to direct it." good can they do, which the simple pillow would not effect? Are you not thus striving of splints is this, that splints keep the extended any proach the pillowy mode? You have tremities of the fractured ends of the bone relaxed a little, and softened down your in contact. Attend to Sir Astley Cooper's grant that this is the least objectionable of once admitted in their place, the tribe of splints; but even this is unneces- 1 shall now aim to prove, way my instructor, a talented surgeon (Dr. ago.

One paragraph respecting the more argumentative reasons why the splint is employed, and I quit reasonings for facts. A judicions writer (Mr. S. Cooper; says, " Hence there is a necessity of employing means for fixing the broken limb so effectually, that it may continue perfectly motionless during the whole time requisite for the union of the fracture." The truth of this I positively deny. It is not necessary that any limb, with any kind of fracture, should be kept so perfectly motionless. True is it that Sir Astley Cooper, at page 382 (before quoted), says, "The arm should be supported upon a splint, so as to be kept perfectly free from motion." These latter words are synonymous with " perfectly motionless." They echo the same sense. But in page 97 of the "Treatise," there is a discrepancy with some of the contents of page 382. In a note to that page, speaking ommon fractures external to a joint, Sir the following important moniby moving the bone from

perfect immobility,-a theory founded on "But, perhaps," say some, " the splint is erroneous perceptions. Of course too much padded, and the pasteboard is wetted, motion would produce great mischief, and

treatment, in an extremely painful case; and admission on this point; I quote verbatim, if the pillowy mode is the best in a despe- as in all the other instances :- " When a rate case of fracture, how much would it fracture occurs amidst muscles, those which advance the cure in every common and less are inserted into the fractured part of the dangerous case!" Take this syllogism : The bone, have generally a tendency to keep the application of a pillow is right in the worst extremities of the bones together, with some and most painful cases of fracture. Why? few exceptions." Why then use splints? Because of the pain. But every fracture is The display is one of false science to effect painful; ergo, every fracture should have a what nature does by a natural process. If pillow. But Sir Astley recommends stiff this in the generality of fractures be true, pasteboard, macerated in water until it be- (and what good surgeon will deny it?) the come so much softened as to admit of its arguments for splints are a waste of breath, being moulded to the shape of the part. I and the simplest mode of cure should be at

I shall now aim to prove, that in no case sary, and inflicts a modicinu of pain, which, of fracture whatever that of the radius even, is injurious. Soaked pasteboard, or sometimes excepted; is anything more relight millboard, is only useful to envelop quired than a strapped pillow, with its padthe arm or the leg of a person who must ding, a tailed bandage, and such lotions and prematurely labour after a fracture. In this dressings as it may be proper to apply to the surface of the limb. Simple fractures being John Hughes) of Liverpool, was accustomed by far the more numerous, are those with to use these materials nearly thirty years which we shall have most to do. The "exceptions" are fortunately few, and if they (attended, as they too frequently are, by desperate and complicated circumstances) cannot be cured, they must, I suppose, he placed in the "chapter of accidents, usual way. My theory and practice shall be drawn from bond-fide cases, -not manufactured to support views that need the friendly aid of fictitions natients.

CASE 1 .- Mr. Moses Crossman, sen., of the village of East Ogwell, in 1819 fractured his tibia by a fall from a horse, or, I rather think, by his horse falling with and upon him. It was a very bad simple fracture, attended with tumefaction and pain. One unfavourable and vexatious circumstance was (too common in country practice) the distance which I had to travel before I could get to the residence of the nationt. Although there was much swelling in this case, yet an aluminous lotion and a tailed bandage, with the aid of a pillow and straps, cured this fracture in five weeks, when Mr. Crossman quitted his bed altogether for the day.

At this period, every case of fracture was a battle of words between the friends and

beet by mying, that at common transporter, and are compound. But no tture to say, that what is safe in a com- case is the same.

mon fracture must be inadmissible in a compound one. Practure is fracture, and the nature of either

myself, about the non-employment of the | natured smile of incredulity from Mr. Gaye, splints: in the present case, the Rev. Mr. -e called in while I was engaged in the remedial operations on the leg. His stay was short. It developed a few questions on the "usual means" of curing fractures, accompanied by a look of contempt at my simple mode, and ended in a sneering sentence, muttered in the door-way, about "dabblers in the art." I only smiled, allowed the ill-bred gentleman to go his way unanswered, and resolved to persevere in my plan of curing fractures with as little pain as possible to the patient, who in this case was a healthy man of forty-five, who, as I have said, soon got well, and prided himself as much after the fracture on his small leg with a light low boot, and fine muscular calf, as he had done before it, and with as good cause.

CASE 2.—This occurred nearly seven years ago, and shall be related at greater length, because more witnesses can be cited to prove the truth of the details : - Mrs. Alsop, about seventy years of age, in the month of April 1829, was placed in great peril by the fall of a stack of chimneys during a storm, which dashed, with the roof under it, into her bed-room. I then resided in the adjoining house. Hearing an indefinable crash, I dressed, and hastened into the street, and soon found my way to the scene of danger. The bed was demolished, and the old lady lay under a great weight of bricks, slates, rafters, &c. On being removed from her alarming situation, the tibia of one leg, and the fibula of the other, were found to have suffered the injury of simple fracture. Mr. Charles Gaye, a surgeon of valued professional ability, whose friendship I have long had the happiness to possess, was also called in; as also was Mr. W. Y. Bond, another surgeon, who usually attended the family, the extent of injury done to the vital parts not having then been ascertained. But as I was first present, the more immediate care of the patient was willingly confided to me by Mr. John Alsop. We (the surgical trio) now formally deliberated on the case, and the best mode of securing the fractured limbs, when the following dialogue occurred.

Mr. Gaye. "Why, Radicy' where are your splints?

R. " I never use any; I have not used any for many years.

Mr. Gaye. " Where is your authority for that practice?"

R. " I have none but my own experience. that splints are useless in fractures.

Mr. Bond. "What! set a fractured bone without splints? I never heard of such a thing in my life!"

Mr. Gaye. " Nor I."

R. " Well, let me have my way on this occasion, and you shall have yours another

The concession was granted with a good-

and a polite assent from Mr. Bond.

Mr. Gaye. " Proceed. We will look on." Three lengths of tape, each of two yards, were each doubled, and laid on a common feather-bed, and on these straps a feather pillow, heaten smooth, was laid. Boyer would have exclaimed "C'est tout trop donx!" It is all too soft! Pardon me, say I, it is not too soft in any case. A sixteen or eighteen-tailed bandage, I don't remember which, was laid on the pillow, and the patient carefully removed to the bed, and the most painful lumb, that with the fractured tibia, was placed on the pillow. A reduction was then gradually and effectually made, the tails of the bandages were lapped over and over, and the sides of the pillow were brought to the sides of the leg, gently supporting it in situ, while the straps became a threefold means of keeping all steady. To support the foot, a piece of tape was sewn to each of the lower corners of the pillow, and tied close underneath the sole, which it supported much easier and better than does the usual " foot-board." My two friends assisted me, with many a humorous wink.

The leg was placed in the straight position, and rested on the calf and the heel. In order to relax the muscles to the hatt-bent state, or the degree of semification, a large piece of flannel, perhaps a petticont, is, in such cases, inserted between the pillow and the bed, for the purpose of raising and bending the knee-joint. The leg now presents the usual declined plane. The femme is a little thrown towards the pelvis, until the most important of the flexor and extensor muscles of the thigh and leg lie at ease. The under surface of the pillow was, in the present case, padded up, here and there, to support the small part of the leg, until the patient, after frequent and cautions inquiries on my part, declared that the limb seemed to lie with an equal pressure on every part. This latter circumspection is very necessary to be observed. Now look at the limb! As steadily supported as a ship resting in the stocks, and yet on so soft a hasis, that nothing in it gives pain or uneasiness. What principle of surgery ought to have prevented this limb from lying in so much comparative case, and the patient from reposing thus quietly? She did repose; and all persons in cases so treated, will repose likewise. All injuries will excite increased action, and produce some degree of heat, tension, and pain. The next morning my patient complained a little, and the surface of the tibia and the fibula of the other land much in the same way as its a different position, being were moistened with the much diluted. The skill ously sponged with tend water, t

wetted with the lotion above, were

and a hoop, fastened to the state of the bedstead, supported the bed-clothes on the arch of its space, and prevented them from pressing on the toes or any part of the limb, and aided to keep it cool.

The tumefaction was moderate, as was the pain, because the heat was not allowed to remain confined long enough to produce its exciting effect; and as to other irritating causes, there were none, save that of the injury, the force of which had been very great, and at the end of a week caused great tenderness on the surface, the nervous papillæ being very irritable. Tract. Opii, Spir. Vini Rectificat., and Tinet. Hyosciami, were alternately used, with a pledget of lint, bathing the surface over and over again while any under heat remained. Invaluable is this mode. The matter of heat readily unites with sulphuric ether, or a strong pure spirit, and flies off. The main point is not to reduce the natural heat of the limb much below, nor let it reach above the natural standard. On this hinge turns the state of suffering or of case in these cases. Living so near to my patient, I was enabled to attend to this frequently. Indeed, she found the heat, pain, and soreness, thus fly off together so certabily, that I was simimoded whenever there was a little return of pain. But the nurse was well able to attend to it, by turning off the tails of the bandage, wetting them, bathing the limb, and replacing the bambage as before. This was done perhaps twenty times in the day and might for a short period, and with the aid of a sedative and narcotic draught at night, and occasional doses of ol. ricini. she made good progress towards a cure. As for the incessant care with which I attended this case, and which, in narration, may seem tedious, to me it was not tiresome, though no one has a greater dislike of vicions irritability in the temper of a patient, excited as it sometimes is by factitious wants. But such a case as this (and there are many such; demanded every care. The patient was a feeble, aged woman, with all the querilonsness of numerous years upon her, justifying and amply repaying the frequent treatment of adjusting the pillow by padding here or there under it, or the occasional insertion of a little cotton wadding between the pillow and the leg, for even a soft pillow itself will incommode a surface exquisitely tender. The limb was not moved, or only passively (and then moving pillow and all together), when the bandage was remoistened, and the fractured part exposed yiew, by which nothing wrong could being seen. But not once diplace the ends of the bone. arred to effect such a to have attended who was caslly fretted by on and pain.

At the end of the third week, my patient being naturally an attenuated subject, the eye could plainly distinguish, through the integuments, the breach of continuity in the bone, marked by a rough, irregular, thick line, or cleft, descending obliquely through the bone; appearing in a vertical direction, proceeding from the anterior to the posterior surface. But not the least deviation from a straight line in the general contour of the limb could be detected, nor could the finger discover anything in passing over its course, save the oblique line or depression described.

At the end of the fourth week, by comparing the legs, it was not distinguishable which tibia had been fractured, until the finger was slowly passed over the fractured part, and on the last day of four weeks from the accident, she walked across the room, leaning on the arm of her son. Now, remember, here had been simply a rolled bandage applied spirally around the leg. I said to her, "Madani, you have heard much of splints, and have been advised by some to have them, will you now wear one, or a piece of pastebourd?" Her reply was, "Neither, sir, I thank you; I feel very comfortable, and shall be able to take care of the leg myself." And from that time forward she dol so, with no other assistant means than the spiral bandage, which was taken off every night and reapplied every morning. In the autumn of the same year, I frequently had the pleasure of seeing her walk in the street, with her accustomed light and nimble step.

Some have complained that little progress has been made in the treatment of fractures since the days of Hippocrates, but, I trust, that this is a great improvement.

Case 3.—The next case I shall relate is one of a very different character from the last. It occurred in the person of a rough labourer, from the granite mountains of Dartmoor; presenting in many respects contrast enough to the preceding patient. The Hightor quarries, about nine miles from Newton, afforded employment to two or three hundred men, and as one of these was engaged on the granite bed, in removing what is technically called "the head" (a thick super-diluvial deposit of moor-stone, lying on the more compact rock), a mass of it fell, and buried him beneath. He was carried to a cottage at Hightor vale, from whence an express was sent off to me, for it was then a part of my occupation, and one irksome and laborious enough, to attend, on contract the sick and injured workmen at this place. I found him writhing under a fracture of the right femur, three inches above the patella, —quite near enough to the knee-joint. The man possessed robust strength and rigid muscular fibre. As to

the direction of the fracture, the great tension already existing prevented my knowing much about it at that time, but I afterwards found that it passed obliquely across the bone; the mass of stone having broken it short off. The man lay on a poor feather bed, with a coarse sacking bottom, laced up with a slack hand, so he sunk down low What would Boyer onough posteriorly. have said on this occasion? "Soft and yielding indeed!"

In this state of things it would have been difficult to lay out the thigh straight, which I never do, according to Dessault; so the nethod of lying "at ease," something in limb, heat, tension, pain, spasm, and a startthe way of our surpassing countryman Pott, ing in sleep, are sure to follow. In the prewas adopted; the lower part of the thigh and the whole knee and leg, being so supported on a long pillow, and padded up better; he had perspired freely, and had underreath, that a regular plane was ob- from that derived what Mr. Pott recomthined; no one part sinking lower than the mends in strong terms; while it was to the rest. Slight extensions were made from time to time, in the hour or two employed Pott further says, "that the surgeon never to get it into a comfortable state, talking to found it necessary to have the leg or the and cheering him the while. The fracture thigh once, during the cure, removed from being reduced, the handage applied, and a the pillow on which it had been deposited." hoop employed to support the bed-clothes, I Of course I feel the great practical value of left him.

the hoop useless, and had taken it away, advantage of that mode of cure is invulu-The thigh was rather too warm, and the able which allows any old woman to open man not by any means casy; so I nailed the bandage, permit the hot air to escape, on the hoop to his old oaken bedstead, wet- and, after bathing the surface again, lay on ted the bandage, bathed the skin, and left the tails of the wetted bandage, and thus yield him casy, in a better state, with full instruc- the patient case twenty times in a day or tions to the mistress what to do to prevent night, with as much facility as she overlaps pain.

termination to all philosophic speculation, desiring me to come to him, for he had not hastened up and found him with a red face and a bouncing pulse, and the skin hot and feverish. How could this be? The hoon remained as I had left it, but on removing the coverings, cause enough presented. The careful wife, after wetting the bandage in the night, which she thought was too cold, had placed a heap of blanket under the hoop, upon the leg, instead of spreading it in a canopy over it. On removing it a cloud of hot gas arose, almost like the discharge on letting off the steam from a little engine. The causes of pain, restlessness, and fever, were at once fully explained to them, and in no very measured terms. The limb still lay well, and in a good position. Bathing the skin with tepid water first, and then with spirits of wine, caused evaporation until he said, "Cool enough now." He had a white tongue, so I gave him two large spoonfuls of the following julep, instead of abstracting blood, and left him: Antimon. Tartarizat. gr. ij ; solve in Aqua Bulientis 3j; et adde; Aqua Frigor. ad Siv ; Liquor. Ammon. Acct. 31; Spirit. Camphoræ min. xx. M. cujus, cap. cochl. maj. j om. bis hor, poster.

Some persons regard a little alteration of temperature as a trivial matter, but of all things in the treatment of fractures, thisappears to me to be the most important in the inflammatory stage. Let the limb be placed and the fractured bones be reduced with whatever perfection of art may be used, if an atmosphere, sui generia, surrounds the sent case no other mistake of the sort occurred. On the following day he was much this sentence, but Mr. Pott might, had not Second day. The "gude wife" thought his splints been in the way, have said, -- "The the belt of her gown,"-all which cannot Fourth day. Other cases prevented me be done where splints are used. Surgical riding over until early on the morning of dandyism in this case would have applied this day, when I was summoned by one of four splints, -- one above, another underthis day, when I was summoned by one of four splints, one above, another under-those hasty messages that put an abrupt neath, and one on either side; and with so many "safeguards" few surgeons would consider it safe to tie and untie them every slept during the night, from pain &c. I half hour. Besides, it would occupy too much of the time of a professional man; for surgical pride would not allow such frequent meddling with the established order of things by any old wife. Yet it would be impossible, even for a four-legged Chiron, to keep a patient easy at a distance of eight miles over the most hilly and rugged roads.

Perhaps some surgeons would have thought it right to bleed this patient as recommended by most authors, but I never yet bled a patient with a fractured bone (fracture of the rib and cranium excepted), nor shall I ever, while other antiphlogistics, Mindererus's spirit, and emetic tartar, are extant.

But to return. In ten days this. safe from inflammation and the fifteenth day from perfectly astonished to

^{*} Mistura Camphores bill pares:

under his foot and over his need, pacing in observed, also, that the splints have no front of his cot on a pair of crutches. I vemonstrated with him on his danger, and broken bone." represented to him the certainty of his having a crooked limb, but found all argument was uselessly opposed to his obstinacy, so I threatened to speak to Mr. Whittaker the superintendent of the mines. " He did not are a --- for any body," he said, and would do as he liked. My first impulse was to forsake the patient at once, but mercy, as I thought, forbade, so on the next visit a LEY, on this exceedingly important subject, pair of wide plasters of emplast. Etharyyri is in our possession, and should our space e. resina were overlapped on each other admit of its introduction, it shall have a across the rectus femoris and above the place in The LANCET of next week. We fracture, which had barely united, at the consider that the facts which have already same time admonishing the man to be been advanced by Mr. Radikry are entitled careful. "When may I go a fishing?" however, was then, as it had frequently before titioners, and we believe that the liberal been, his auxious inquiry. " Don't think and enterprising surgeons of the North of it yet," I always answered; but believe London Haspital will be the first to give the it or not who likes, at the end of three plan of Mr. RADLEY a trial in the metroweeks (to a day) from the fracture of the polis. bone, he went on one crutch, using his fishing-roof as a walking stick, to a trout stream below Holwell Tor, and there fly fished for 1 the starvelings till he was tired, and almost! every day in that fino season he was thenceforward so employed. This was in the summer of 1825, and as he was off for engley. at the "London Infirmary for Diseases of ment on some other work. I lost sight of the Skin," Dr. J. P. Litchfield, physician to him until the last summer twelvemonth the Infirmary, gave the following demon-(1834); when, walking over one of the stration of the above supposed author of the extensive marshy meadows of Kingsteign-in ritation experienced in the itch:

— ton, I saw him immersed up to the inser— I have here, gentlemen, a patient, a young tions of the glutei nurseles in the muddy girl, from whom I shall endeavour to exevery step he advanced, with a sort of net in affected with the disease twice, although his hands, catching cels. Conversing with the is only ten years of age. She is the him about his thigh, he informed me that in child of a tradesman, and caught the common of his fishing rambles near Highton, because the supposed the bone to be quite strong, he was lured so far from home by communicated the disease to her family, the romantic scenery about Becca Fall, that thereby fully establishing its contagious and might have died there, had not a boy, were employed to cure it, and the remedy who was casually passing, procured a nan succeeded after a month's assidnous appliand horse from a neighbouring farm, and he cation. Shortly after the patient was cured now laboured in most pathetic words to consider a gain in contact with the servant vince me how much pain he suffered on who had before infected her, and the result being set on the back of a wretched animal, was a second attack of the disease; it is for whose false movements hurt him at every step as he passed over the rocky ground on his way home. Foolish fellow! His was the quickest, and, from his great imprudence, the worst cure of broken limb I ever had. True, the limb was always afterwards strong enough and long enough, but he turned out his foot awkwardly. Had he ined in bed for four weeks instead of al not only have been well, but well.

command over the short fragment of a

Phy is it that they should ever be laid over any portion of a limb at all. If some fractures will heal without the " command of splints, why not more central fractures in the same bone?

Newton Abbott, Devon, Nov. 2, 1835.

. Another valuable paper by Mr. RAD-

THE ACARUS SCABIEL

Is a clinical lecture delivered last week

bottom of a water brook, sinking down at tract the nearms scablel. She has been he became exhausted, fell on the ground, character. Frictions with sulphur ointment this attack that she is now under my care.

You may perceive that the disease is at present confined to the fore-arm and hand: you will also observe that the eruptions are of different kinds, some being of the true primary vesicular character, others having the inflammatory and pustular appearance, which is caused, as I have explained, by external irritation. I now select three small vesicles which I surround with a circular ink-mark, in order that we may not conthe following candid By examining the interior of this circle the "Sargical Dic-with the powerful magnifying-glass which "Mr. Sannet Cooper:—" In a I here have, you will perceive, a small ar an articulation, it is to be faintly-marked red line, diverging from the

centre pustules, at nearly right angles. This | goltre, contrary to the advice of many sur-I consider to be a small furrow or canal and if we are so fortunate in the present instance (and I succeeded yesterday and this morning in the same subject) as to find the acarus, it will be in this minute covered way. I now, therefore, take a needle about three inches long, with a fine flattened point, and puncture the pustule. I next gently and slightly slit up the integument in the direction indicated. If I mistake not I have now upon the point of my needle a small white globular body, scarcely perceptible to the naked eye. Having placed this shapeless point in the field of the glass, you will, on looking steadily at the object, see the globule, magnified to the size of the sketch which I now show you, * and which was made from an insect extracted yesterday. The insect under the glass exhibits so much vivacity in its movements, and such power in its many-jointed limbs, that you will have no difficulty in understanding the cause of the intolerable itching under which patients in this disease uniformly labour, and which we should find it hard to explain on any known pathological principle.

The acarus scabici, as you are probably aware, belongs to the order aptern. It has, as you may perceive, eight legs, divided into flexible joints. The legs and proboscis are of a purple-red colour, as though injected with dark venous blood, but it is rather remarkable that the colour disappears almost entirely after the insect has been kent for some time. I have here one which was taken this morning from the same patient. For nearly an hour after its extraction this insect exhibited the same coloured appearance. But you will observe that the legs and head are now both nearly colourless. The body of the insect which I have last shown, is dry and shrivelled, very different from the full form and gelatinous appearance of the recentlyextracted insect. In both cases numerous small spiculæ or hairs may be seen passing off from the extremities and body of the animal.

LICATURE OF THE SUPERIOR THYROID ARTERIES.

IN CASES OF

LYMPHATIC GOITRE.

REPEATED success has confirmed Professor Chelius, of Heidelberg, in the favourable opinion which he has held for several years, on the propriety of tying the superior thyroideal arteries in cases of large

100

geons. In all cases of lymphatic goitre, where these arteries are much dilated and sensible to the touch, this ligature is as much indicated as in the vascular goitre. In four cases, where M. Chelius has tied these arteries, the success of the operation was not retarded by any accident; the tw following will serve to show what benefit we may hope to obtain from the process, even under the most unfavourable circumstances.

Case 1 .- G. Haltenstein, twenty-six years of age, was attacked at the age of fourteen years with a tumefaction of the thyroid gland, which gradually increased. At the age of sixteen, in consequence of the patient having carried a heavy load on the head, the tumour became much larger, and during the last two years remained stationary. The goitre now presented a Rearly uniform tumefaction; however, the left labe ascended somewhat higher than the right: the tumour also exhibited a central, and two lateral portions, divided by two farrows, very sensible to the touch. The tension is equal throughout; the skin not altered, merely covered by blue varicose veins. The tumour extends from the os hyoides to a little below the upper part of the sternum; its dimensions before the operation were as follows :-

The greatest circumference at the base of the tumour, 25 inches, 4 lines.

Distance from one angle of the lower jaw to the other, measuring over the tumour, 18 inches, 6 lines.

Transverse measurement at the most vohuninous part, 15 inches.

Perpendicular measurement from the os hyoides to the stermm, 7 inches, 10 lines,

The left thyroid artery was felt beating for the extent of about an inch at the left upper angle, but the vessel was not enlarged On the right side the pulsations were more sensible, though more feeble.

The inconveniences occasioned by the pressure of the goitre were very great; the patient slept but little; he swallowed with difficulty; the respiration was short and difficult, and on the least effort he was attacked with pain in the head and oppression about the chest.

The ligature of the left superior thyroid artery was performed on the 23rd of March. 1834. Its traject being determined by the pulsations, an incision was made in the direction of the vessel, which was isolate with difficulty from the tissue of The wound was immediate sticking-plaster, and the bled. Rest and a try-were ordered. It felt well enough the tumour flattened on the left side, and was

^{*} An inch and a half in its long diameter, and very similar to the engraving which we gave of the animal in THE LANCET for Oct. 4, 1834, page 61.—
Eo. L.

on the fourth day after the operation the tumour was reduced to the following diincusions :-

Circumference of the base diminished by 5 inches. 5 lines.

Transverse measurement, diminished by 2 inches, 6 lines.

Persendicular measurement, diminished by 3 Inches.

The inconveniences to which the patient had been subjected now gradually disappeared, and he was soon able to return to his ordinary occupations. The tumour continued to decline. Towards the end of 1834 the left side had become remarkably smaller than the right, and the patient enjoyed the full exercise of all his functions; he was advised to submit to a new operation in case the right side of the tumour should increase and give rise to any inconvenience; but as yet this has not happened.

Case 2.- N. K., 30 years of age, of a weak and scrofulous constitution, perceived the first trace of goitre at the age of 11. The disease was hereditary in his family, his mother and five of her brothers and sisters being also affected. The tumour having gradually increased, and occasioned uneasiness in respiration, the patient, who had previously tried various internal remedies in vain, presented himself for treatment in June 1832. The tumour, as large as the doubled fist, corresponded to the left lobe of the thyroid gland; it had a pear-shape, and the inferior rounded part hang down upon the upper third of the sternum. The tumour was hard and uneven, and exhibited in several points traces of the application of the seton. The superior thyroid artery, very much dilated, was felt pulsating strongly, over a great extent of surface. In this case the knotty form of the tumour, its long duration, and the change of texture produced by frequent applications of the seton, left little hope that ligature of the artery would be attended with success; the case was one which rather seemed to require extirpation of the gland; however, the ligature was chosen as a means of rendering at least any secondary operation more casy. The two superior thyroid arteries were therefore tied; the wound healed readily by the first intention. The tumour immediately became more flaccid and soft, and gradually diminished in a manner beyond all expectation. After having remained a considerable time in the hospital, during which the swelling still decreased, but not very bly, the patient was discharged, with return again in case of ne-

followed, according to

of Heidelberg, From

insensible. The wound healed rapidly, and | Professor Christies, for the ligature of the superior thyroid arteries, should vary according to the circumstances of the case &c. As it is impossible to determine beforehand in what direction the first incision should be made, the Professor considers the rules laid down by JAMESON, ZANG, WAL-THER, LANGENBECH, and others, as illusory. He thinks that the vessels never pursue a constant direction, and are, moreover, frequently displaced by the tumour. The only guide we can follow is the pulsation of the artery. We are sometimes compelled to take it up above, and sometimes below the omo-byoidcus muscle, but in either case this is done with equal facility.

CARR OF

CROUP WITHOUT COUGH.

THE following case, observed by Dr. Michaelis, is so interesting, that we are induced to extract it, nearly entire, from the second number of Hufeland and Ossan's Journal for the present year :-

Case .- In the month of February 1831. the author was called on to see a child who had been dangerously ill for several hours. The patient, between four and five years of age, had been quite well the day before, and was suddenly taken ill within a few hours of the visit; when first seen he was lying on his back in bed, and the face was expressive of great anxiety and suffering. On examination, nothing could be discovered but some trouble in the respiration. There is no pain in the abdomen or head. The disease was therefore regarded as a severe inflammation of the lungs, and some leeches were applied to the chest, and ammonia and tartar emetic were given in small doses. At five o'clock p.m., the child's state was much worse; the difficulty of respiration is so great as to cause apprehension of instant death; the child lay immoveable on its back, the head was thrown backwards, and the arms stretched out on the bed so as to form a right angle with the rest of the body. The little patient had not yet coughed, and, indeed, it was doubtful whether he was hourse before, as the parents are not certain on this point.

The absence of any cough in the present instance was calculated to throw great difficulty in the way of diagnosis, and after having reflected at the bed-side on the various affections of the respiratory apparatus to which children are subject, M. MICHARLIS was induced to ask himself, "Could this be an example of croup without cough?" Every effort was made, but in vain, to force the child to cough, until at length the object was obtained by forcing him to respire the vapour of strong vinegar; this produced the wished-for aspect; a violent cough, having all the characters of the croupal cough, came on. The true nature of the disease was now manifest. A vomitive was immediately ordered, and the child threw up a quantity of glairy mucus, and a substance whose membranous nature was quite evident. The repeated vomiting was followed by a marked improvement in the respiration, and the little patient lay with his arms more close to his body. Leeches were now applied to the neck, and calomel, with sulphur, antimonii, was administered, to procure copious stools. On the following morning the child appeared much better, he slept pretty well, and the cough was softer and more casy. Towards morning a general sweat had come on; the respiration was much more free, and without any peculiar tone. The caloniel powder was continued, with the antimony, and, finally senega was given, and in four or five days the child was so completely recovered as to be able to play about with his companions.

M. MICHAELIS justly considers this case as unique in the records of medicine; because the cough, which all writers mention as the pathognomonic symptom of the discase, was here artificially excited, while in the cases given by HEIM, the true nature of the disease was not discovered until after the patient's death. In his excellent treatise on croup, HKIM makes the following remarks :- " Even the best physician may mistake the nature of this disease. Not long ago a child two years of age died at Berlin, who had been hourse before he was attacked with the disease, and therefore did not present the change from a clear to the croupal voice. It was only two days before his death that I discovered the true nature of the complaint, and that principally from the circumstance of his having the head constantly thrown back; all aid was now too late to save the infant's life." And in page 15 he says :- "We sometimes observe catarrhs without any hoarseness, and the latter symptom is frequently but slightly marked in several cases of cronp, but when it is very much developed, the patient is incapable of preducing the characteristic tone." Finally, at page 19, he says:-"When the voice is totally extinct, the physician may readily be deceived; I confess that I have been mistaken this way more colouring and other animal m

than once." These citations prove, beyonds all doubt, the existence of croup without its peculiar cough, and it seems strange that the circumstance should not have drawn the attention of writers on diseases of children, to whom HEIM's work cannot be unknown.

In the first case of croup which we published in the first number of the volumes of THE LANCET for the present year, page 29, the child's voice was completely extinct, and the efforts of cough took place without any of that crowing sound which is peculiar to croup. The absence of these two symptoms is noted in the report of the case, but as no doubt whatever existed as to the nature of the disease, sufficient attention was not paid to a circumstance which, in other cases, would certainly have rendered the diagnosis very difficult if not impossi-

EXISTENCE OF SUGAR

IN THE

BLOOD OF DIABETIC PATIENTS.

A PAPER on this subject has been published in one of the continental journals, by M. Ammosioni, head apothecary to the hospital of Pavia. Chemical research has already miaced beyond doubt the existence of saccharine matter in the urine of persons affected with diabetes mellitus, but the presence of sugar in the blood or other fluids has as yet remained very doubtful. Marcet. Wollaston, Pront, Kane, and, lastly, Berzelius, have endeavoured to discover it, but without success. Wollaston was so frequently disappointed, in his attempts at discovering saccharine matter in the blood of individuals labouring under this affection. that he was led to conclude, either that the sugar is formed in the kidneys, or, being produced in the stomach by an imperfect digestion, is carried at once to the bladder by some unknown passage. The pharmacien of the Pavia hospital has been more successful in his experiments. In the month of June 1834, Professor Corneliani forwarded to him about a pound of blood drawn from the arm of a patient whose urine had furnished a large quantity of sugar. The lowing process was employed for i The clot and serum, mixe quantity of water, were the liquid parts separal lated by a liter. The a dull-red colour.

treated with the subacetate of lead, which | there is at first little alteration in the form threw down a dense, dirty-white, precipitate. of the organ; as the enlargement advances, A current of hydro-sulphuric acid was now the tumour becomes more globular, the passed through the mixture, to throw down the lead; the residue gave a pultaceous, dark mass, which, when diluted with water and filtered, became a brown liquid; this latter was boiled in an aqueous solution of white of egg, which, hy coagulating, divided the fiquid into two parts, one flocculent, brown, and insoluble, the other liquid and colourless. The latter, being gently evaporated, gave a sirup analogous to the same which had been extracted from the patient's nrine. The sirup, being laid on one side for a few weeks, gave rise to the formation or colourless crystals of a prismatic form, and with a rhomboidal base, in a word, exwashings, the vinous fermentation was soon amounted to about one ounce; the crystals of sugar weighed nine grains.

The same chemist has also analysed the blood of a female who died of diabetes mellitus, but he was mable to find the least trace of sugar, either in the blood itself, or in the serum effused into the cavity of the pleura.

VENEREAL DISEASES OF THE TESTICLE.

Abstract of a Communication by J. W. CUPACK, M. D., of Stevens's Hospital, Dublin.

So many surgeons of the highest authority have admitted the existence of venereal affections of the testicle, that we must assume the existence of an acute or chronic enlargement of the testis, originating in the action of the venereal poison, to be proved; but here our knowledge, derived from published opinions, ceases. These effections have nover been classed, described, or explained, according to their differences, from dissection. From the general conviction of the profession, Mr. Cusack considers himself justified in assuming the existence of a disease of the testis depending on the presence of the venercal poison in the system; at the same time he admits, that as the disse occurs in the more advanced stages of ional lucs, and after the use of meraust be entertained as to the nstitution and treatment as he has observed

the body of the testis, and

epidfdymis soon being lost in the general mass; the tumour has a fleshy feel, but differs much in density in different parts. Partial adhesions in the cavity of the tunica vaginalis, combined with effusions into that cavity, even independent of the internal changes which may be going on, render primary smoothness and uniformity of the surface an uncertain symptom; so uncertain indeed and so little uniform are the primary appearances, that Mr. Cusack believes that the best practitioners would be unable to make a perfect diagnosis of the disease, if unacquainted with the history of the case, and the attending circumstances. Its teractly similar to those of sugarcandy. The mination is either resolution or suppuration non-crystallized sirup having been exposed or induration, and the formation of granu-to a temperature of 26°, R. with a little beer- lar bodies, ending in total destruction of the functions of the organ. Mr. Cusack hesideveloped. The quantity of sirup obtained tates to believe, and is unable to aftirm from from the pound of blood might have his own practice, that this affection of the testis is met with in the earlier stages of secondary symptoms, or during the presence of any of the forms of true papular eruption. The acute form accompanies venereal hectic, pains in the bones, and either a scaly eruption or perhaps a solitary spot, apparently belonging rather to the genus acne; but these instances are comparatively rare, and of fifty patients at present under treatment in Stevens's Hospital, there is not one case to adduce in confirmation of such an opinion. The patients who suffer from this affection are those persons who labour under affections of the periosteum and bones, and bear the marks of having suffered from pustular and tubercular eruptions. Specimens of the disease were submitted to the Surgical Society, and these were wholly derived from persons whose constitutions were broken down from the protracted forms of the disease with which practitioners are familiar, but neither from his own opportunities nor from any other source could Mr. Cusack exhibit a specimen of the changes which take place in the more curable forms of secondary syphilis. Ten preparations were laid on the table, exhibiting the discase in all the stages of its progress, from a small circumscribed tubercle, in an otherwise sound testis, to the contracted, indurated, and completely disorganized gland. The structure of the tubercle is rather soft, but harder than common scrofulous tumour. and surrounded by a thickened layer resembling a cyst, the product of inflammatory action. In one preparation the tubercle was in the lower part of the testis, which was otherwise so sound that the epididymis admitted of injection by mercury, while in the opposite testis the tubercle was softened, and contained a glairy fluid .- Dub. Journ., Nov. 1835.

OPERATIONS FOR S

The following statistique of operations performed at the Hospital of Incurables and of St. Mary, at Naples, during the Spring of 1835, we extract from the Gaz. Med. de: Paris. No. 44: --

The neck of the bladder was divided downwards and to one side. Professor Dr. RENZI is in the habit of publishing annually , the statistics of all the operations for stone which are publicly performed at Naples How much would be gained by science if the surgeons of our great hospitals were compelled to imitate this example, for the principal operations which they are called upon to perform! We should then have a body of authentic facts upon which confidence might be placed, and from which deductions of the highest value might be drawn.

At the Hospital of Incurables, ten operations were performed; six of the patients were below ten years of age, the others had: not reached that of puberty. In four cases the stone was large; in three it was small; in three of a moderate size. There were nine males and one female. Only one patient died of the ten; after having cut into the bladder, the surgeon was unable to extract the stone. The bladder, after death, was found much inflamed, almost gangrenous, and the mucous membrane was reduced to a kind of pulp.

At the Hospital of St. Mary, four patients were cut, and all recovered: three were below fifteen years of age.

Since the year 1821, up to the present time, 454 patients have been operated upon in these two hospitals. 439 males, 15 fer individual is involved in the inquiry, the males; or 216 children, 191 adults, and 47 modical evidence having quided the corresponding to the corresponding old. Of these there were cured 388; died 66; giving an average of one death in nearly every seven cases.

ARTIFICIAL ANUS CURED BY A NEW PROCESS.

sar, of Paris, was called on to see a child plying to the coroner for a copy of the detwo days old, who had not yet passed any positions, he declined granting one, on the meconium. The anus existed, and was well ground of the concession being illegal, formed, but the rectum terminated by an though he politely read the depositions to opening in the vagina. On examination it his distress, I am bound to carry the inquiry was found that the rectum did not exist for forward to an issue, that I may not two inches from the anus. M. AMUSSAT, volved by undertaking a defende therefore, determined on seeking the extremity of the great intestine, separating it from its attachment, and fixing it by suture to the opening in the skin; for this purpose the made a T incision between the vaginal and in bowels were much compared to the control of th

opening and the anus, and having introduced the finger by this opening, he separated the vagina from the coccyx and sacrum, until he arrived at the blind end of the great intestine, which was placed above, to the right side of the sacro-vertebral angle. Arrived at this point, the managuvres produced a desire to evacuate the meconium. The gut was recognised by Messrs. Denenx and Lebandy, who were in attendance. It was seized with a book, separated from the surrounding parts by the finger, and drawn gently down to the opening in the skin. where it was fixed with several points of suture. It is now twenty-eight days 'said M. AMPSSAT at a late meeting of the Academy of Medicine: since the operation just described has been performed, and no accident has occurred, the child being in the most satisfactory state.

INQUEST AT FARNHAM.

To the Editor of THE LANCET.

Sir, -- The details of the subjoined care will go farther to prove the necessity for the appointment of medical coroners, than any which I have yet known to be brought be-fore the public. The verdict delivered was "Accidental Poisoning," and nux vomica was the poison sworn to have caused the fatal result. The medical evidence and a general outline of the inquest I transmit for publication, well assured that the pages of THE LANCET will be open to the insertion of facts of so much general importance, especially as the character of a respectable medical evidence having guided the coroner and jury in the delivery of the charge and the verdict. No other channel offers to clear the person on whom odium is attempted to be cast (the local opportunity being bermetically scaled), and he here, therefore, bogs to challenge those opinions which can decide the question at issue. The In the month of September last, M. AMCS- details are given from memory, for on ap-

On Thursday, the 8th

and was followed by sickness, the stomach into the justice of the allegations. I saw doubtless rejecting it from previous disorder; the parents of the child, and then for the noting having passed the howels, and the first time it was discovered, that Mr. Bary a surgeon of the town, was called in. He knowing the serious consequences of such a found the child in a state of coma, with very general impression, I advised him by all contracted pupils, and at first sight pro- means to adopt the most strenuous meanounced the child to be poisoned. He at sures to clear himself from so unhappy a he did so. On the Friday it died.

fied the holding of an inquest, Mr. Bury since been refused on the ground I have having previously opened the body and head named. The question of the propriety of a to illustrate and establish the fact. A copy druggist prescribing for a sick person is not of the exact words of the evidence having for me to determine. The proceeding had been refused, I can only state the sub-already taken place, and my desire is to esstance; and as the material part is the post-; tablish the impossibility of the powder given mortem examination, I give it as read to by Mr. Postello having poisoned the child.

me, waiving the phraseology.

healthy, but with rather an undue quantity that a medicine given for a specific object, of water in the rentricles. His researches and fulfilling its design, and taken on a Sunwere then transferred to the body, where he day morning, could be found in the dead found the lungs and heart and the abdomi- child's stomach on the Friday merning. As nal viscera healthy, excepting the stomach, to the accuracy of the mode of determining in which he found a payder, which he see the poison adopted by Mr. Bury, or its incured by a process, which he specified, and compatibility with the appearances found in drug, he mixed it with the fluid of the cto-jevery reflecting mind to decide whether the much, tasted the suspected and the real, and powder so found, could be the powder given was satisfied that nux vomice had killed by Mr. Postello. Both the father and mothe child. It did not appear in evidence ther declared, that the child became sick, which of the two he had tasted first, nor very sick, from the medicine given by Mr. how long a period there was between tast. Bory, and that it was much convulsed after how long a period there was between tast-ing the true article, and the supposititious taking it. Now the ways of Providence are the nature of the poison, he stated that being and criminal carelessness. Mr. Posstance of his medical evidence.

remote from each other, and shown to be the fact on

viate which latter sympton we be the individuals who had called on him aperiont powders. (In the course of Mr. about the child. The verdict was returned, Postello's examination he stated his entire and Mr. P., not by direct charge, but by inforgetfulness of this circumstance; but that
the man and woman had applied to him was
distinctly proved in the evidence). The figet
of the child, and this too even by one
distinctly proved in the evidence. The figet
of the jurymen. On the Sunday following,
powder was given on the Friday morning,
the sent for me, and begged me to inquire child becoming more drowsy and insensible had binself given it medicines; and from the on the Sunday morning, the state powder woman I learnt, as well as from the father, was given. Its effects were four stools, and that the effect of Mr. Postello's powder was no sickness. Nothing further was attempted precisely that which was intended. Mr. P. for its relief until Thursday, when Mr. Bury, having entrusted his case to me, and well tended it up to Friday, and as the coroner suspicion. We went to the coroner, who also declared to me, administered medicine, feelingly expressed his sincere regret, and although it was not stated in evidence that viewed the case in the most serious light, promising Mr. Postello to give him, if possi-The rumour of a case of poisoning justi- ble, a copy of the evidence; but this has I believe that no reasonable man, certainly Mr. Bury stated that he found the brain no medical man, will assent to the allegation, instantly adjudged it to be mix vonica. He stated that as no analytic test could estate which the child was admitted to have possiblish its identity, he depended on analogy; sessed for the nine days previous to the fatal and having procured some of the recent event. I have nothing to say. I appeal to Having thus satisfied himself as to indeed mysterious, for the clucidation of there were traces of inflammation of the tello's medicine, after operating four times, coats of the stomach. This closed the sub-six days before, must, to have so poisoned the child as Mr. Bury imagined, have tra-It appears that Mr. Postello had forgotten versed back, as a purgative, many feet of every thing connected with the dispensing bowels, to reach the dead child's stomach, of the medicines; but the local situation in and then maintained its position in defiance his shop of a jalap preparation which he used of the vomiting produced by Mr. Bury's voncica was found; found by Mr. Bury. All I seek to prove is, that Mr. Postello was not he inquest. In the rou- the instrument of its introduction there, bridges, it is possible either directly or indirectly. But why do I argue for a conclusion that must be inevi-dr. Possible falled to remem-table? This inferential mode of destroying

a character, is sad indeed. Had Mr. Postello been provided with a competent medical friend at the inquest, the coroner and jury, if they had believed the child to be poisoned would never have suspected Mr. Postello of the act, and that the coroner had that impression on the inquest I can positively assert. A hundred times better would it have been for Mr. Postello to have been committed for the crime of poisoning at once; he might then have cleared himself on his trial, in the minds of his townsmen, from what has excited, and is calculated now to continue to excite, distrust. But this inquest is final, and although to clear Mr. Postello every fair proposition has been made, especially that of strict inquiry by a select body of medical men, the appeal has been contemptuously rejected, and a threat of action even hinted at, if he perseveres in the demand. The coroner, Mr. Woods, is in every sense a gentleman, and was most auxious that the character of Mr. Postello should be cleared; but the only resource now is the public press; and to your journal he appeals, as to the most honest of medical periodicals. With respect to my position in the affair, Mr. Postello having thrown himself in the emergency on me, I cannot allow the facts to be smothered.

That medical knowledge in a coroner is a most essential requisite for the good both of the public and of individuals, must be too obvious from the history of this case, to need further exposition from me. I remain, Sir, your most obedient servant,

G. V. Rogers, Surg. Farnham, Surrey, Oct. 26th, 1835.

P.S. The mother was found by Mr. Bury in a state of extreme intoxication, when he first visited the child.

THE LANCET.

London, Saturday, November 14, 1835.

A FACT which is most happily characteristic of the hole-and-corner proceedings in the College of Surgeons, has just been presented to the profession in the election of a new member into the Council. We ought, in truth, to make some distinction between the two last elections, referring specifically to the first of them as furnishing the best evidence of the event to which we allude. Mr. GREEN, of St. Thomas's Hospital, was not chosen the other day by the self-perpetuating junto, but was, positively, elected

some many three, on the resignation of Mr. Lynn; and yet so secretly, so covertly, and—we may in justice, state, with reference to the great body of the members—so clandestinely, that it was not known up to this very week, to the profession in the metropolis, that Mr. Green had becor a member of the Council; and, in reality, the circumstance is now for the first time published to the profession generally.

What a state of things is this! And yet this system of secrecy has been endured by the medical community since the barbersurgeous were first erected into a corporation! Even the charter of 1800, under the authority of which these odious secret elections were conducted, was merely, in spirit and in letter, an emanation from the Act of the 18th of Gronge II. It was not, therefore, Mr. GREEN who was chosen in consequence of the vacancy which was caused by the death of Sir WILLIAM BLIZARD, but Mr. CALLAWAY, the Assistant-surgeon of Guy's Hospital. Although, therefore, we were wrong with respect to the name of the gentleman who was last week stated by us to have been elected, still, so undeviating is the College in showing its unjust and pernicious pertiality towards the surgeons who are connected with the hospitals of this metropolis, that not a little of our argument was inapplicable to the occasion. If Mr. KINGDON and hundreds of others had not been turned aside to give place to Mr. GREEN of St. Thomas's Hospital, they were made to yield to the preference which was shown for Mr. CALLAWAY of Guy's Hospilal. To such a barefaced and scandalous extent is this practice of choosing the hospital surgeons carried, to the exclusion of other gentlemen of acknowledged attainments, abilities, and industry, in the profession, that out of the twenty-one Councillors who at the present moment the College, the enormous teen are holding office

hospitals of this metro

conferring in conclude in the

students who belong to their own institute Mr. BRANSBY COOPER. Who is the assist-I tions as well as for the government of the will surgeon of that institution? Mr. Thogentlemen who are connected with the private schools. Seventeen out of the twentyone Councillors belong to the "recognised" hos, tals. What an astounding fact!

In defiance, however, of these circumstances, the members of the Council bave the effrontery to contend, that when a vacancy occurs, they elect the new member according to the seniority of his standing in the list of the commonalty. The gross and daring falsity of this assertion is evident from throwing into contrast the few hospital surgeons, with the many thousands of the medical commonalty who hold no situations in our public medical establishments. If it be a system of "seniority" or of "rote," let us see with what henesty it has worked:-

In London, and within a circle of ten ' miles around the capital, it has been calculated that there are nearly, if not quite, a thousand resident members. How happens it, then, if the rule of seniority be observed in taking the names as they stand upon the list, that a moiety of the entire body of the surgeons and assistant-surgeons of our hospitals should be scated in the Council at one time, and only four be selected from the remaining nine hundred and sixty-six members? These numerical facts are so damnatory to the electoral proceedings of the Council, that it is unnecessary to expatiate on the infamous partiality which has been shown towards particular individuals and institutions. On some occasions, it is quite evident that the names of hundreds of memers must be passed over at a single elecon, in order to reach that of an hospital argeon, and having arrived at persons onnected with their own institutions, segity is then allowed to exercise its full guiding the decisions of the

ion to the choice

their regulations for the government of the Mr. ASTON KEY, Mr. JOHN MORGAN, and MAS CALLAWAY. How many of the four occupy seats in the Council? Only one. Who is that individual? THOMAS CALLAway, the assistant surgeon. In this election, therefore, the practice of election according to seniority has been observed, Mr. CALLAWAY being the senior member of the College.

> This exposition will lead many persons to inquire, how it has happened that the three surgeons of the hospital, who are Mr. CAL-LAWAY's juniors in professional standing, occupy a higher station than himself, when it is well known that the whole four were the apprentices of the former surgeon of Guy's Hospital. Adequate information on this subject can only be furnished by our ancient friend King HAR-RISON; but it is a well-known fact that on the election of Messrs. KEY and MORGAN, a scandalous attempt was made to nullify the claims and pretensions of Mr. Callaway, and, subsequently, when Mr. B. Cooper was chosen, having served an apprenticeship there to render himself "eligible," after he had acted as an assistant-surgeon in the army, the office of assistant-surgeon in Guy's Hospital was then, for the first time, created. Mr. Callaway received it, and the emolament, it was hoped, would operate as hush-money on the mind and tongue of that gentleman. We apprehend that the wilv treasurer was successful in his project, and it is now sufficiently obvious that the scheme was by no means an unfortunate one for Mr. CALLAWAY. Had that gentleman been excluded,-had he, through the instrumentality of calumny or intrigue, been cut off permanently from all official connection with Guy's Hospital, -is there a man in the profession who will not believe that such a circumstance would have been made by the majority of the Council in Lincoln's Inn Fields, the ground-work for one of Guy's Hospital? visiting upon him a continuance of the

persecution; but Mr. Callaway having But did not the Council know that he had become the assistant-surgeon of Guy's Hos- gone through all the routine of academic pital, the Councillors of the College lead costs and charges, and that as they could over the heads of some two or three hin- not expect that he would then pay any fees, dred members of the commonalty, for the as a pupil, in the hospital schools of London, purpose of bestowing upon that gentleman it was evident that they would extract notheir smiling and corrupt partiality. Far be thing from his pockets if they did not obtain it from us to deny that the Council have a the twenty-two guineas for the diploma? It legal right to act as they have done. The was a god send to the Council, as it could charter has conferred upon them an odious not be pleasant to them that a gentleman power, and odiously do they exercise it, who had been an interne of the Hotel Dien Ignorance gave them a bad law, and they should practise in London as a surgeon, have perseveringly resolved that its pro- without being a member of the College; and visions shall always be executed with cu- yet Mr. King considered that the circumpidity. There are, however, some members stance of his having an opportunity afforded of the College, -no, we mistake, -there is him by the Council, of fooling away twentyone member of the College, who says that two pounds, and throwing the money into " it cannot be denied that the changes made their pockets, was " a mark of their increas-" of late years by the Council have been ing justice and liberality." " marked by increasing justice and libe-" rality; and, to revert to the case in ques- is equally peculiar in his notions of justice . "tion" (the admission of Mr. King to an with respect to the administration of affairs examination for the diploma), " the Council in the College and the University. In the " in that case acted upon principles more one case the writer tries to test the conduct "liberal than the charter itself seems to of the rulers at the head of the collegiate " have prescribed." This language we quote institution, by reference to the terms of the from the letter of Mr. King, which appeared charter. In the other instance he makes no in THE LANCET of September the 26th, the mention whatever of the deed of settlement. first Number of the current annual volumes. but relies on the speeches and professions of The introduction of seventeen hospital sur- individual proprietors, who were amongst whole twenty-one having been selected Mr. King is for the concours in medical apof increasing justice and liberality."

for referring to the attempt which was made Why, The LANCET advocated the concours by Mr. King, in the letter already cited, to long before Mr. King took up his residence draw a contrast between the proceedings of in London! This was the first journal that the London University and the College of called upon the Council of the University to Surgeons, more especially as related to the electits professors by concours, -- by compeelection of professors in the former esta- tition, or wrangling. A similar call has reblishment, and the admission of candidates peatedly been made by us on the Co to an examination for the diploma in the the College of Surgeons,

Mr. King is of opinion, that the College ture, praying that made a display of "liberality" in his own fession generally, might case, in admitting him to an examination. in all medical elections,

Extraordinary as is this opinion, Mr. KING geons into a Council of twenty-one, the the earliest supporters of the University. from amongst upwards of 6000 members pointments; and in a note which was inof the College, furnishes a beautiful "mark screed in THE LANCET of Oct. the 19th, professes to be glad that THE LANCET is" be-This may not be an inopportune moment ginning to advocate the election by concours." since we joined in

When the Council of th members of society, and that the literary wholly centred in Oxford and Cambridge, a national calamity. The most extreme caution, therefore, on the part of the conductors was demanded, not only in the election of professors, but in the arrangement of every circumstance which was calculated to affect the permanent interests of the es-Conneil for having endeavoured, at the opening of the institution, to present to the public a phalanx of professors who had already acquired a certain extent of reputation, and had won, by their displays of industry and talent, a considerable share of the public confidence? The concours had not been tried in England; it was not understood here; and men of intelligence and reflection will allow that the Council were warranted in not attempting to sustain the experiment of establishing the University by the institution of what was to them

the successful compe-

del minds and qualifications of the candidates clined to elect by the open system of con- are tested by appropriate measures. This cours, we were not insensible to the force of is a symbol of what is to follow. As the reasons which induced them to elect the chairs become vacant, and as the their professors in private, and under the University maintains its hold on public authority of such information, regarding the opinion, there cannot be a doubt that the car 'idates, as they were able to obtain from Council will open the professorships to the public and private sources. The University medical community, and confer the vacant was altogether a new institution; it was an effices on the most successful of the wrangexperiment on the public mind. Owing to lers. But there is a wide difference between the liberal principles on which it was sought electing gentlemen in the slow succession to be established, all the host of bigots and arising from individual vacancies in the refanatics of the day vomited forth their spective departments of an institution, and calumnies against it, and endeavoured to starting, at the very outset, with an entire overshadow the prospects of its conductors, body of unknown men, who, nevertheless, It was felt, therefore, by every person who may have obtained their offices by concours. was desirous that the spirit of the age should. In the College of Surgeons the case is he liberalized, that a knowledge of science wholly different, and nothing can be more should be more widely diffused anongst the scandalous than the system of election in that establishment, -nothing more disgracereputation of the country ought not to be ful than the absence of open competition in filling vacant seats in the Council. The that the failure of the University would be charter neither stipulates nor interdicts, relative to the elections, further than by declaring that the Councillors are always to be selected from the commonalty. In conformity, therefore, with the liberal spirit of the charter, the Council were bound by their duty to the profession and the public, to tablishment. Who, then, shall blame the select the best-informed menthey could find among the members at large, and no proof of qualification could be presented equal to that which is derived from an exhibition in a concours. In neglecting such a fair and open trial for competitors, the Council have degraded the character of the institution: and, further, as the executive governors of a College of Surgeons, they have long forfeited every claim to the slightest share of the public confidence.

INSTEAD of furnishing proof of the truth experiment, the concours. But the of his base and slanderons allegation against netition has commenced, the the Editor of this journal, Mr. DERMOTT has confers the office of forwarded to us five folio pages of what he calls an "explanation." That part of his Chamination, where the communication which refers to the accusation that was so distinctly made in his paper in the Morning Advertiser, we here inserts verbatim:—

" But to the point at issue, I certainly did make use of the following words- Besides, ' Dr. Plausable had now by these means (his conversaziones) extended and improved
 his connections vastly amongst the governors of a neighbouring hospital, a vacancy for a physician occurred and I need hardly state that his parties ensured him ' success. He now sends occasional letters ' to THE LANCET, which it is scarcely necessary to state are always inserted and "well displayed." For let me tell you, gentlemen, that it is very seldom indeed, unless under ' some most peculiar circumstances, that a persons " communication" is refused provided he has plenty of the essential heavy metal.* This is a very weighty reason with many Editors; provided too the com-' municant drives his carriage, keeps a good establishment and is therefore considered as a most respectable and influential member of society. In a just state of society, &c.'

"Looking at the paragraph, at what precedes it, and what follows, as reported in the Morning Advertiser, it will be seen, in the first place, that I was speaking of the evit tendency of money upon society in general and stretch the signification as much as yon please, you cannot therein show that I literally state that you have taken a bribe direct."

As George Darby Dermott has here made a clear and distinct confession of his guilt, we leave him to eschew the happy consequences of his own malignity and folly.

A word to the Editor of the Morning Advertiser. On the 20th of July last, the annual "Cartwright Dinner" was held at the Highbury-Barn Tavern, Islington, Mr. WAKLEY in the Chair. On the following morning a few sentences of a report of the proceedings at the dinner were published in the Morning Advertiser. It was therein stated, as a part of a speech made by Mr. WAKLEY, that he had said in his notice of the public press, "that the Morning Advertiser newspaper had neither scope, space, "nor talent, to espouse the cause of the peo-"ple efficiently."

of the paper there auseared an editorial comment, in which Mr. WAKLEY was called upon, under a threat, to explain whether he had or had not used these words. The threat was, of course, regarded by Mr. WAKLEY as an invocation to silence. Had there been no menace, he would most cheerfully have stated that he did not utter one word or syllable injurious to the character of the Morning Advertiser. On the contrary, he most distinctly and unequivocally declared that of all the morning papers the Morning Advertiser advocated, on the broadest and most liberal basis, the rights of the mass of the people. In fact, the editor of the Advertiser was imposed upon, on that occasion, by a tissue of infamous falsehoods. Mr. BARCLAY, late candidate for the representation of York, and other gentlemen, addressed letters to the Advertiser, showing the inaccuracy of the statements in the report, and the Editor of the True San, who was at the dinner, gave a report of the proceedings at variance with that which appeared in the Morning Adrerliser, that gentleman even offered his own personal testimony in proof of the fallacy of the calumnious statement. But there was one person who wrote to the Advertiser. affirming the accuracy of the words which had, in the first instance, been attributed to Mr. WARLEY. That person was George DARBY DERMOTT, whose feelings towards THE LANCET have, for some time past, been those of bitter comity, from his entertaining an opinion that his labours, as an author and a draftsman, were slighted by that journal. This was the witness.

journal. This was the witness.

The editor of the Morning Advertiser ought now to be convinced that he acted very harshly, if not unjustly, towards Mr. Wakkey on that occasion. But it is quite true that a reformer, or the conductor of a journal, who pursues his course honestly and independently, cannot, by any possible false imputations; but, if he his course in utter defined all ander, the laborations of as we to the product.

These words were printed in Italics in the Morning Advertiser. - Ev. L.

In publishing the letter the present number of THE LANCET, giving an account of an inquest which has recently been held at Farnham, we should violate our own sense of justice and propriety, if were to refrain from stating that Mr. Postello does not appear to have incurred the slightest degree of culpability in connection with the decease of the child. In short, there is not a tittle of evidence in proof that the child was poisoned. Certainly the powder which was administered on the Sunday morning, was not the cause of death by poisoning on the following Thursday, and was assuredly not that which was found in the stomach of the deceased at the nostmartem examination on the following day. Mr. Postello is entirely exonerated from blame, and it is an act of malicious cruelty to make him the object of suspicion or reproach on an occasion in which his conduct is wholly blameless.

CREOSOTE is now enjoying in London the vogue which it possessed one or two years ago in Paris, and, at an carlier period than that, in Germany. The various experiments made with this new remedy, and the different opinions prevailing with regard to its medicinal powers, induced the Royal Academy of Medicine in Paris to appoint a commission of its members, with a view of examining the several memoirs addressed to the Academy on this subject, and of performing for themselves experiments with this highly extolled substance. These trials have been concluded, and in a report on the therapentic properties of creosote, made by M. MAR-TIN SOLON, on the 6th of October last, on behalf of the commission, it is stated that they do not at all confirm the character for success given to it by most of the authors who have written upon creosote. The coman, therefore, are inclined to believe, peutic powers have been very but their investigations

> scovery of its use for the anatomical preparations.

portion of epiploon, a por-

is like i placed in a jar containing a weak solution GERS, which will be found at page 256 creosote, in order to test its quality in this respect. The jar remained in the aniphitheatre of the Hopital Beaujon, from the month of August last until the presentation of the report, when the preparations were still in a state sufficiently good to give an exact idea of the organs themselves, and the lesions by which they were affected. The commission concludes by stating, "that creosote, a substance very remarkable in a chemical point of view, has a peculiar action on albumine, which it congulates very quickly; that it has an exciting action on the economy, but is not more efficacious than other means which we already possess : and, finally, that, dissolved in water, it may serve for the preservation of anatomical preparations.'

> On the report being read, M. ANDRAL junior remarked, that he had made numerous experiments with creosote, without ohtaining satisfactory results. He said he had tried it in pulmonary phthisis, in cancer of the uterus, and in the various forms of leucorrhess. In eighteen cases of pulmonary consumption, neither the cough, nor the diarrhora, nor any other of the symptoms, was alleviated by its use. In cancer of the uterus, when used in the form of injection, it acted simply like any other astringent. M. EMERY, in addition to this, said that he had employed this substance in various cutaneous affections, and generally with the effect of exasperating the disease. M. VEL-PEAC also spoke on the subject, and stated that he had tried it two years ago as an external application to cancerous, scrofulous, and syphilitic ulcers. He observed that he regarded creosote as an excitant. and even as slightly caustic, but he considers the nitrates of silver, of mercury, and some other such substances, as much superior in remedial efficacy. Some of our medical brethren on this side of the channel. hold a very different faith from the general creed of the French commission.

DUPUYTREN'S MUSEUM.

THIS museum, which with much greater propriety might have borne the name of ORFILA than that of the great surgeon whose bust is placed over the entrance, was maratlana, were thrown open to the public on the 2nd day of

this month. It occupies the small gothic church which was formerly attached to the old convent des Cordeliers, which, like so many other buildings in France, has passed from the service of the church to that of the state. It seems strange enough, as one of our contemporaries has observed, that visitors should enter a museum of anatomy through the door of a Catholic church, but anomalies of this kind are so frequent in France, that the morale of the circumstance does not seem to affect or disquiet even the most steady advocates of "the present order of things." In fact, we know not where a better study of a true creed could be found, than among such exquisite evidences formation. Here, indeed, men have "reation of the Society this evening sons for the faith that is within them." We shall defer anything like a detailed description of this establishment, until a catalogue is published, and the presses are somewhat better garnished. The creation of a few Tile decease of this gentleman was an entropolitan physician. months, "Dapuytren's Museum" is, of nounced by Dr. James Johnson, in the subcourse, at present very incomplete. It con-by remarks from several members, occurtains, however, already, about 1500 prepara-ring in the order in which we now proceed tions, which are labelled with care, and to report them. arranged in a manner well calculated to facilitate their study. The greater part of had occurred within the last few days in a of the Faculty, and are highly interesting, as numbers of them refer to the "Memoirs" of speak, as were many of the qualities which the old Academy of Surgery; the rest have would render his loss severely felt. been prepared by the young anatomists of facility with which he communicated his the school. The establishment of the mu-ideas, the fertility of his imagination, the seum reflects the highest credit on the zeal brilliancy of his wit, and the poignancy of and perseverance of M. ORFILA, to whose exertions alone the medical public of Paris are indebted for an opportunity of studying good-nature was cager to heal. On Tuesthe various morbid alterations to which the human body is subject, in the most complete manner. Should the zeal of the dean be seconded, even feebly, by the different hospital surgeons or physicians, the Music Dupuytren may soon hope to rival or surpass any similar establishment in Europe.

HUPELAND'S ELIXIR.

Formula for a very efficacious Anti-catarrhal Elixir .- In the obstinate and frequently distressing cough which remains after the influenza, as well as in other chronic and catarrhal coughs, the celebrated German physician HUFELAND has found the following mixture of the greatest benefit :--

Extract. Card. Bened. 5j; Dulcamar. 9); Aque Fenic. 3); Lauroceras 5), M. 60 drops four times a-day. Under the lauroceras of this mixture the cough diminishes in a few days and disappears. The author has also found it useful at the beginning of consumptive cough, supervening on common catarrh.

WESTMINSTER MEDICAL SOCIETY.

Saturday, Nov. 7th, 1835.

Dr. Apprson in the Chair.

DEATH OF SIR D. BARRY.

Amongst other subjects which engaged

Dr. Johnson said the death of Dr. Barry his satice, were all equally remembered; though he might add, with regard to the latter, that whomsoever he wounded his day last, Sir David dined out in perfect health. After dinner he ate three pears and some nuts, and in the evening some cake. which he did not relish; afterwards he felt an uncomfortable weight about the chest. On the following day, on his way to the city, through the Haymarket, he was suddenly seized with excraciating pain in the stomach and loins, and faintness, and felt assured that he was dying. He (Dr. J.) was sent for, but being from home, his son attended, who found Sir David pale, chilly, and with the aspect of a person who had sustained a severe accident. Sir David was conveyed home, and at one ping, same day he was visited by

when he was still chilly, action had commenced bad, and was beginning toped. Sir David considered the sence of indigestible matter, and L) denurred to prescribe this but Sir David primers after Sir David's death, he hesiurged its administration. Hereby, J reasoned with his patienties the tripect, point ing out that as the indigestible substance blanched, and that it was impossible by had been swallowed fifteen or sixteen hours since, without doubt it had passed the pylo- them with blood; the same phenomenon ric orifice of the stomach, and that an eme-tic would occasion considerable pain and dicating death from hemorrhage, therefore inconvenience. He therefore wished to nothing was attempted at this period to be prescribe four grains of caloniel, and one of done in the way of treatment. opinm. To this Sir David acceded, and he was directed to be kept warm in bed, and whether there was any valvular disease to have hot cloths applied to the stomach. existing. (The answer was in the negative.) At his next visit, two hours afterwards, he found his patient relieved, and more coming the (Mr. S.'s) father had died from sympposed, his skin was warm and moist. A warm toms very similar to those affecting Sir aperient was prescribed, and as it had not David, and in his case valvular disease exsufficiently operated at eight p.m., an enema isted, and was recognizable during life, was injected, which produced copious evacuation for the resided at Claphani, and retired tions. Between the time of prescribing the to-bed one day as well as usual; presently aperient and administering the injection, after he was heard to fall on the floor; on Sir David felt better; his pulse had become being found and placed in bed, he could not better, and no symptom was present, indi- articulate; the pulse of each wrist was differcating that his end was so near; nor did Dr. ent in its beat from that of its fellow. He Copland, who saw him, consider his life to (Mr.S.) arrived at seven p.m., at about four be in danger at half-past ten p.m., he re- hours and a half from the attack; the power mained quiet until one p.m., when suddenly of atterance was still absent, but the patient he expired, after getting out of bed. He was evidently conscious. At midnight he was in the fifty-sixth year of his age. The died suddenly, apparently while awaking post-mortem examination was performed on from a quiet sleep. On the following day the following Friday evening by Mr. H. the body was examined, when no dis ase Johnson. On laying open the abdominal was discovered in the abdomen; but in the coverings, remarkable layers of fat were ichest, one to two pounds weight of clotted found between them and the peritoneum; blood was seen, and a large quantity of blood the stomach and intestines were empty, had made its way into the posterior medias- and exhibited no traces of disease. On timum. making an incision into the right side of. Mr. H. Johnson offered to describe the the fatal result.

would be removed by an emeter Level present. When he (Dr. C.) arrived, a few

Mr. STREETER inquired of Dr. Johnson

the chest, an immense quantity of clear condition of Sir David when he first saw serum burst forth, but he Dr. J. was not him. He found him sitting with his hand a little astonished at finding the left side of on the epigastrium, the seat of agonizing the chest filled with water, and five pints of suffering. Sir David at once argently re-blood effused into the cavity of the chest, quested that an emetic should be adminisan ancurysm of the descending thoracies tered, but with this request he did not comnorta being discovered, of the size of an ply; an opinion against it also was mainorange, which had burst into the posterior tained by his seniors on their attending, the mediastinum. The left ventricle of the impropriety of the step being also since heart was hypertrophicd, and found to be sanctioned by the ascertained condition of upwards of an inch in thickness. On re-the sufferer. He was then cold, the lips fleeting on the matter, now that Sir David's; were blue, the pulse was small, the countesufferings and the cause of his death were nance portrayed intense anxiety and sufferascertained, he (Dr. J.) was extremely glad; ing. and Sir David felt convinced that he that he had insisted on the impropriety of should die. The morbid appearances were using an emetic, for had it been taken, those detailed by Dr. Johnson. He (Mr.J.) death must evidently have occurred during believed that anonysm of the thoracic aorta its action; and if an examination had not was extremely difficult to detect, and that been permitted, it would have been ex even the most claborate medical inquirers tremely difficult to account satisfactorily for had admitted that fact. Dr. Green, it atal result.

Was true, had, in an able article in the COPLAND said that he had but little Dublin Journal, arrived at the conclusion particulars. When he was that the morbid condition could be predid Sir David still expressing cated, yet the indications amounted in his Lan emetic, but not con- opinion to little more than a series of guesshe required he (Dr. C.) ings. In rupture of the aorta into the is presulting on him to wait until pericardium, it was not generally considered addition at eight p.m., when Dr. that death must necessarily follow immeand Mr. M'intyre would also be diately after the accident, and in Sir D.wid Barry's case, several hours had elapsed between the accident and the termination of life.

Dr. CHOWNE said he was aware that Sir David Barry was impressed with the idea that he laboured under an affection of the heart. Was Sir David of the same opinion during the present attack?

Dr. Johnson replied that about four years ago Sir David called on him, and requested that he would examine his chest with the stethoscope, as he (Sir David) feared that his heart was affected; but at that time no disease could be detected, although it was not impossible that the hypertrophied condition of the right ventricle had already commenced. As Sir David was inclined to be stout, and one who might justly be termed a bon-rirant, though not irregular in his habits, he (Dr. J.) recontmended him to live rather more abstemiously. The circumstances of the sudden death of a Dr. B .-- were recalled to his mind on the present occasion. The doctor was rather an invalid, and he (Dr. J.) called to see bim in the evening, when he found him taking his wine. He (Dr. J.) sat with him for about half an hour, when, all at once, without any evident cause, Dr. B. complained of pain in the head and stomach, and turned pale. Presuming that the the stomach and back with increased inof blood was found effused from the rapture from its employment. of an aneurysm, which no doubt burst when he (Dr. J.) was first sitting with him, and the faintness induced, arrested the hemorrhage, but at last the gush was too large to be thus checked, and death followed.

Mr. Costello related the case of a young gentleman who was brought into the Hotel Dieu, under the care of Dupaytren; who had, while fencing, the point of a dagger thrust through the pericardium, which corroborated the opinion, and in great measure served to lay the dispute that had long existed, whether such injuries were fatal or not. Dupuytren maintained that they were not always followed immediately by death.

A few other remarks followed, and then the subject dropped. The other discussions of the evening, as well as those of some other societies, shall find a place in our next number.

THE Medico Chirurgical Society held its first meeting for the present session, on Tuesday evening last. A report of the proceedings shall be given in the next LANCET. MEDICO-BOTANICAL SOCIET 1.

ar 10th, 1835.

EARL STANHOPE, President, in the Chair.

THIS being the first night of the session, on the President taking the Chair, an ... !dress of congratulation on his return to England after a long absence was read. lordship, in returning thanks, ascared the Society that he felt most anxious for its success, and that he should devote much of his time to promote its welfare, both from his love for botanical science, and from the great respect he felt for the medical profession.

Dr. Sigmond then read an eulogium on the late Mr. Gilbert Burnett, which was ordered to be entered on the minutes of the Society.

Mr. Jounson read an address introductory to the opening of the session, pointing out the advantages which had resulted from the study of botany, by contrasting the present objects parsued in medical education

with its state many years since.

A paper by M. Gramon was next read, on the application of the juice of the Manchineel tree in cancerous diseases. The doctor was fainting, he administered some remedy is to be brought into contact with brandy and water, which presently revived the esther alone; care being taken to pre-him, but, shortly after, the pain returned in cent its absorption at the edges, from which vert its absorption at the edges, from which the worst effects might follow. Its analogy tensity, and in a few hours after he died, to the action of arsenic induced M. G. to At the examination, a considerable quantity recommend the juice, and anticipate success

LONDON MEDICAL SOCIETY.

OBSERVATIONS BY DR. RAMSBOTHAM, ON EXTRA - UTERINE PETATIONS, AND ON THE TERMINATIONS OF THE CIERING VESSELS, IN CONNECTION WITH THE PLACENTA.

To the Editor of THE LANCET.

SIR, -- As you have noticed in the last number of your journal some remarks 1 made at the London Medical Society on a case of extra-aterine conception. I shall feel obliged by your correcting the following triffing inaccuracies into which your reporter has fallen.

I stated, -- not that there were corded five cases of extra-uterly but that I was only acqu reported in our language nterine fætus had been t that none of those cases had a Britain. The earliest is given by M

of Negis, W. I. (Fig. June 1697.) Mr. Bard of New York has. Jurnished one. (Med. Obs. and Jug. vol. 2, March 1760.) So bands. Dublin. (Med. Commentaries, vol. 2, part 1, 1774); in which instance the gestation was twin; and both fectuses were removed at the same time. We have another by Dr. M'Knight of I aw York. (Mem. Med. Soc. Lond. vol. 4); and a fifth by Mr. Baynham, Essex County Virginia. (Med. Facts and Obs. vol. 1,1791.) I might have added a sixth, which at that time escaped my recollection. (Philosoph. Trans. vol. 41, 1741), in which a butcher, named O'Neil, in the County Tvrone, Ireland, extracted by incision a feetus, whose elbow appeared through an ulcerated aperture in the abdominal parietes.

I mentioned also, as your reporter states, that I had personally known ten cases of extra uterine conception, besides the one! affirm what could not possibly happen, you will allow me also to correct him here. Four of the patients died from rupture of the sac, presume that Dr. Lee's opinion at the time as evidenced by dissection; three of these they were published was, that the aterine were tubal -- the most frequent form of all vessels, in connection with the placenta, the varieties, -- and the other parietal, or as terminated by open extremities. I am, Sir, the French call it, " interstitial," -- in which ! the ovum is lodged within that portion of the fallopian tube which traverses the parietes of the nterus. Three women died during the process of alceration, established for the purpose of getting rid of the putrid mass; and three have recovered, -two after the evacuation of the fortal body, piecemeal, per rection; and the last, who had the factus remaining within her when I last saw her having conceived about 20 years ago', and who has, to my knewledge borne three children since she h come the subject of this irregular species of gestation.

In noticing my remarks also on Dr. Lee's description of the connection between the uterus and placenta, your reporter asks in the apertures [described in the ateriue] vessels in communication with the placental are at their extremities?" It is true that Dr. Lee does not use the word "extremities," but in his paper on the connection between the nterus and placenta, published in the Philosophical Transactions, and reprinted in his essay on some of the diseases of women, we read (p. 203), "The semilunar or valvular-like edges of the vessels at their terminations in the inner surface of the uterus, are admirably adapted to ensure the effects of arresting the current "&c.; and in the letter from Mr. College of Surgeons, to him, has inserted in that paper is we may therefore fairly copts) we find the follow-every instance, the reached the inner surface of terminated in an onen month on

that aspect." "But with respect to the yolns, they invariably presented the same appearances, terminating in open semiciroflar orifices, which are closed by the apposition of the deciduous membrane, and placenta." Again: "The preparation which accompanies this letter shows the termination of a vein on the inner surface of the nterns, and an artery of the decidua cut through, with the corresponding appearances on the surface of the placenta

Dr. Nimmo's report, also embodied by Dr. Lee in his paper, is to the same effect. "These (uterine vessels), instead of passing directly into the placenta, are distinctly seen applying their open mouths to the membrane of the placenta;" and Dr. Lee himself states that "Mr. Broughton (after having re-examined the preparations on which Dr. Nimmo had previously made his observa-tions authorized him (Dr. Lee) to state to under consideration; but as he has made me the Royel Society that Dr. Nimmo's account was perfectly correct."

I think, from these quotations, we may your obedient servant,

FRANCIS II. RAMSBOTHAM. New Broad-street, Nov. 11, 1835.

COUNCILSHIP IN THE COLLEGE.

To the Editor of THE LANCET.

Sir, - Let Mr. Kingdon take all the benefit he desires from his "appeal" to the profession. "What's he to Hecuba, or Hecuba to him?" The Council of the College of Surgeons dishonestly exercise the power which they wield ;-to share this power Mr. a note, "Where does Dr. Lee state that Kingdon aspires, and bases his claim on the same pretensions as have been advanced and acted upon by all successful candidates for the usurpation, and he now grumbles that he is denied the power of riding roughshod over his fellow members, and demands their sympathy that the power is refused him! The members of the College have not shown all the spirit which their declarations in 1826 justified us to expect; but they surely will not weep with Mr. Kingdon, he having sought for office by recognising the unworthy principle which excludes from the Council the very men whose support he now supplicates. Let this gentleman show cause for the inconsistency which thus marks his conduct. I am, Sir, yours respectfully,

A MEMBER OF THE COLLEGE.

London, Nov. 5, 1835.

tive to the Middlesex Hospital.

wards of that institution, I felt surprised at with great prostration of the animal powers. the small number, comparatively speaking. She has been restricted to her bed, has had of students really belonging to the hospital. leeches applied over the stomach, and has From what cause, thought I, can the fact taken medicines. Prescribed, now, castor emanate? Can it be for want of scientific oil directly, and three grains of hydrargyemanate? Only to the source of the attraction of the attraction of the part of the attraction of the a then? The causes are to me summents or companies of statement statements with the causes are to me summers ticle is apparently pecking off; pulse very impossibility of witnessing operations. May small, feeble, and numbers 120; tongue hap, I shall render the latter point more intelligible by an illustration. I, accompanied pletely covered with a dark brown for. The by three other college students, went to the bowels have dejected three times. Ordered hospital, one day last week, with the view to have six ownres of wine and strong broth. of witnessing an interesting operation (the It is stated that if wine he not administered excision of a very large inguinal tumour, every hear, the patient must inevitably which proved to be medullary sarcoma , and sink, which was rendered more interesting from I ask, are students first to be sedured to at- have seven onnees of port win . tend that hospital, and then to be deprived. nay, robbed for it is nothing less; AND THAT WITH THE ASSENT OF THE MUDICAL AND SURGICAL STAFF, of a portion of the benefit supposed to accrue from their attendance, and for which privilege they have most amply remunerated the governors or functionaries of the instituion? In conclusion, Sir, I can confidently assert, that, so long as the officers so blindly pursue their present course, so long will the number of students continue to decrease. I am, Sir, your obedient servant,

A MEDICAL STUDENT. London, Oct. 26, 1835.

ST. BARTHOLOMEW'S HOSPITAL.

CONVALESCENCE FROM FEVER .- DEATH .-AUTOPSY.

MARY ANNE DOWLING, setat. 24, but sank so low, that her whose appearance rather indicated 40, was admitted into Mary's Ward, on the 2nd of tongue dry; in fact the July, under the care of Dr. Latham, On admitted worth. It will be considered to the care of Dr. Latham, On admitted constants. mission, her countenance was flushed, and to administer four ounces of b

MIDDLESEX HOSPITAL.

To the Editor of THE LANCET.

Sia, — Fully convinced that you are sharp, companied that you can be sharp to sharp the sharp companied that you can be sharp to sharp the sharp companied that you can be sharp to sharp the sharp companied that you can be sharp to sharp the sharp companied that you can be sharp to sharp the sharp companied that you have the sharp companied that you are sharp to sharp the sharp companied that you have the sharp companied that you are sharp to sharp the sharp companied that you have the sharp companied that you

your valuable and independent periodical perate. She has been indisposed for our the subsequent remarks on a subject rela- weeks, commencing with a bilious attack, to which succeeded rigors, pains in all her On my first perambulation through the limbs, severe pain in the epigastric region,

then! The causes are to me sufficiently ob- complains of still more exhaustion; the ca-

4. The night was passed without any the hypothesis, that the femoral artery and sleep, but no delorium was noticed; her asvein permeated the tumour; but so fat from pect and general appearance indicate yet seeing the operation, we could scarcely ob- more depression; the wine was increased to tain a sight of the patient, that part of the convinte absolute sinking; pulse 110, more theatre designed for the students having feeble; teeth covered with sordes; tongue been previously occupied with a very few moist, though enveloped in a thin brown exceptions by unrecognised students, -stu-for; three watery though fibrous evacuadeals totally unconnected with the hospital, tions were voided today. Let the head be This, Sir, is one case out of many; but, why, i shaved and a blister be applied, and let her

5. Passed an excludingly restless night. She presents the same languid and feeble appearance; pulse 104, with increased power; teeth covered with dark sordes; tongue white and moist. She turned from one side to the other this morning; bowels have excreted pretty freely; heat of skin somewhat diminished.

6. Tongue clean and quite moist; pulse 120, though very weak; requires wine, without which she appears to be quite life-

less; bowels not relieved to-day.

7. The ensemble augurs improvement, pulse 120, with augmented power. She was perfectly tranquil, without any delirium, during the night; tongue moist, with a for in the centre; her condition continues to demand the steady and frequent repetition of wine. The howels have evinced no action for two days. The pill to be omitted, and a dose of castor oil to be exhibite

8. During the afternoon

Contraction of

under which influence she ralked ; her skin last reportbecame warmer, her countered was flushed, and she passed a avourable night. A
solid and not unnatural evacuation has this
day been passed; tongue rather dusky. Inclining to brown in the centres, aspect not
very propitious; pulse 120, feeble; no eviden. delirium. Ordered eight ounces of
A sinapism to the abdomen. brandy and one grain of the sulphate of quinine every second bour.

and less furred; pulse still very feeble, as before. ducing a flushed countenance, and deter- wine and broth.

mination of blood to the head.

nance dejected; three dark watery evacu- and is unattended by any visible change in ations were voided during the night; the the condition of the limb; pulse stronger, first of these was tinged with blood. She from time to time, at different periods of the evinces to-day some tremour of the limbs; day. tongue moist; pulse 130, with decidedly less ! power; hears pressure over the whole abdo- for ten minutes, followed by great heat; men without exciting pain. Brandy ex-bowels telieved; other symptoms unalle-hibited every hour to prevent dissolution; viated. She has since manifested at one if wine be omitted longer than an hour, the time improvement; at another a decrived tongue becomes dry; apply a blister to the aggravation of all her symptoms. She has abdomen.

Passed a favourable night; aspect indicates an improvement; articulates with more power; teeth free from sordes; tongue moist, with a white fur, red at the tip and edges; bowels constricted; wine still persisted in; during the last four days she has taken a pint of wine and eight ounces of brandy in the space of twenty-four hours. Let her have a mixture consisting of twelve grains of the carbonate of aumonia and three ounces of camphor mixture; a tableappoinful to be taken every two hours.

15. Countenance more cheerful; rested better; pulse 120; bowels not relieved; perfect absence of pain in the head, chest, and abdomen: the wine and broth resorted to every hour; the brandy has been discontinued during the last twenty-four hours; the mixture was likewise rescinded after the and dose, on account of its exciting

gent progressive; stimuli prolonger intervals; has had deithy dejection; pulse very ling 120.

se and broth persisted in as before;

with water, in the short space of activer, for, but red at the tip and edges; pulse as in

17. Immediate relief succeeded to the application of the sinapism; sustains pressure 9. There has been no very remarkable without pain; the powder produced one dark degeneration of vital energy since yester-solid evacuation, anorexia; tongue still day; aspect ameliorated; tongue moister coated with white fur. Continue the wine

amounting to 120; the same quantity of 18. Slept tranquilly; evinces a brighter stimulus, resorted to at the same intervals, and more intelligent aspect; the frequency continues to be indispensable; the quinine of the circulation continues, with no aughas of necessity been omitted, after its mentation of its power. Abdomen remains third exhibition, in consequence of its pro- free from tenderness. Persist in the use of

Acute pain diffused through the right 10. Has had little or no sleep; counterarm, which appears increased by pressure,

19. Had a rigor in the night, which lasted occasionally been up and walking about the 11. Aspect improved, though her counte- ward, and then relapsing into the same denance is flushed; had no sleep; blister rose pressed state; but under the influence of well; stimuli administered every hour as be-imedical treatment in watching and minisfore, to prevent sinking; pulse 120, still very tering to her various symptoms as soon as feeble; tongue moist, furred, red at the tip they became evident, she continued to and sides. Three watery stools were passed, linger on, though spending a miserable existence, until the 12th of September, when death terminated her protracted sufferings.

Examination twenty-four hours post mortem.

The following phenomena were observed:-Head. Contents of the craning quite healthy. Thorax. The pleara were adherent; no serum could be discovered in either cavity; the lungs contained an unusual quantity of serum, and their texture was large and easily torn. The posterior portion of the inferior lobe was greatly congested. A quantity of fat was observed at the base of the heart, and about the origin of the larger vessels. Two ounces of straw-coloured fluid were detected in the bag of the pericardium. -Abdomen. The peritoneum was perfectly natural. The nucous membrane of the stomach was red with blood, but no ecchy-mosis was discerned. The small opening of the stomach was contracted. The duodenum was deeply injected; there were some circumscribed patches of vascularity in the small intestines, but not a vestige of ulceration nor any enlargement of any of the mucous glands was to be discovered. The inconfined; tongue covered with a white | ferior portion of the small intestines was of a deep-red colour; the cæcum and the commencement of the colon were of the colour of soot, dependent solely on the mucous membrane, which appearance was entirely removed on the separation of that tissue. The liver was mottled, and easily lacerated; the remaining viscers evidenced not the slightest appearance of diseased action having at any time disturbed their function.

venter of the left scapula, projecting about socket. Repeated applications of leeches purges, but as no benefit resulted from this 3rd of October he was conveyed into the marked that a fracture of the neck of the eased part, by an incision about seven inches sidered to be an interesting one, because it in length, along the base of the scapula, was attended with some symptoms resemwhich exposed the insertions of the muscles, bling those of dislocation of the humerus into that portion of the bone. These were downwards. The arm sinks, the shoulder then divided along the line of the first in- drops, the deltoid is flattened, and the elbow cision, and the tumour exposed. It ex- lowered. But the humerus can be readily tended forwards below the blade hone and the ribs. The operator then dissected location. The ellow is not drawn away round it, beginning on the surface which from the side, as in a dislocation, and the confronted the ribs, in which part it was humerus, after being raised, falls again on found to have advanced very considerably, and it was separated only with great difficulty follows the scapula, partly by the scalpel, and in part by the finger. The difficulty follows the finger to the coracoid process. which existed in this part of the operation. originated from the circumstance that very close contact subsisted between the tumour FROM THE BREAST.—Ann Price, a married and the bone, which at one part was de-woman, aged 36, was admitted, Oct. 22nd, nuded of its periosteum and rough. On the under the care of Mr. Cooper, with a turemoval of the tumour a very considerable mour situated below the left mammary cavity was exposed to view, the walls of gland, and towards the edge of the nectoral which exhibited the appearance of a large, muscle. It began to form six or seven which exhibited the appearance of a large, indiced. It began to folia six of seven thickened, whitish cyst. The wound was years ago, when of course her age was not slightly dressed, and slight pressure was employed on the scapula. The tumour was afterwards examined in the library, and its nature determined by Mr. Kiranan to be clines usually prescribed is fibro-albuminous. The case is doing well.

NORTH LONDON HOSPITAL.

CONCURSION OF THE BRAIN. -- FRACTURE OF THE NECK OF THE SCAPULA .- Jame Ricketts, aged 44, was admitted, Oct. 2 under the care of Mr. Cooper, in conse quence of a fall while painting the roof of a lofty room. The pupils were dilated, hi pulse was slow, and he was affected with FIBRO-ALBUMINOUS TUMOUR OF THE bleeding his pulse rose. On being brough BACK.—OPERATION.—James Jackson, witat. to the hospital he was partially insensible 55, was admitted under the care of Mr. but could be roused by questions put to Earle, on the 10th of September, with a bim in a loud tone of voice. The iri tumour which had existed about fourteen acted on exposure to light. Pulse 120 months, and occupied the hollow of the The head was kept in an elevated position and a cold spirituous lotion was applied to two inches beyond its base towards the the scalp; his bowels were opened with spine, where it exhibited itself in the form calonel and croton oil, followed by a mix calomel and croton oil, followed by a mix of a deep rounded swelling. He complained ture containing the liquor ammonia acetatis of an uneasiness from its existence, though sulphate of magnesia, and antimony wine the actual pain which he suffered was but On examination the neck of the acapult trifling. He could draw his arm forwards on was found to be fractured, - a kind of injury the chest, and backwards towards the spine, Mr. Cooper remarked, which was very without difficulty, and he possessed the casily detected through the medium of the entire power of rotation of the arm in its coracoid process. The arm was put up coracoid process. The arm was put up had been employed, with cold lotions and the elbow being at the same time well supported in a sling. This case went on very treatment, it was deemed requisite by Mr. favourably; the patient recovered the ful EARLE and his colleagues to remove the power of moving his tongue, and left the hosdisease by operation. Accordingly on the pital at his own request. Mr. Cooper retheatre and secured on the table, when Mr. scapula generally occurs through the notel EARLE commenced the excision of the dis- in its superior costs. The case he con-

> REMOVAL OF A SCIERHOUS TUMOUR mammary tumour, Mr. Cook ed the patient to have the pa with the knife. Accordingly, on t

was brought into the operating theore, when Mr. C open, assisted by Mr. Quarter and falled to obtain for their diligent friend two semicircular incisions through the indicated the vacant professorship of Mategian and inwards, one on each side of the distance of the institution cased mass, beginning with the lower one. He then detached the tumour from the surrounding comestions, and removed it give place to the public credit of the establishment. Dr. Paus, therefore, on the from the surface of the pecteral muscle, by lishment. Dr. Panis, therefore, on the ceased. In the axilla there is a small in-durated gland, not much larger than a pea, relish coming after Dr. Hawkins, which Mr. C. proposes to remove if the woman will consent to it. It is at present unite indolent, and has never given any pain. In removing diseased breasts and tumours Editor .- Sir, - Perhaps you will, through of this part, Mr. Coopen recommended the medium of your widely-circulated and the incisions to be made in the direction of the fibres of the pectoral muscle. The profession an easy method of administering lower incisions, he said, should be made electuaries, or any species of nauseous medifierst, because, otherwise, the bleeding from Brst, because, otherwise, the bleeding from the upper cut would obscure the parts a piece of confectioner's wafer, softening it below. The tumour should then be do trached from its connections all tound, and medicine therein. By this means the taste finally dissected from its subjacent con- cannot be offended by the most unpalatable nections, beginning from the angle of the compound. I first observed the practice on wound which is towards the avilla, and pro-the continent, and have since named it to receding downwards and forwards. The one or two practitioners, who have adopted chief bleeding is always from branches of it with much benefit to the patient. The the thoracic arteries on the external side of knowledge of this method, however, is at the wound. Sutures are for the most part present confined to but few. I am, Sir, unnecessary. Mr. Cooper thinks them disadvantageous, from becoming a source of Brompton, Nov. 4th, 1835. irritation, and sometimes an exciting cause of erysipelas. No operations, he added, were more frequently followed by secondary hemorrhage, than those of amoutation of the breast and removal of the testicle. When a breast of some magnitude has been removed, he recommends the application of a compress over it, with a broad piece of linen passed round the chest, capable of deed tight with packthroad, in the present the bleeding manded, as he knew, he

cutting from the axilla towards the stermun. score of his well-advertised name, was soli-Three or four strukts of the scalpel readily cited to accept the chair, but the old gentle-accomplished this separation. Two arteries man coquetted so long on the occasion, that having been secured, the wound was closed at length Dr. Webster, a physician to one with adhesive plaster, and a piece of linen of the metropolitan dispensaries, was applied was put round the chest. The arm to be to, and that gentleman is now delivering the kept quice in a sling. In some clinical observations on this case, Mr. Cooper observations on this case, Mr. Cooper observations on this case, Mr. Cooper observations of the college, and, we hear, with great satisfaction to the class, which, however, ance of being a true scirrhus, though the was not, in point of numbers, so tempting patient was only 36 years of age. The as to induce Dr. Paris to accede at once to fibrous septa between the light-coloured the proposition of the Council. We believe semi-transparent scirrhous matter, could be that Dr. Wenster will fulfil the duties of seen with the naked eye. This opinion was the office with diligence. He is a conscien-also corrobotated by the sharp, pricking those man, and will unquestionably do his also corronorated by the samp, proxing tools man, and will inquestionally to his lancinating pain which was almost con-best to instruct the pupils. Moreover, timily experienced in the part for some another change would yet more depress the considerable time before its removal. In fame of the College, and will be avoided, if this woman, however, menstruction had not possible. It is whispered, that in addition to

SOLID NAUSEOUS MEDICINES .- To the

Brompton, Nov. 4th, 1835.

CORRESPONDENTS.

A LETTER has been forwarded to us for publication, containing the signatures of a number of gentlemen who state that they are the pupils of Mr. DERMOTT. As the document is without either date or address. it may be a fabrication. If it be not, we may state that although we respect the motives and real of the subscribers, those gentlemen can scarcely expect that we should allow an odious accusation against

The letter of Humanitas on medical attendance in the North Arlesford Union, shall appear next week.

The note of G. M., if published in its pre- Mr. Educade will be inverted, the latter as soon as sent form, would be no voucher for the fact space will allow. The requests relating to a shall which the writer states. Our remarks, as which the writer states. Our remains the will perceive, applied to the hospitals. A Medical Student. The indentures mean As the fact stated by G. M. is one of some tioned would not be received. Proof of execution of As the fact stated by G. M. is one of some tioned would not be received. Proof of their loss, be be announced under the authority of the name of the lecturer. Shall the name and address be attached?

A report of Mr. Ellis's "reform" lecture has reached us, but not in time for publica- stances, be rejected. tion this week. A commentary on the report, or the report itself, shall appear in :

THE LANCET to be made the foundation of treet man advances from histotter), "I have a son, bestowing an eulogy on the calumniator is the columns of the slandered work.

We never undertake to preserve papers.

Articles not inserted are destroyed. The address of our cor

L. The lectures of Mr. Preston have nothing to do with medicine.

The communications of Mr. Cheyse and neither of them be forgotten.

If A Subscriber will read the original remarks, he will find that they defend a principle of high professional importance. Common justice required that the rest should not, under the cfreum-

the next Lancer.

An able professional Correspondent residing in the country says (and we here very will misprint for "pounding the bair, were a misprint for "pounding of leading to the bair, were a misprint for "pounding of lead".

METEOROLOGICAL REPORT.

(Extract from a Meleorological Journal kept at High Wycombe.

Lat. 51° 37' 41" North, Long. 31° 45" West.)

Days.	Thermometer.		Barometer.		Rain.		Weather.
Nov. 2 3 4 5 6	Highest. 46. 42. 38.75 38.75 42.75	41. 36.50 34.25 25.25	29.96 .81 .79 .71	29.88 .78 .75	0.4 0.175	E. S. E. E.	Day fine; rain evening & night. Frequent rain during the day. Dull and heavy, but no rain. Dull without rain.
7 8	44.50 46.25	31. 35.50	.74	.64	0.3	S.	Morning foggy, afterwards fine. Rained freely during the day. A fine seasonable day.

Observations for October.

Thermometer Highest 61.25 .. the 6th,

Lowest 28. .. the 18th, 19th, 21st, 27th, and 29th.

Marketon Cal

Mean 43.98588.

Barometer Highest 30.13 .. the 16th.

Lowest 28.63 .. the 10th.

Mean 29.49924.

Number of days of rain, 18. Quantity of rain in inches and decimals, 6.06875.

Winds .- 6 East; 3 West; 3 North; 5 South; 1 North-east; 1 South-east; 6 Southwest; 6 North-west.

So cold and wet an October has not occurred since 1823, and the rain exceeded what fell in Oct. 1823. Indeed so much rain has only once, viz. in July 1834, fallen, one month during the last twelve years and a half.—The maximum of the the was upwards of ten degrees below that of last October. The barometer since October 1824, as regards the mean; but the minimum was ex the like months of the years 1824 and 1825. A few days were fine the number of fine days was much less than the average.

Nov. 9, 1835.

THE LANCET.

LONDON, SATURDAY, NOVEMBER 21, 1935.

transference en en en en en

CLINICAL LEGIURE

ON CASES OF

DEFORMITY OF THE SPINE, PAINS IN THE HEAD, NECESTICE PAIN OF THE ATOMACK, AND COLE A PICTONUM.

Delicered in the Syssiem 1834-36.

By DR. ELLIOTSON.

The first case I shall notice to day, gentles within that distance she could move them men, is one of deformity of the spine, partly with the greatest readiness. Her comresulting from weakness, and partly from plexion was improving. On the 1st of Sepstrumous disease. The patient was a girl, tember she was much stronger, and her aged ten years, admitted on the 27th of complexion absolutely florid. Her appetite July. The account obtained from her was, was good, and she could now walk alone, that she had had a curvature of the spine as though she was unable to support herself long as she could remember. About eight en upright on her feet. This is an instance of months ago she began to complain of shoot- the great benefit that may be derived in cases ing pains in the right foot and leg, and soon of curvature of the spine from debility, by afterwards in the left. These were graduathe use of tonic measures, and, among those, ally followed by partial loss of motion and certainly iron and the cold-bath rank the complete less of scusation. She also last first. Had the disease not lasted so long, the power of retaining her urine and feces, and the curvature not been so great, and About a year ago she was admitted into \$4. bad there not been, also, scrofulous disease Bartholomea's Hospital, under the care of of some of the vertebra, extension might Mr. LAWRENCE, where she remained four , have been proper, but in this case I conmonths, and during that time had two ceive it would have been useless. issues formed on each side of the dorsal part of the spine. She improved very much delighted lately, when visiting Paris, to see while in the Hospital, and when she left had the beautiful plan of treatment adopted in regained the power of retaining her urine an Orthopedic Institution. I visited that of and foces, and perfect sentation in the lower. Dr. Bouvier, and of all the things that extremitles, but she is still mable to use I visited belonging to the medical departher legs for support or motion. In other ments of Paris, nothing gratified me more; respects her heal h is good,

he could remember. The disease of the various descriptions in the establishment, No. 634.

No. of Address of State Control of the Control of t NORTH-LONDON HOSPITAL, by Mr. Lawrei Nor. To have attempted in restoration of her shape would have been finition but there was an evident indication that improvement of her strength should be attempted, and for this purpose I ordered a cold shower-bath daily, and half a drachm of carborate of iron three times a day.

On the 11th of August she had become considerably strengthened, her complexion was even rather florid, her appetite was good, and on the 15th the dose of carbonate of iron was increased to a drachm. On the 25th she could move her legs freely, ; although only through a limited space. She DEFORMITY OF THE SPINI -- Toxics -- lower extremities beyond a small angle, but

> I may mention here that I was greatly little, indeed, gratified me so much-

On her admission here she was in a state. The pian adopted by this gentleman, of extreme weakness, and there were other and, I presume, by others, who have similar types of the same beyond what the institutions in that empiral, is two-fold,—that the four-values appeared to be that of restoring the misshapen parts as far as possible to their proper form. For the located parts of the former to the forme of the holy erect. It was this curva- the former purpose the patients are sup-which appears to have existed ever plied with proper food, there are baths of and the persons under treatment exercise leasing this position for the purpose of gymnas much as possible in the open air. The lattice climates three times a day, it is not hours of exercise recur three times a day, it is not likes in weather which is had, it takes place in the grounds belonging to the spirits. The improvement which was elimatitution. Tonic medicines were also fected by this mode of treatment, was manimanner. They practise a considerable numwith pleasure. The patients pass from our while hanging on the ladder, in ascending a shipout man who as original meand descending, tends to bring the spininto a straight direction. Then they do with their faces upon a sort of chair, which is means of their hands a use. I cannot detail: the number of about contrivances, a. designsitself principally by its own weight. The patients are mover answed to rest upon then of the crutch. As they pass from one gyme and way on a salivated, from which she nastic contrivance to another, they have gamed relief, but for a short time only. these cruckes ever with them, so that they I I was quite certain that antiphiogistic never test for a connect on their feet, by treatment would not care this patient. The cause while proving from one apparatus to antiphiograph treatment had been fully emanother, while they use the crutches, there played, and tron her paleness and the intoes only touch the general. Then their orbitancy of previous antiplifiguous treatgrienasti exercises, which are quite a deciment, it appears it is one that the cubilities light to them, are never continued long at u of non-un-likely to be of great bettell a time, and the smould be fatigued. The passion. There are a number of cases tients practice to in three times a day, and in the head which yield to the repose upon their backs I think for eighteen are a and not to antiphiograf hours out of the swenty-four; and while in are cases in which, so repose there is a moderate degree of extensions, there is palences, deline sion kept up. They go on with their city and featherest of pulse. The palentes while in this position, and from their featherest have might arise from

given, and I took the opportunity of point-fested by the casts which had been taken of ing out to M. Bouvien, as I did to M. several young ladies, at the time of their Li cor, the great advantage that would admission, and at the time of their leafing arise from the employment of very con- the institution. Many had been quite cured, siderable doses of the carbonate of iron, and many who had been greatly distorted With the utmost liberality be assured me he were now comparatively but little deformed would exhibit it in these diseases, for the In fact, a friend of mine who accompanied purpose of ascertaining the superiority of me, with some other English medical men. full doses. The other in lication, that of remuct a young lady there with whom he was storing the deformed parts to their proper acquainted, and he was quite astonished at shape, is effected in the most agreeable the improvement which had been made. The gentleman who superintended the estaber of gymnastic exercises, all of which blishment. Dr. Bouvirk, appeared to be have a tendency to extend the parts which a most philosophic and anniable man, and I are curved, while they strengthen the sys-neust repeat, that I creatly regret that tem in general. These exercises are ins there are not instabilious precisely upon finitely varied, so that they are carried on the same plan in this country. I myself was so delighted with what I saw, that not withsort of exercise to another, and labour just stambing the metited in was half an hom's as much as they themselves please. Some take out of Paris, and my time was limited, ascend ladders by the aid of their hands I could not bettom from coing a reconditing only, which ladders are suspended with a to view of all the courts which I experi-spring, so that the weight of tee patient emed was participated on by all the Un-

PAIS IN THE HIAM, APPECIAGE TO placed on an inclined plane, and turn a Pranciples can Draw Myrrage Carlo of handle and thus draw themselves up the Iron, and Had, of Polars . The next case plane. They take hold of horizontal poles, which I have to mention, is that of a feand move about to a considerable extent, by mile, Ann. Reports, aged 23, who was admitted on the 11th of August. About twelve months rinco sho countries severy cold from ed for the purpose of letting the body extend, exposure to week. This was not a quality day adema of the feet and legs. Ever some one has been solved to sovere pain in her bacseat, or upon their feet. At dinner their head, and at the veriex, sometimes shortno mis of suppose power in the stock on which any devention close. The pain was attended they set to their aim persons that the opine with hear. Cold upon adores to the face is supported, not present so as to have a give relich. Most eighteen mouths ago tendency to curve, and the supports are the was admental into an bospital, where she more or her convention. In passing from remained maker treatment until a fertinglet the home to the grounds they use contches eagur. During that the consecues she was their supporting them also: of course, under the lasthe acid, cannot at the occupat beistered aringit, their bands r sing on the middle at the forch at and vertex, again and again,

colour and appetite. The quantity of the that position. The pain is always relieved carbonate or iron was increased to half an loy hot ingests. omers, and the hydrindate of potas was Now this was decidedly a case merely of now as much in quantity as to live crains up smaller or neuralgic pain of the stomach, senting a fine for it complexion.

In chlorosis it is a very consensuating for ing. Where the pain is inflammatory, the females to experience violent pain in the pain comes on immediately upon taking head; and loss of blood only makes this pair stimulating food. It is common in their waise. The mode in which I discover the cases of spasmodic pain to find more or less treatment necessary in such pairs, is to observe the colour of the face, tipe, and tongue, the straining caused by the spasin, just as and the character of the pulse. If there be pulses over your most have experienced after severe ness of these parts, and weakness and want cramp in the calves of the legs. The part of lenty in the pulse, I congesture the case is bound in her tender the next morning. to be one which, like chlorosis, indicates the place I was determined to give her what I adoption of treatment which is calculated to knew to be a good tennity in the disease,restore the quality of the blood, and do not cressore. Her pain was always relieved by on any account think of employing anti- hor ingests, and therefore a stimulating narphlogistic remedies. The pain of the head cotic like crossore appeared strengly indigoes away, together with the palpitation, cated. I mentioned, in a paper printed in under the use of iron. But whenever I am the volume just published of the Transactions satisfied that the pain is in the monthrane. If the R p.d Med. Chr. Society, that alof the head, and here it was in the pero though cressor is an admirable remedy in osteum A rive also the hydrorlate of potass, gestrodynia, yet that it does not produce and it is just as some of all in the seasons to those striking effects which attend its adpaleness. The two renewes, combined to gether, appeared to be radicated, one by the state of the constitution, the other by the nor, indeed, until I had increased it to a local symptoms. Although I neight have considerable smooth. I began with two cured the pair, by the hydriculate of posass jurinous every six hours on the 25th of yet I do not be heve that I should have done. August, and it was gradually increased until Donicelies.

antiphfogistic means that had been disployed then trusted since Christmas. "About nine, ed; but as those had done no maid, it was yours ago she began to have attacks of spased; but as those had don't no product it was your ago she began to have attacks of spanichly probable that measures of an opposite description might; last as the pain apported seated in the periodicum, outside hours, and dways come on an hour or two the bead, and perhaps also in the dura after dinner. She has been salivated several mater within, I resolved to give her the times, and bled and blistered, but was never mater within, I resolved to give her the times, and hiel and histored, but was never being to d what is of great use in these affect relieved. Nine months ago she began to that, the hydrichate of potass. She there feel pair and a sensation of weight between one trook it in solution, with the emboante or her shoulders, and a sense of burning along from three times a day. She began with the esophagus. At present she is quite free about three grains of the hydrichate, and from pair, excepting when she takes food, two drachns of the earlonate, three times after which her pair returns in the most a day. On the 29th of August she was againing manner." She can only life on consider her extended for a sense in the first and interest and set in the situes genier in causing her strength feet, as well as her ber back, and she is at all times easier in

to every does. On the 1st of September her hot constant, but occurring at intervals. It pain was less violent and her strength great (was not increased by pressure, nor by hot by improved. On the 12th the headache ingrests. Had it been an inflammatory pain was less, her complexion absorately florid, it would have been constant, although per-Up to the 17th the headsche was daily deschaps worse sometimes than at others. The creating in a verify, and she slept well, and pain would have been increased on pressure, on the zited she was discharged perfectly and by ingests of all descriptions, but parwell, free all-egether tren pain, having conticolarly by het and stimulating ingests, plete passes in of her strength, and pres. The pain it is true was always worse after cating, but not worse immediately after eatit is in others where there is no degree of ministrators in vocating unaccompanied by any good to the constitution by P. with ut we had teached ten tolumes, given every giving the conhomate of troughor, and know stout hours, without causing any also introing how useful each was likely to be memor of the pain. The dose was then increased the complaint, I give her the benefit to twelve, and then to foorteen minims, and then the pain began to lessen. Still, howi ever, she had considerable pain, and therefore on the 22nd of September the dose was

process the same of the same o

3rd of October she had only slight palacity with from Carshelton to this laspital, occasionally. Still, however, she had some first the rain home so severe that he fell pain, and therefore I increased the dose of down and the make to move. He was creeout to seventeen minims. On the 6th brought to town in a cart. "The pain in the creevote to seventeen minims. On the offin prolight to rown in a care. "The pain in the off October she was perfectly free from pain, abdomen is excessive, but is relieved by excepting a very slight twinge occasionally, strong pressure. He has had no stool for and on account of the slight twinge I under the dose eighteen minims, and from this time she was perfectly well. She was distanced in the character of the occasional transfer of the compact of the character of the charact tude, declaring that this was the first time and an injection containing two ounces of oil the least good.

ness which is left between the interval of twice was employed. spasmodic pain; Lat if we and that the! He evalually not rid of all offection of the the pain from the spasm is attacks. very severe, it adole be necessary to carprevent the return of the spassus.

of the alimentary canal caused by had-an neatently, and the became perfectly well, instance of colica pictorica. This case like- but the case has hern published, and therewise illustrates the great power of ercoovy fore I need not again enterimo a detail of it, over certain derangements of the alimentary canal; not that it was of any covice, in ary canaly not make the color but in removing one of . With recard to crisical issuance ios, the symptoms which the color areas asi, it may thirth be stated, that no made that can We have had many cases of this disease in the deviced is more helpful to the student in the color of world. We have had many cases of this segment, and in all respiritor a thorough knowledge of media a very rapid cure has been effected by the capital of a thorough knowledge of mediane, while them with creesned, for the purpose of another with creesned, for the purpose of another with creesned, for the purpose of another with the creesned, of the first black of the great contributions node to this depart, or of sciences.

last April for the same complaint, and was I when it is addressed only through the discharged cared. He has been weeking in has in the general systematic lect a room for the last fortnight, with the doors and windows shut, using a paint which was made of torpentine and white lead. He was then seized with severe pain about the rice to bludente, Oct. 6. navel, constitution, and vomiting of every-thing he took. This morning he attempted

she had ever taken any thing which did her of turpentine in two piats of lariey-water, and this injection was repeated, the first having Now, in cases of gastrodynia, without in-preduced no evacuation. The second pro-flammation, mercury is uscless, and so is the disc disc equipms execution of black feees, bleeding, both generally and low-lly. From without pain. On account of his pulse being the want of an accurate diagnosis, the rem. - fall he was bled to a pint, and the blood was dies which are proper in inflammatian and based and cupped. Calcinel was given him be improperly cambiged in cases where every five hours, and his boxels such bethe improperty camplayed in cases whate every live hours, and his howeld suon bethere is only spasmodic or mentalgic pain, came treely opened, but one symptom remaid be remedies of spasmodic or mentalgic main. I, and that was the vontings. He pain may be employed where there is in- Sili continued to venit everything he tank, flammation, not only without driving any breach transling, too, the free state of his good, but, for the most part, doing may know is, he had considerable grigings, for chief. We are the more little to make which Mr. Tayron gave him half a grain mistakes in these cases, from the tenner-information of morphics, the warm-both like-

tenderness is not greater than the violence lines the , but the vomiting remained as ceof the previous spannestic pain may can'te vere as bolice. So, on the 2nd of October, us to account for, and gradually less as till too tolines of error ofte in an ounce of the spann recurs, we may almost always water and tone could be was given him; neglect P, and regard it only a a consider and a so that more out the conting concedcopleying the remariles of sparm. 549°, it as I be went out perfectly well on the 13th fitter to

I was take this appartually of mentionplay leeches and olisters, but these will not ing a case of violating to which I was called in privite practice, and which had existed car some time, reducing the parient to such in state of debility, that she was nominfed Col. (ca Pictonem.—Pargatives and Cressian in commentary than such as commented to the properties, and was considered.—The next case was an example of inferred to be in great danger; but a few acute spasmodic affection of the lower part observed errested the vomiting per-

to this departage of of science. Its advan-G. T., aged 27, whatted on the 25th of lages are book obvious. The mind is far September, a painter, was in the baspital more difficult to be lastened on a subject

ST. GEORGE'S

CLINICAL LECTURE

ON

EPULIS.

WITH REMARKS ON OPERATIONS IN GENERAL.

Delivered, Nur. 3rd, 1835.

By SIR BENJAMIN BRODIE.

and then, for the first time, she left a tu-ject though his account occupies perhap-nour occuping the place of the best teeth, two-thirds of one of his quarto pages. I apparently rising from the alterdar process, have backed to other books, but I can find It was at that time firmly bound with the no history of it there; and, consequently, ened by the hetaorrhage." Thus runs the correct account of its character. report, which proceeds to say: - "At the: This disease, according to my experience, present time," that is previous to the opera-occurs generally in women. Why it should toon where I have performed, "the uniform of so I do not know, netture can I ten occupies about one-third of the left side of whether it is accidental or not. I think it the lower jaw. It is firmly attached by a hardly can be accidental, for during the broad base to the bone. It is abserted on nonly years that I have been in hospital the surface; covered as it were with a memprocation, and during the shorter number of brane, something similar to that of the gam." years that I have had a large private practice, was no discharge from it when she liee, it is improbable that I should have came to the lospital, and it gave her no seen it much more frequently in women than actually died. When she was admitted into men. the hospital the timour was hard, as it the greater part consisted of bony matter; but stage, it appears as if a part of the gum when I questioned her on the subject, she were more prominent than the rest; the said that in the first instance it was of soft prominent part is covered by a membrane consistence. The tumour in some respects, like the gum, and when cut into, it is not as I will explain to you presently, defices very different in appearance from the confrom many of the tumours which go under sistence and structure of the gum itself; at

the time of Hippocraves, you might suppose that the disease was well understood, and that, at any rate, you would find a good account of it in some writer or other. However, I have looked in vain in books for a history of the disease, or the mode of treatment accessary for its cure, to which I could refer you, and find that there really is none. [I broked into Mr. SAMUID, COUPER's Dietionary of Surgery, because that gentleman havtaken great pains to collect whatever has been said on succical subjects, and I think that if there had been a good description of the disease, he would have found it out. But his account is this: - "Epulis, a small GENTLEMEN.—I will read to you the hiss toberome concerns. The hest plan of cure is tory of a case in which I have been opera- treatirpare it with a knife." I then thought ting. The patient, who is now farty years that I would look into an other authority, of age, "has fuch," as she states, "had and turned to Hislor's "Surgery," pubteeth for omice years. Four or two years its hed more than a century ago. He says ago she suffered very touch from what she that "cpub are mild, and not cancerous; considers to have been touthache, after they may be removed by ligature, by caustic, which two of the back teeth of the lower and by the actual cautery." This is the few became very loose, and drepped out, substance of what he has to say on the subjaw to her face; it progressively increased in order to give you the history, I must refer in size, and at times since has given her a to cases which I have seen myself. I have great deal of pain, occasionally bleeding so seen a great many instances of the disease, much that she has been considerably weak. and I dare say that I can furnish you with a

tion which I have performed, "the tumour do so I do not know, neither can I tell pain. She said that her grandfather had a in men, unless women really were nost subtumour of the same kind, from which he ject to it. Nevertheless I have seen it in

When you look at the disease in its early the name of "epulis," but, nevertheless, I least, so far as the eye can discern. On believe it to be one of the same kind.

these accounts, as it looks like the gam on lieve it to be one of the same kind. These accounts, as it looks like the gum on In order that you may fully understand the sorface, as it cuts like the gum, and as In order that you may fully understand the surface, as it cuts like the gum, and as this case, I propose to give you the history it is connected with the gum, so it is supported this disease. I use the word "epoclis,"— posed generally to have its origin in the surface of pronouncing the name, source in some instances; but yet I must not that the disease with a lated so long that it is lower that in cases which I have had an opported that the disease originated in the alveolar photosist, because it is derived from the processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes are the control of the latest that it is defined to the processes or the observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes. I have observed that the disease originated in the alveolar processes.

socket as the disease advances. The lister of the present patient tends to confirm this opinion, for she says that the teeth became toose and dropped out, and then up grew the tacked, or, perhaps, in some distant organisation. tumour. Here is a specimen presenting it) of the body. If you remove fungous harms of the disease, attached to the jaw, and in todes from the breast or leg, the patien which it evidently appeared to have originated in the alveolar process. In the operation, I removed with the tumour the nortion of jaw belonging to it; and I found in that the patient may die of disease again return part of the jaw which was sawn through ling in that part, or of disease in the lung and where it was not supposed that any the liver, or the sterns. But epulis is no tumour existed, that there was a substance like malignant disease in this respect; i exactly like the tumour itself, in the alveolar does not arise out of any vice in the constiprocess. I sawed through the bone where potion, but is altogether a local malady. You I thought it was healthy, and there I found may remove a cancer from the breast, an the socket of an alveolus, in which the take away the sound parts beyond it, to structure was so exactly like that of the considerable distance, and yet the disease large tumour, that I thought it right to de- will return. You may take away the ti stroy this part. The tumour is at first mour in epulis, assuring yourself that yo small; as it advances the teeth drop out, take away the whole of it, and then it doe and the tumour as last extends from out instruction. When the tumour has attained side of the jaw to the other. If the disease | very large size, it often may return after the go on it will ulcerate and increase in size, operation, because it is then difficult to go and although in this woman it remained sta- out the whole of the disease; but if the ti tionary, as any tumour may, yet it may go on the time that any magnitude. I have seen a tumour be of small see, you may remove the mour occupy the entire half of the lower jaw, will not recur.

There are other tumours which possess that the partente subdiving the moure of tumours which possess that the partente subdiving the mounts is the partente subdiving the mounts. and it may go on further still, and can the this ha't-malagnant character. Those tubes course of any malignant tunning. Consider this which have then the checks, which what any malignant tanour of the jaw wall; often is once, for your an diere t, and wine do, and that is what this turnous also may lat its , mortage, grow, produce tirge if to. It may occupy the enough of the mouth of administration and the quently desire itself, press upon the check, not situately like, belong to the class of half-manging produce destruction of the face, so that you, in none. These to nours are gluerally con have a large ill-conditioned ulcer, with a undered to be cancerous; but it you tal tumour at the buttom of it. In short, it may laway the charace in the early stage, when run the course of any malignost disease from he taken away retirely, ture is no r The patient may dis, worn out transprofus, turn of it. You made in the afraid, in the discharge, bleeding, slaughing, and the cases, of the absorbent quantum being cons want of nourishment; for all these tumours impacted, not of the operate showing itself about the checks, jaws, and face, alto any of the vincers. Take away the who mately produce these ill consequences. The of the diseases go quite beyond it as patient is unable to take food, and absolute there is no return. You can do no more it starvation scous to be the cause of death in the patient with coulis; it is needless many cases. The turnous in it-cit, if it be give hon measuine, and try by that means allowed to remain, is just as bas as any care atop the progress of the disease. You mu cinomatous tamous, or a tumour of funderadicate the morbid growth; and the on gous hæmatoles, there being this differ- question left for us to consider is, how the once only, so far as the course of the tasteration should be effected. mour itself is concerned, - tout it does not make such tapit progress as mangious tu-mours generally do.

lar to that of a truly manginus tomour, so that I see, --- in private practice at least, far as the tumour itself is concerned. You the disease is in the early stage, and, will ask, "Why do I make this reservation; course, then, the terreter is of small air why do I say that it runs that course only and may be easily destroyed in the followir in one respect?" A truly malignant turnour, manner —First of all, all the tests, which such as scirrhus or fungous hæmatodes, scom in any way to interfere, contaminates the absorbent glands, which case must be drawn this tumour does not. The mal-grancy of the Lakon before you got former tomours seises out of something in You thus expens the state of the general system that is, in car-cinoma, or in fungous hasmatodes. Cancer could be and fungous beautiodes are not local discessor, | y

may die of the same disease in the lungs, o it may show itself again in the breast or lex So if you remove careinoma from the breas

The made of proceeding must depend t circo artanees, -un the size of the tumour, on its extent --- its positio I have said that it may run a course sind In the greater number of cases of this kir

dropped out for some ti he alveolet cesses have become absorbed a character, have some carbonate of potass, or chalk and of course they remain, and this remainance water, ready to apply to protect neighbour-you must bear in mind. I see now speaking lng parts. You should never use caustic you must hear in mind. I mill now spraking ing parts. You should never use caustic of cases where the tumour is small. I place without having something by you that will the patient before the kaffe, and then cut destroy its properties, when the caustic is off the avendar processes remain, of course I in danger or interfering with the neighbourfit has been as the carried to the join apply the nitrate of silver (which is not bottom of them; but if they have been not a powerful caustic, and not much used for sorbed, a straight common kuite will do. It destruction of parts) to the inside of the You then wait for the bleeding to subside; eyells. Always have something at hand and if there he a great deal of hemorrhage, on such occasions to stop its operation, and you may postpone the next step of the the best antidote with which I am acquainted more about to another day, when it may held securon out, which stone its action preoperation to another day, when it may be is common oil, which stops its action predone quite as well as on the first occasion. sently. But, to return. The next step of the operation is to apply Having removed the part with the knife, the caustic potass to the surface of the bone lapply the potass to the surface, by which from which the tumour areae. You may you will make a slough of the neighbouring apply the actual cautery, or nitric acid; but parts, and destroy the surface of the bones. I prefer the caustic potage, which answers If the disease has descended to the alveolus, the purpose mily as well as the actual caus and the alveolar process is not absorbed, a tery, and traditions the patient much less. I marrow piece of caustic is to be introduced think, moreover, that you know more estimate the bottom of the process. This may active he with you go with the caustic potoes be done at the time of excising the tumour, than you do with the actual cautery; and if there he not much hemorrhage; but if be assured, also, for I speak from having there be, then it is better to defer the apemployed it many times, that it answers the plication to mother day; no harm arises purpose perfectly. You should have a piece, from waiting, and you never can apply the of caustic potass, with a point, so is to cuter caustic to much advantage when there is the sireolar process. It should be cut in much homorphage, that was the reason why the shape of a pencil, and be a piece of a Loudy applied the caustic slightly to-day. tolerable length, and it should be fixed, at You should always examine the part afterright angles, in the end of a pair of these- wards, in order to ascertain if you have left ing forceps. Do not trust to your hands, any portion of the tumour modestroyed. If to hold it right in the forecase, but he it you have, it may be removed by a knife, or be tastened on by a lightness, passed round by the constitutions, after words. It is not several times (apply to the surface from often meet sary, but will, where the comfort which the transmit and been removed; but it or the life of the patient is at stake, you the alreader price of remains, take ergs that should exercise this procention the caustic penetrates to the bottom of the princess. Many prince the caustic potess to tumour was composed of hone, it had a hard anything else because it does not coagulate bony base, and it was evident, from her acthe blood, and does not prevent the country count, that the bone began at the base, and from acting, and because, also, it will price had grown from themes, for she states that trace some shar into the sub-taine of the thetanour in the first instance was of soft parts; whereas the nitrie and compilates consistence. Any tumour which is attached every substance with which it concentrates to bence, is hable to have bone grow into it tact, and a ses not sink noto it; it is more afterwards. I have seen a large fatty tuimited in its effects. You may concern mour, with a large process of bone, at last, that the coustic potass is very likely to run grown on to its base. It was evident that about, to surround the cheek, to burn the the kinfe in this case would not take the tongue, and to intere parts beyond those tumour away. It might have been removed which it is your intention to injure. It with a small saw. The cheek being held will dissolve in saliva, in the blood, and in back, the saw might have been introduced, the arine, and if it were to run about it; with the finger, so as to cut off the tamour; would produce very great evil. How, then, but these bone-hippers are much more are you to obviate the effects of such an convenient for that purpose; they take off accident? Why, just as you always would the tumour quite as smooth as the saw, applicable of its applicables where you and in a much shorter space of time.

14. 158

baring texture. If you employ hitric acid,

In this woman's case a good deal of the ant it to operate. Whenever you They are simply a modification of the destruction of living parts, common bone-nippers, which are used for mittle operation. If you of stumps. A pair however may be made, as need only have some as I have had these made, specially for the state of list to exceed a succession,—just adapted to the shape of the and distributed his face very and distributed its face very tumour, and Atted to embrace he face very

nicely. The ferceps that I show you co tains a mechanical improvement contrived by Mr. WEISS, who is certainly a very hegenious person, and whose numerous in-ventions have been of eminent use in surgery. They move with a double lever, so that much less force is required to take off a bony tumour than is requisite with the common nippers. They were only brought home two days ago, and, as I had not used them before to-day, I was surprised to find how little force was necessary to take off this tumour-a child, with these nippers, might have placked it off with the fore-finger and thumb-of course, therefore, these nippers are very advantageous to the

Although there are many cases where the knife will not answer the purpose, and where the bone-nippers will, yet the lat-ter will not always do, for in other cases the tumour has attained a very large size, and occupies so great a part of the law that the nippers are not safe as an instrument which must leave no portion of the tumour behind. Here is a specimen in which it would not have been safe to leave any part of the jaw unremoved. Here is another specimen, in which a portion of the jaw might have been left, but still it did not appear to me at the time to be safe that any part should remain. I dare say that in some of those cases in which the whole ramus of the jaw has been taken away, the disease has been of this kind, and, having occupied the whole of the jaw, the cure required that the whole of the jaw first intention. When I took the tumour should be removed. In general, however, we are only called upon to take away a portion of the hone. The specimen I now and, perhaps, one of the most important present was taken from a private patient on observations that I have made - I found the ago; and here is another on which I ope- exactly similar structure to that of which rated about a year and a half ago. The latter patient came to London on account through the middle of it; and when I looked of the tumour on the jaw, a surgeon accom- at the patient's month, two days miterwards, expose the bone, which was then separated where the subsequent from the healthy parts, on the inside and was not necessary, below, with a saw. Of course the teeth in the neighbourhood had been previously re- lone came out of the control of the co moved. The flap of skin and flesh after-portion of it broke of wards came down into its place, the natural statements with the contraction of the parts were brought together by the inter-

nture, as in the operation for hare-mend healed by the first intention, and in only and in ealy though eight or nine days after-wards, I believe the patient was so well that she commenced a journey home—a distance of ho less than a hundred miles. It was quite remarkable how slight an appearance the scar made in the face. You could just discern the three lines, but you could ham'y tell, without looking closely at the patient, that anything had been done. I heard of this lady two or three weeks ago, and she then continued perfectly well, and a gentleman told me that you could hardly observe anything different in the face from what there was before the operation. You will think it remarkable that there should be so little disfigurement. You would suppose that a portion of the jaw being taken away, the side of the face would be shrivelled, and the chin turned on one side. This we should think is what ought to happen, but it is not what really does take place. The space from which the bone has been taken away becomes filled up with lignmentous substance, which keeps the bonus asunder, at the same time binding them together. The patient feels that she has lost some of her teeth on that side, and she cannot masticate there, but she can musticate very well on the other side.

In the other patient the tumour was of a larger size still, and I performed the operation in the same manner; the edges of the wound were brought together by antures, and all but a small portion united by the hence-and what I am now about to mention is the most interesting part of the case, whom I operated something less than a year, alveoler process behind, having in it some the tumour was composed, and I had cut panying her to town. It appeared from the I found, true enough, what appeared to be a extent of the tumour to be doubtful whe- tumour, occupying the alveolar process bether it could be taken away without remov-hind; and, more than that. I found a very ing the whole of the jaw. I performed the small portion of the tumour attached to the operation in the following manner:—I first bone in front, a small slice of it. This was made an incision down the back part of the eavily taken off, and I then introduced a very check, then another round the ramus of the narrow piece of caustic potass into the jaw, and another on the front of the check. alveolar process behind, where the remnant I then turned up the flap, and thus made a of the tumour seemed to exist, and destroyed sort of window, or port-hole, in the patient's that remnant I repeated this operation face; it was a sort of shutter; in fact, a more than once, in order that I might be circular flap of the skin of the face and quite satisfied that the destruction of the cheek was detached, excepting at the upper part was complete. This made the care a part. This flap was then turned up so as to little more tedlous than in the other care. where the subsequent application

whom I saw only a few days ago, has show continued quite well. You can feel and the ligament formed in the part where the bone was taken away. The bones are very little drawn together, for a strong ligament keeps them asunder and binds them at the same young hospital surgeon, I had a very high time. The chin is in the middle of the face, loninion of operative surgery, and I thought and if you look attention; at the patient, that in every care where nothing else could you see one side of the face a little different be done, an operation should be performed; from the other, but this you would not notice except you looked particularly at it.

In the case of the patient in the hospital on whom I have just operated, I have, as I operation and the chance of recovery ought

another day.

servations on another subject. A man came cases, is also one of ultimate success. A into the hospital, lately, with a large tumour child has scrofulous disease of the knoe, and on one side of his face, to have the tumour disease in the lungs and measureric glands, removed. I had seen him in the summer, The knee is very bad; you say that you and then finding the tumour comparatively cannot make a cure by medicine; you amountal, I recommended an operation; but putate; the stump heak; the internal disgoing out of town, I did not see him again case directly makes more rapid progress until a short time back, when a day was than before, and the patient dies. The level for the concretion. fixed for the operation. He wished it to be operation could not prolong life, which, performed on the third day, but before the however, it is always our business to exsecond day came he went away; and, in-tend as far as we can. A woman has a candeed, I do not know that he was very un- ver of the breast; you amputate it; she great doubts as to the success of the opera-- say that the operation has been successful; tion. In fact, though I recommended the may, if she live but a whole year, it may be operation when the tumour was small, yet supposed that she has gained something by parts.

operation, why did I propose to perform it? amountation was performed. A great num-Why, because the man came in to have the ber of similar examples might be presented. tumour removed, and considered that no. You may say, "the patient was not made thing also could be done for him to avert werse; no harm has been done." But I death, though the operation would probably say that harm has been done, for the pa-not prevent a fatal termination, and because tient has undergone great pain and anxiety, should be performed. I had little faith in the operation, but I thought it practicable, or if not, that I should discover sufficient in time to prevent any harm being done. The condition of the man could not be made worse, and might be bettered, but still I did not recommend the operation.

You will ask why it was an unfavourable tant disease, it did not even seem to be

all my care, and from which the disease

wight be regenerated.
Now allow me to say a few words concerning cases in which operations should or should not be performed. When I was a but I think sow, from experience, that we should be more circumspect in selecting cases for operation - that the danger of the told you, already applied the caustic slightly: to be well considered. A dangerous opera-the application, however, may not be quite tion ought not to be performed, except where sufficient, and if so, I shall apply it again on there is still greater danger to be apprehended if it be not performed, and not even then, unless the patient be made aware, at OPERATIONS IN GENERAL.—As we have least in some degree, of the risk to which he ten minutes to spare, I will make a few ob- is subjected. But the question, in many wise in so doing, for I certainly had then lives even for two years afterwards, and you now the tumour was very large, growing at the operation. But if the disease returns a great rate, having very much of the climbin three or four months, the patient gains racter of fungous Lematodes, and, apparent bothing by the amputation. She has suffered ly, considerably attached to the surrounding great pain, and a certain extent of danger from which the operation is never free), You will ask, if I did not recommend the and she dies at last of the disease for which also my colleagues thought the operation as also have the friends, which might have been avoided. And society suffers a still greater harm. Every operation which fails, makes a deep impression on the minds of the patient's friends, and you may be assured that overy such operation preveats two or three patients from undergoing an operation in cases where it might be successful. Therefore our duty to our patients. case for operation. Why, first, the disease the credit of the profession, and the good of had very much the character of a truly ma- society at large, require as to avoid operations which do not hold out ultimate hopes ant, but much resembled fungous of success. You must, I grant, perform penething of that kind (for many operations which eventually will not but very little), and it succeed, because you cannot always say beat rate. Secondly, it fore the trial is made that there is no chance. Michoeming, parts, of success; and you should give the patient with the supportylibely a chance, where he himself desired it, and e of you really see that an operation offers one. nicely. The ferceps that I show you could tains a mechanical improvement contributed

operator. pear to me at the time to be safe that may the other side.

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pear should remain. I dare say that in the other patient the tumour was of a some of those cases in which the whole larger size still, and I performed the operacarchar map of the axin of the range and quite sutience that the certificial or the check was detached, excepting at the upper part was complete. This made the cure a suppose the bone, which was then separated from the healthy parts, on the inside and where the subsequent application are subsequently applications. below, with a saw. Of course the teeth in the neighbourhood had been previously re-bone came out of the neighbourhood had been previously re-bone came out of the neighbourhood had been previously reproduce of it broke a wards come down into its place, the parts were brought together by the inter-

manero, as in the operation for h tains a mechanical improvement contrived by the first intention, by Mr. Wries, who is certainly a tory far and in any intention person, and whose numerous in wards, I believe the patient was so will that wentions have been of eminent use in our site commenced a lourney home—a distance gery. They move with a double lever, so of no loss than a hundred miles. It was that made has forced in required to take the contribution of that much less force is required to take off quite remarkable how slight an appearance a bony tumour than is requisite with the the scar made in the face. You could just common sippers. They were only brought discern the three lines, but you could havely home two days ago, and, as I had not used tell, without looking closely at the patient, them before to-day, I was surprised to find; that anything had been done. I heard of them before to day, I was surprised in most that anything used over mont. I award on how little force was necessary to take off, this lady two or three weeks ago, and she this tumour—a child, with these nippers, then continued perfectly well, and a gentlemager and thumb—of course, therefore, man told in that you could hardly observe finger and thumb—of course, therefore, anything different in the face from what these nippers are very advantageous to the there was before the operation. You will strator.

Although there are many cases where lattle distinguement. You would suppose the knife will not answer the purpose, and that a portion of the jaw being taken away, the kine win not answer and purpose and trial a portion of the place is an invested, and ter will not always do, for in other cases: the claim turned on one side. This was should the tameur has attained a very large size, think is what ought to happen, but it is and occupies so great a part of the law that, not what really does take place. The space the nippers are not safe as an instrument from which the bone has been taken away which must leave no-portion of the turnour becomes fill if up with lagraneurous subbehind. Here it a specimen in which it stance, which keeps the banes assuider, at would not have been safe to leave any part the same time bushing them together. The of the jaw unremoved. Here is another patient feels that she has leat some of her aperimen, in which a portion of the jaw teeth on that side, an i she exerted maximals might have been left, but still it did not ap- there, but sire can masticate very wall on

ramus of the jaw has been taken away, then in the same manner; the edges of the having occupied the whole of the law, the and all but a small perion unless by the time occupied the whole of the law, the and all but a small perion unless by the cure required that the whole of the law first intention. When I work the tumour should be removed. In general, however, hence—and what I are now about to more we are only called upon to take away a tion is the most interesting parter the case, portion of the bane. The specimen I now and, patients, one of the most important present was taken from a private patient on observations that I have made. I found the whom I operated something less than a year alveolus process behind, having in it some ago; and here is another on which I oper exactly similar structure to that of which rated about a year and a half ago. The toe tumour was composed, and I had out latter patient came to London on account through the mittale of it and when I looked of the tumour on the jaw, a surgeon accom- at the potient's nouth, two days afterwards, panying her to town. It appeared from the I found, true enough, what appeared to be a extent of the tumour to be doubtful whe-ther it could be taken away without remov-hind; and, more than that. I found a very ing the whole of the jaw. I performed the small portion of the tumour attached to the operation in the fullowing manner :- I first bone in front, a small slice of it. This was made an incision down the back part of the easily taken oft, and I then introduced a very cheek, then another round the ramus of the narrow piece of causic potass into the jaw, and another on the front of the cheek, laivedar process behind, where the remnant I then turned up the flap, and thus made a of the turnour second to exist, and destroyed sort of window, or port-hole, in the patient's that remnant 1 repeated this operation face; it was a sort of shotter; in fact, a more than once, in order that I might be circular flap of the skin of the face and quite satisfied that the destruction of the

whom I naw only a few days as You can fee ronthwed quite well. ligement formed in the next wants the bone . Now allow me to say a few words con-a as taken away. The leasts are very little cerning cares in which operations should or drawn together, for a strong ligament keeps should not be performed. When I was a

on whom I have just operated, I have, as I operation and the chance of recovery ought told you siready applied the caustic slightly; to be well considered. A dangerous operathe application, however, may not be quite tion ought not to be performed, except where sufficient, and if ro, I shall apply it again on there is still greater danger to be appro-

another day.

ten minutes to spare, I will make a few nie it subjected. But the question, in many servations on another subject. A man came cases, is also one of ultimate success. A into the hospital, letely, with a large turnour child has scrafulous disease of the knee, and on one side of his tace, to have the fumour disease in the lungs and inesenteric glands, removed. I had seen how in the summer, The knee is very lad; you say that you and then finding the tumour comparatively cannot make a cure by medicine; you amsmall, I recommended an operation; but putate; the stump heals; the internal disgoing out of town, I did not so: him again, case directly makes more rapid progress until a short than back, when a day was than before, and the potient dies. fixed for the operation. He wished it to be operation could not prolong life, which, performed on the thord day, but lafere the bawever, it is always our business to exsecond day came he went away; and, me tend as far as we can. A woman has a candeed, I do not know that he was very un- cer of the breast; you amputate it; she wise in so doing, for I certainly had then lives even for two years of crewards, and you great dealers as to the success of the opera; say that the operation has been successful; tion. In mer, thou, a I recommended the may, if she her but a whole year, it may be n great rate, having very non-host the chass in three or four months, the patient gains ractor of langeau have acodes, and, apparent. nothing by the amountation. She has suffered ly, considerably attached to the corremaing great pain, and a tertain extent of danger parts.

operation, why sid I propose to perform it) amputation was performed. A great num-Why, because the man came in to have the ber of similar examples might be presented. tumour removed, and considered that no. You may say, " the patient was not made thing else could be done for him to avert were; no harm has been done." But I death, though the operation would probably but that have hose been done, for the panel prevent a fatal termination, and because first has molergone great pain and anxiety, also my colleagues thought the operation in also have the fixeds, which might have should be performed. I had little faith in been avoided. And society suffers a still describe the second of the performed of the faith in been avoided. And society suffers a still describe the second of the performed. the operation, but I thought it practicable, greater barm. Every operation which fails, or if not, that I should discover sufficient in makes a deep impression on the minds of time to prevent any harm being done. The the patient's friends, and you may be ascondition of the man could not be made sured that every such operation prevents worse, and might be bettered, but still I did I two or three patients from undergoing an not recommend the operation.

You will ask why it was an unfayourable case for operation. Why, first, the disease the credit of the profession, and the good of had very much the character of a truly ma- society at large, require us to avoid opera-

all my care, and from which the di to be regenerated.

them annote and hinds them at all the particular to be performed. Waten at was a them annote and hinds them at a transfer of the particular the face, opinion of operative surgery, and I thought and if you look attentionly at the patient, that in every care where nothing else could you are one side of the face a little different be done, an operation should be performed; from the other, but this you would not notice but I think use, from experience, that we except you knowed particularly at it. scept you looked particularly at it. about be more circumspect in selecting In the case of the patient in the hospital cases for operation—that the danger of the hended if it he not performed, and not even then, unless the patient Le made aware, at OPERATIONS IN GLARRAL .- As we have least in some degree, of the risk to which he reperation when the tumear was small, set supposed that she has gained something by how the tensour was very large, see wing at the operation. But if the disease returns from which the operation is mover free!, You will ask, if I did not recommend the and she dies at last of the disease for which operation in cases where it might be succossful. Therefore our duty to our patients, reast disease, it did not even seem to be tions which do not hold out ultimate hopes of success. You must, I grant, perform many operations which eventually ail not ething of that kind (for many operations which eventually will not be but very little), and it succeed, because you cannot always say berate. Secondly, it fore the trial is made that there is no chance and the trial is made that there is no chance at the second of th, of success; and you should give the patient sty a chance, where he himself desired it, and of you really see that an operation offers one.

though you know pretty well that even if tatal at the time, yet there is always very it succeeds for a time, the success will not the disease will not be permanent. Let me, however, repeat mately return. I do not say that you are the important observation, for it is one not never to operate in antigmant diseases. sufficiently borne in mind, that the failure That would be wrong, and very foolish, for of any operation prevents some patient or sometimes the patient may be cured, and at other from resorting to an operation where other times a peneficial result may extend it would succeed, and thus every failure does harm to our art, and is injurious to tient to die of disease of the lungs, than, of society.

You will next say,-" Can you give us any rules as to when operations should or should not be performed?" I reply, of course there can be no rules, for every case may require a distinct consideration; but patient with disease in his knee, who has a sallow countscance, looking as if he had disease in the liver, and you find on inquiry that there is reason to believe that he labours under visceral disease, I should advise you not to operate in that case, for after amputation he would have a sloughing stump, and the wound probably would not heal. If a patient has a calculus in the bladder, and the bladder be much diseased, avoid the operation, for he will die. If he has a stone in the bladder and there is organic disease in the kidney (I am not speaking of a deranged action of the organ, or of alkaline urine, but, really, organic disease of the kidney, do not operate, for he is sure to die, not, perhaps, in the first week, but, probably, in a fortnight or a month. You should be very careful as to an operation in all truly malignant diseases. I do not allude to what may be called "half-malignant" diseases, but truly malignant affections, such as cancer or fungous hamatodes, and the numerous varieties of those two classes. Surgeons formerly were very ready to amputate any woman's breast which had in it a scirrhous tumour; now they are very careful how they amputate. I suppose that I do not recomu end the operation for scirrbus in the breast in one case out of threescore. You will see a vast number of these cases here, both good and bad, for all come to London to get the opinion of a medical man; and even in those cases in which I recommended amputation, the operation has much more frequently failed than succeeded, even with all my care. I have known several cases in which the operation has been performed by other surgeons, after I had recommended the pathese cases it has failed. Some of the pa- not operate upon them except you are cases tients have died immediately afterwards, pelled to do so. I have known seve and some have lived for a short period only. terical ladies who appeared to be In all these malignant diseases the opera-tion is attended with some hazard, for than that of being though the disease be in an external part, it vous, who have dis is often complicated with visceral affection; countails main

to one or two years. It is better for a pahemorrhage from a cancer of the breast. In some cases, then, you give the patient a respite, but you must be very careful and circumspect before you recommend an opr-

ration in malignant disease.

The simple operations form the best part we may venture to lay down rules to the of surgery,-1 mean that they constitute following effect: -- A patient labouring under that part of it which confers the most credit organic disease of any kind is a bad subject on the profession, and produces the greatest for an operation. If, therefore, you see a good to society. By what are called "simple" operations, how many diseases which would have become structural are nipped in the bud; and how many patients are cured of diseases which would become most distressing, but for these slight operations! And the small operations of surgery have this advantage, that for the most part they are not attended with danger. But even in small operations you are to be very circumspect. A patient may die of crysipelas after a small operation as well as after a great one. Be careful how you operate in seasons when crysipelas prevails, -when you hear medical men saying that they have had many cases of crysipelas. Take care that the patient is, if possible, always in good health, before you perform even a small operation. If the patient be a dram-drinker, or if he be one of the higher classes, and not a draindrinker, but a person who indulges freely in wine, and is guilty of other irregularities, be careful in operating. Many persons who have been accustomed to live well, especially drinkers of spirituous and fermented liquors, will die even after a simple operation which you have been obliged to perform. I once saw a lady whonot a lady-like accomplishment certainlygot drunk by herself in the morning, who died from diffuse inflammation of the cellular membrane, attended with sloughing. after the mere puncture of a very small encysted tumour. There is another class of patients in whom you should be careful how you perform operations, viz., women of the higher classes of society who are of a very nervous and hysterical habit; and, indeed, all persons who have a very bad state of the nervous system, or who belong to tient not to undergo it, and in every one of families in which mania has prevailed. Do

I have made these observations now cause, having time. I thought it as to be take advantage of the circumstance to say a few words on this important subject.

WESTMINSTER HOSPITAL.

CLINICAL LECTURE

ON A CASE OF

EMPYEMA.

Delivered November 3rd, 1835,

By Dr. ROP.

EMYLIA.—Paraccatesis Thoracis.—Autopsy.—I intended to-day, gentlemen, to address to you a few observations on the important subject of clinical medicine; but the death of Charles Dyson, who has been for some months in the hospital, labouring underempyema, has given us an opportunity of exhibiting the morbid appearances which are found in that disease, and I think it will be more profitable to you to take advantage of this interesting occasion, to direct your attention to the symptoms under which this patient laboured, and the morbid appearances which the examination disclosed.

In the mouth of June last I was requested! by our benevolent chaplain to visit this man in Regent-street, Westminster. him pale and emaciated, lying on his right side, coughing frequently, and expectorating a considerable quantity of frothy mucus. He told me that his case was considered to be one of consumption, and that he had been given over by his medical attendant. I recommended him to come into the hospital, which he accordingly did in July, and the following is the report of his case at that time :- Age 48; by trade a bricklayer, of a pallid countenance and sunken cheeks; complaining of cough, with frothy mucous expectoration, difficulty of breathing on moving in bed, but not so much so when he lies quietly; great debility and loss of appetite; his respirations were only twenty in a minute, but his left side moved very little on taking the full inspiration; his pulse was 86, soft and feeble. percussion the left side elicited a very dull sound, both anteriorly and posteriorly, and and under the left clavicle. The sound right side was tolerably clear. The aurmur was inaudible at the par a small space close to signist side it was bron-and it was accompanied a. The hours pulsations

Medition, but it was felt distinctly on the right side of the sternum. The left side right. Its intercostal spaces were obliterated, but no metallic tinkling could be heard. It could scarcely be said that any change of the sound elicited on percussion was produced by change of posture. His tongue was red and moist, and his bowels were torpid. He said he had enjoyed tolerable health until within the last five years, since which period he had been troubled in foggy weather with a cough of an asthmatic character, early in the morning and at night, but he had been able to follow his employment, until fifteen months ago, when he caught a violent cold. He states that he has never had pain in the left side, nor has he to his own knowledge ever had a plearisy.

ever had a pleurisy.

Now what disease does the history of this

case indicate? The dulness all over the left side of the chest could only be produced by one of the following causes:—lst. A lung completely hepatised, or completely tuherculated. 2nd. An extensive abscess occupying the whole lung. 3rd. Effusion into the cavity of the pleura. Now the lung could not have become hepatised, nor could so extensive an abscess have been formed, without very severe preceding inflammation, but of which we have no notice in his history. It would have been a very uncommon thing to find one lung so totally tuberculated, as to be dull every where on percussion, and to be void of respiratory murmur, while the other lung was free from disease, and the expectoration exhibited no appearance but frothy mucus. Again, neither his countenance nor his cough was by any means indicative of phthisis, and though the lung had been condensed by the deposition of tuberculous matter, yet this could not explain the cause of the displacement of the heart. We therefore concluded that the duluess on percussion was not produced by any of these conditions, and very extensive effusion was the only remaining cause. That would satisfactorily explain all the phenomena,viz., the displacement of the heart on the right side, the general dulness on percussion, and the absence of respiratory nurmur every where except at the root of the lung, where it was probably pressed against the spine and was condensed by the pressure of the fluid. Now to this supposition there were these objections,-effusion of serum or secretion of pus is always preceded by inflammation, of the severity and duration of which the patient usually gives a distinct account. Now such things were noticed in this patient's history; but it is a well-known fact that the secretion of pas is not only a consequence of very acute pleurisy, running a rapid course, and terminating in the secretion of pus in ten or eleven days; but it also arises from that chronic all in the second state of inflammation of the plears which

goes on without the patient being aware of its existence. Again, where the pleura contains fluid, orgophony is often heard. But the cheet was filled with pus. Now the death of this patient took plac the absence of orgophony in this case was a few days ago, and we took out the dis satisfactorily accounted for by the in-mense quantity of fluid which his cless to you, because you cannot form a correc must necessarily have contained, if it con-notion of the manner in which this diseas tained fluid at all. You know ægophony is to be cured, without a correct knowledge is perceived in the commencement of pleurisy, or, rather, in the commencement of the external appearances of the bod

attempt is make by matter to perform a string in costant account and another than the curre, then contractions of the chest takes humerous corruspations. A hand of densing place, and you no logger find the sound elicited membrane, as thick as the finger, extender from about the sixth rib to the laferier elgo for the lower lobe of the left lang. It was a change in the posture of the patient; and this which, doubtless, prevented all the this is one of the most important signs, and fluid from being they n off in the operation one that is the most to be relied on, in ex-amining cliusion into the chest. The part abscess* formed between the third and which sounds dull in a depending situation fourth tibe and the cost. The absert becomes clear when the position is re-seemed comined to the nuscular substance versed, from the fleating of the respiratory The right lung was studied with minute portion of the lung in the fluid. Now the tuberches. The heer was granular, conabsence of this sign in this case is to be gosted with blood, and myristicated. The accounted for under the supposition that the hidreys, in like manner, were a little palet lung has been bound down to the spine, so that than natural. No other morbid appearit cannot change its position. On whatever ances were observed. Here, gentlemen part of the chest, therefore, percussion is are the parts. They have been steep employed, it must be over fluid, unless we ing in salt, and are somewhat altered in except that part where the lung was com- colour. The lung is condensed and pressed pressed against the spine. The sound there-idown against the spine. The plears in fore must every where be dull.

cumstances, it seemed almost certain that hand passing from the lung to the inside of the patient was suffering from the effusion of the ribs. This lung was not impervious to a considerable quantity of fluid in the chest; the air, for when it was taken from the and it was more that, probable that this fluid body it could be dilated by a pair of bellows was purulent, from the circumstance which to some considerable extent. This other I have just mentioned, that it is acute pleus lung is much more solul than it ought to be, risy, which, more generally than anything and by cutting Itopen you will observe some ler, which, more generally than anything and by cutting tropen you will observe some else, terminates in the effusion of serum, few tabercles in its subtrace. You observe, to make the mutter perfectly certain, I passed into the clear a needle, interest the morbid condition of these parts,—the thickened and inflamed into the floorital, which may always be introduced with the greatest safety. Sir BENDAMIN distansion of the cavity of the pleurs with BROOKE, I have been informed has introduced this needle into the cavity of the over to the right side. joints with perfect safety. It is made like New what is the mode by a trocar, with a groove running through it, to be effected in such t through which field may escape; and on cure takes place, it me introducing this needle into the cheef in the of the pleurs, which are case of Dyson, a turbid fluid flowed out, leaving no doubt that the disease was en-

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the effusion of scrum, before the quantity were not unusual. There was very great effused has been considerable; as the el-fusion goes on, the ergophony disappears, and, as the effused fluid becomes absorbed, the ergophony reappears; therefore, the ab-the middle, and to the right of that bone sence of egophony constituted no ground On removing the ribs of the left side, a large of objection to the presence of fluid in the eyst was opened, which occupied the whol chest.

Now, as to the measurement, it is true cavity of the left plears, that viscus hein compressed on the spine, and occupying that from whatever cause fluid becomes space scarcely logger than a closed hand effused into the chest, in an early stage, the This cyst contained about right pints of sero measurement of the chest is increased; but purelent fluid. The walls of the cest wer if it continues long in the cavity, and any thick enough to allow of its being dissecteattempt is made by nature to perform a from its costal attachments, and presentethickened, corregated, and covered with From the consideration of all these cir-layers of coagulable lymph. Here is the

chest. You see always in a person who re-covers from emprema, that the shoulder and the respiratory murmur was only very falls, and that the ribs are drawn in, so that indistinctly to be heard, particularly at the the admensurement of the diseased side of posterior parts. Nevertheless it was heard; the chest becomes less than that of the other but all around it, through the fluid; ægoside, and you will see by drawings the very phony was very distinctly evident under the great contrast that exists between them, left scapula. She was then in so perilous Well, then, if you hear this in mind, you will a state that I consulted Dr. EDWIN HARsee the absolute necessity of getting rid of arson, who I believe to be the most skilful the fluid, and consider it as absolutely ne- physician in London in detecting pulmonary contact with the pleura costalor.

the fluid to be got rid of? There are three girl's master, but Sir Henry, on the ground ways of getting rid of the fluid, namely, ab- that it was not yet necessary, objected to sorption, spontaneous evacuation, and the what I very much wished to have performeneration of paracente is. Now such a ed, that is, the operation of paracentesis, thing has occurred as the absorption of as there was possibility of the girl dying, purulent fluid in empyema. Bullann re-even were it performed. I did not press it lates a case where it appeared that the fluid against such an authority as his. I examinwas absorbed, and as the potient had been 'ed the chest very carefully, and found there taking acctate of ananonia, he attributed the was some tenderness an pressure. I apabsorption to that medicine; last ti at is very plied cupping-glasses over it very extenrare. Spentaneous evacuation is not so un-rively, and abstracted a small quantity of common, and it may take place in either of blood, only ten ounces. I supported her two ways, -- by observation through the places strength by strong beef-ten, and gave her costalis, and deathar his itself externelly, as much as her stomach would bear of or which more frequently hoppens. Ly sulphate of iron. She immediately began opening sites are in the bron lead tables, to improve, and her strength increased, and discharging itself by expectoration. I The expect ration still continued, but at difficulty of breathing, respirations furly a hished. minute, frequent cough, expectoration of thick mucus, pulse 120, skin exceedingly case, in which there could not be any pos-her, face flurhed, great thirst, and loss of side question of the spontaneous cure of the apperite. She was filed immediately, and disease, empyema, by the exacuation of the took large doses of digitalis for three days, fluid contained in the cavity of the chest, and at the end of that time, suddenly, an through the brunchial tubes; but whether expectaration of most offensive parafeat the care takes place in such cases by abmatter appeared. So offensive was it as to surprise, or by the spontaneous evacuation render it scarcely possible to remain in the of the fluid, the cures are exceedingly rare, room with her. She was a person of a pe- and if you wait for any considerable length talis, and a grain of opinm, there times a in these cases in which paracentesis has 400

shouse which covers the ribs. You will place almost immediately. Hectic flushes therefore see that is in indipensably sixes-of the checks followed, and a pulse exceedary, in order to promote a cure, to take flugly rapid and exceedingly feelle. I exacure that the fluid be evacuated from the mined her chest, and found it almost everycessary to being the phura pulmonalis in disease, and he confirmed the opinion that it was a case of empyema. The opinion of Sir Now, then, the first question is, how is HENRY HALFORD was asked by the wish of the met with a very singular case of this kind, the cut of nine weeks it had almost totally in the month of February last. I was called classed, the respiratory murmur had retaker a servant heing in South-street, Grees turned in aboust every part of the chest, vener-square, and the symptoms under and the dainess of sound on percussion was which the fabouned were these - great not allegether gone, but very much dimi-

You will observe that this was a distinct culiar temper, and it did not occur to me at of time, and the patient's strength becomes the time to think it probable that the girl, very much reduced, the operation of paraafter an attack of so short a duration as centeris may be performed with much less three days, had such a disease as empyema, prospect of success. It therefore becomes I did not examine her, therefore, with the exceedingly interesting to inquire what are stellowcope, but I gave her three grains of the chances of recovery; or, in other words, the superscente of lead, one grain of digi- what does the result of observation teach us day, and to my great surprise the expecto- been performed. Dr. Davies, who has perto totally coased in twenty-four hours, formed the operation in ten instances of and her strength, the difficulty of empyonia, gives a table in the "Cyclopedia and in three weeks from of Practical Medicine," in which he states the time of the transfer of age, one was aged between the constraint was a state of the transfer operated on the transfer operated on the state of the patients were under the time of the patients were under the time of the patients were under the time of the transfer of proportions. Of those who were under six while allow a quantity of six to be adufitted, years of age, five cases recovered, and the which is considered to highly dangerous. reason is this, that the greater elasticity of the six of the control of a considered to highly dangerous. Now with respect to his evacuation of a the hones, makes then much more discussed as a children was a child in an area of the control of the contr the bones, makes them much more disposed to yield to the pressure, so that the pleura costalis and the pleura pulmonalis can be brought the more readily into contact, which is the point of cure.

You see, then, according to this, that the probabilities of recovery, when the operation of paracenteris is performed, are eight cases out of ten. In the medical journals of the 30th of November, 1833, there is a case of a child, seven years of age, who was operated on by Mr. Wooden, of Brompton, and he had the goodness to invite me to see the operation. It was an exceedingly weak and conscisted child, and presented the symptoms which I have just related, indi-cating empyons. The operation was performed, three pints of purplent matter were evacuated at once, and a considerable quantity of air entered at the operation, to which fact I beg your attention. The wound was suffered to heal, and the child was supported by nutritious diet, but in the course of three weeks there was reason to support that some fluid had again been secreted in the chest. The operation was performed a second time, and a smaller quantity of purulent matter was evacuated. Again air was admitted, and from that time the child went on gradually improving, so that in a short time his respiration became perfect on that side. chest on percussion was perfectly clear, and the child is, I believe, at this moment, in perfect health.

Now, as to the time of operation, I believe that it should be as soon as possible after the disease is detected, and I think the instance which is before us is a clear proof of the correctness of that observation. When fluid is allowed to remain a considerable time in the cavity of the chest, it will of necessity compress the lung against the spine; and if adhesion of the lung against the spine takes place, you will see the very little probability there is of effecting a cure. It is, therefore, a matter of very great consequence to perform the operation as soon as you possibly can, because in the early stage it is almost certain that no adhesion of the lung has taken place, that the lung is free, and that the process of cure will, in all probability, go on without interruption.

Now the next question, and one of very great importance it is, is this, whether the wound is to be allowed to heal immediately, or the canula to be left in. The reasons for advising that a canula should be left in are these, that the sudden evacuation of so large a quantity of fluid is apt to produce very great debility; and that, if you were to evacuate the whole of the fluid at once, you

exceedingly emaciated condition (I am now alluding to Mr. Wookfr's case), where all the fluid in the cavity was evacuated, without the child suffering in the least from the evacuation. Again, we have had several cases in this hospital,—one a very remarkable case, in which six pints of serum were evacuated from a man's chest, without any injury being produced from it. Certainly, therefore, as far as my experience goes, and as far as I have been able to examine the cases that have been published, I see no reason to believe that the sudden evacuation of fluid is, of necessity, at all dangerons. Nay, more, I believe that the space which the fluid occupies is filled, in a very great measure, by the air that is admitted, and the presence of this air does no harm whatever. In Mr. WOOLKY's case, on both occasions of the operation, a considerable mantity of air was admitted, and neither time did any bad symptom follow. In the case of the man who was operated on in this hospital, a very considerable quantity of air entered, and occupied the place which six pints of fluid had recently occupied, without any symptom of inflammation supervening. But in the course of two or three days it appeared as if a greater accumulation of air had taken place. The lungs on that side afforded less marks of respiratory murmur, the sound on percussion was preternaturally clear, and the breathing became exceedingly difficult. Mr. WALSH, who is now practising at Worcester, devised a most ingenious little canula, to which a piston was attached, not much larger than this needle. This was introduced into the chest, and the air was pumped out. No inconvenience followed the use of the instrument, and the patient went on to a perfect cure. I see no reason, therefore, for concluding that the presence of air is necessarily a source of danger.

Now as to the place of the operation. LAUNNEC advises that it should be performed between the fifth and sixth ribs; and the reason he gives for the advice is, that when the lungs are diseased, the attachment takes place more frequently between the superior lobe and the pleura, immediately under the clavicle, and between the lower lobe and the diaphragm, and the centre lobe is generally the freest. Again; it happened to LAENNEC to pass a trocar into what he supposed to be the cavity of the without fluid following the i and it was found upon the trocar had not the pleura at all. Termile not so uponly need of the right wide you must withe fiver is v git i

^{*} See LANCET, No. 535, page 356.

largedeand rises a great way into the realest breathing somewhat short. On the 7th of the pleurs; and a dulnest of sound of September he was ordered iodine and hybercussion may often arise from the liver defodate of potass. On the 27th of September being pushed up, and without any fluid beber a tumour was observed, between the ing present, it will be necessary in performing the constitution of the state o ing the operation on the right side to be very cautious, remembering that you are size of an orange. Baopin's needle gave in the neighbourhood of the liver, but you evidence of purulent contents. A seton will be almost certain to pass the instru-needle was passed through it, armed with a introduced between the fifth and sixth ribs.

But this is not all. Adhesions frequently take place between portions of the lung and the ribs, and, therefore, even this direction is not sufficiently minute. In Mr. Wooley's completely, so that on putting the car to that part of the chest, you heard the respiratory murmur distinctly, but as the ear was brought forward, you found the respiratory murmur was almost inaudible. It therefore became necessary, instead of puncturing between the fifth and sixth ribs, close to the latissimus dorsi, to bring the instrument still further forward, and to choose that part where all sound of respiratory murmur was absent. Therefore, before you attempt to perform the operation, you ought to examine with great caution, and ascertain case was that, when the operation was per-that no respiratory murmer is present, and formed, though such a considerable quanto be perfectly aware of the possibility of adhesion between the lung and pleura.

Now having said so much upon the nature of the disease, and the mode which is adopted in order to effect the cure, we will conclude the history of Dyson's case :- On the 9th of July a flat trocar was introduced between the fifth and sixth ribs of the left side. On pushing it in, at first it seemed to carry the pleura before it, for on withdrawing the trocar from the pleura no fluid followed; but by plunging it suddenly in, the pleura was punctured, and about twenty-eight onnces of a turbid yellow serum, with flakes of floating lymph, were thrown out. The chest emitted no clearer sound after the operation had been completed than it did before. On the 11th, the patient is reported to have remained much in the same condition; his breathing was somewhat good, and his general health was improved, but the left side was not in the least degree clearer on percussion than it was previous to the operation. Severe ptyalism came on after that, from a small dose of calomel and rhubarb given on the 14th, the effects of which continued to the 31st, after which time his general health seemed daily to im-Move, and he was able to sit up for several in the course of the day.

15th. He is reported to have in the same state. Since bing has been quieter, meh improved, but in has taken place on the let of September

clastic, and fluctuating, and of about the size of an orange. Baodin's needle gave ment into the cavity of the chest, if it be skein of silk, and the contents of the tumour were evacuated. A discharge was kept up, supposing the tumour to be connected with the interior of the thorax. Four days afterwards he was reported to feel much easier. The secon went on discharging, but not in case the lung adhered posteriorly, almost such quantities as to warrant a supposition that it communicated with the chest. The discharge was of a thin purulent character. and the patient now seemed to be losing strength daily. On the 15th he was considerably worse; he could not then sit up, and he suffered much from difficulty of breathing. On the 19th there was lividity of the countenance, blueness of the lips, coldness of the extremities, and depression of breatking, which symptoms increased until the 22nd, when he died.

The one thing of chief importance in this tity of fluid was in the cavity of the chest, only about eight-and-twenty ounces were withdrawn. We felt at a great loss to account for this, for there was not the slightest doubt that a great quantity of fluid still exist-ed in the cavity. We thought it possible that the circumstance might be accounted for by the pleura having been sacculated. You will find cases published by Dr. Townsend in the Cyclopadia of Practical Medicine, - there are one or two mentioned, -in which the adhesion took place at different parts, forming three or four distinct cysts containing fluid. We thought this might have been the case here, for on passing the needle higher up, a short time afterwards, the fluid again escaped, showing clearly that there was still a considerable quantity remaining; but I now believe the explanation of all this to be, that, from the position in which the man was lying, the canula must have come against this band, which, as I have already shown you, existed, and which prevented the evacuation of the fluid. But you may ask then,-" Why not have performed the operation again?" Why. the reason was this; the man took two grains of calomel, combined with ten grains of rhubarb, to open his bowels, through which ptyslism came on, and the man hecame so exhausted as to make it evident that all hope of recovery was gone; we did not, therefore, think it right to submit him to the further pain of another operation, because, even though we had aucceeded at this time in evacuating the finid, it could not have been attended with access. His strength was then supported

as much as possible, and nothing more was girl, about five years old, who was being done than to alleviate, as far as we could, symptoms as they arose, until his death. 1 must, however, say, that if a similar case were to occur again (and this is admitting that we did not do all we might have done), I should certainly perform the operation, because I believe there could be no possible hope of curing the man except by the evacuation of the fluid from the chest.

ON THE

TREATMENT OF FRACTURES

WITHOUT THE AID OF SPLINTS.

By W. C. RADLEY, Enq., Surgeon, Newton Abbutt, Devonshire.

(Concluded from page 251.)

to me, that whatever is written, which does never found ease. Observe a child asleep, wasted, and so much talent misapplied.

right, have ended happily! The rie medica- tractures. But sound reasoning, and a simtric nature in the case of fracture, - a cause ple, natural, and therefore a correct pracof suffering that daily furnishes abundant rice, founded thereon, are very different sources of observation, and for the cure of things; for Mr. S. Cooper and other surwhich so little has been done in the way of geons recommend the thigh to be put in the improvement since the days of Hippocrates, straight position of Dessault, - a position - is that portion of our art to the considera- which must be inksome to many, because it tion of which I am now striving to direct is unnatural to those who through wearings attention. How often have I seen acci- retire to rest. It is not the position of the dents made worse by meddling ignorance, tired sleeping child, who is almost bent into or by the supercrogatory offices of mis- the form of a ball. But to return to my little taken nid, yet ultimately triumph over all patient, those retarding checks! This voluntary. An ev power of reparation is the true magni Dei seeing the child so easy under a fracture of datum to human nature, and " not cinchona the femur, shrewdly suspected that the bone bark," as a popular doctor once said. This was not broken at all, and that the surgeon power, however weakened, is always ready was only "making a job of it." She whisperto assist us in surgical curations, and only ed her suspicions to another old crony (the waits to be guided or followed aright, to child had lost its mother), and these wrotches fulfil our intentions.

fracture in a middle-age liman, in an old and was displaced. The inlection feeble woman, and in a very robust subject, and felt the crepitus were detailed, all of which were cured by and, conscience-strice

the splintless method.

Case 4.—The next case I shall mention age, and, secundem artis, plint occurred in August 1830, in a weak little the pieces of vencer, though with

carried in the arms of her sister, when both fell together, and the younger had her thigh simply fractured. The name of the child was Towse, and she lived in Newton Bushel. The bones were brought into apposition on n pillow, a handage was applied, and some isolated slips of thin mahogany rencer, were lightly placed here and there over the charse of the fracture, - for show, not for use, not exerting any effect. My reason for placing them so, was to propitiate the ignorance and prejudice which always strennously contend for retaining old forms. I thus affected at that time to do as others did; but not so now. The child remained under the evaporating action of a moist bandage, in an easy state, for four days, sometimes half sifting, resting on her elbow in bed, and playing with her fellows. She ate and drank as usual, and slept without disturbance, for the limb was placed in the natural position, That donkey-like emulation which makes which I in a great degree had let her choose "every ass think his own bray the hest," and which she said was easy to would be extremely diverting, were it not her. Would she have so kin at ease with her true that struggles for place and prece. little thich outstretched upon a splint? Or dence cause the great interests of humanity even with a rather tight buildage around to be neglected or forgetten in the contest, it? Certainly not. Where there is the least In our noble profession it has long appeared, feeling of restraint in such cases, I have not either directly or indirectly tend to the and note its natural and "easy positions," alleviation of suffering, is so much time. What an admirable passage is this on position in fractures!- "The most easy position It is sickening to observe the rage with of the limb is that which is usually chozen which novelty in medical science is pursued, by a person who is sleeping; for then all while every-day cases are little understood, motion is suspended, and every part assumes and therefore ill treated. Yet in spite of that posture which is most congenial to the neglect, how frequently do we discover cases pinds." This passage prevents a foundation that have gone on unassisted, or have even for a superstructure of rational arguments in been malticated, which, with a little setting favour of sound practice in the treatment of

An evil-minded old woman on the fifth day, iffil our intentions. | took off the bandage, and actually placed In the former part of my paper, cases of the child upon its feet! The bone is

pressure than a consistent with any mode of far the most important and essential. With-procedure. The aid ultimately did well; out them, indeed, it would be in vain to atand so, indeed, do others, even where much nanecessary force is employed. Mr. Gaye, my esteemed friend, makes very good cures indeed, and uses splints; but he is extremely careful, and does not employ a tithe of that force which I have seen employed. Sta, I repeat, that all splints are useless. Parden me for saying as much for about the twentieth time; but I should continue to say so to the twenty thousandth time, to banish splints from surgery.

CASE 5 .- Richard Curnell, aged 45 I think, a pauper in the village of Kingsteignton, in the month of August 1831, slid from the top of a large corn rick which he was thatching, and fell to the ground. The height was upwards of twenty feet. The part of this paper. A man named William clavicle and the femoral shaft on the right Tickle was standing between two pieces of side were both fractured. The fractures were not compound, but the depth of his fall and the violence of the shock greatly the bones against the flat side of the oppo-aggravated the symptoms. The thigh was site stone. The state of his health and placed on a long pillow, on a bed perfectly soft, and treated with the tailed bandage, wetted with cold lations; the skin was sponged with topid water several times a day, allowed freely to evaporate in the common atmosphere of his toom. As the cure advanced, camphorated and oily embrocations were applied generally over the limbs, of leather, overlapping the tractured portion. kept on with a bandage, perfected the cure.

The progress of this case was as satisfied tory as a anisfortune so severe could be; for the patient's sufferings were obviated by he was a member of a "Sick-and-Hurt Ch.l.," so he did not hurry himself in getting about ings of the poor are most easily excited; against their medical attendants on matters; which have even only the appearance of rationality to justify complaints, which in such of Ideford, on the 22nd of January 1831, cases as these might be thought well justification on a dark night, overturned a

tempt to keep the extremities of the fracture from being displaced." Once more I repeat, that I have never found cause to attempt to keep the fractured ends of bones together by splints and tight bandages. The bones stay in their places, and maintain good and proper positions, without giving me the unnecessary trouble of making the attempt. And why? Because I have never, by irritating causes, given the muscles rea-son to be angry with my treatment, and, as an expression of their resentment, to "dis-place" the bones, and give me the trouble and the patient the pain of again reducing them.

Two cases of dreadful compound fractures. terminating fatally, were hinted at in a former granic, one of which, about a ton weight, tell algeways against his leg, and crushed strength would not warrant amoutation, and he died of mortification, extending through the body, on the ninth day. Mr. Gervis of Ashburton saw him, but nothing more could be done to save him.

The other case was that of the man named George Cole, who, in the month of December 1826, had both legs dreadfully and, at last, the supporting circular plaster; shattered by a premature explosion of gunpowder placed in a horizontal hole in a mass of granite. Mr. Gervis saw him with me, and I determined to take him to the Exeter Hospital, with the concurrence of Mr. Gervis. He was removed thither in a simple management, and fortunately for him spring car upon a feather hed. He hore the journey well, suffered amputation of both legs on the following day, and died too soon, like some poor fellows must do, two days afterwards. These are the only One circumstance occurred in the progress fatal cases of fracture that have occurred in of the cure which pleased me. The clergy- my practice, and fatal they would have been man of the parish, the Rev. T. W., in his anywhere. But there are very many of my accustomed visits to his sick parishioners, patients whose present habitations and mine expressed surprise "that splints were not are, by the hand of fortune or of death, far applied to Richard's thigh;" but when he separat d, -- who could have borne most found that it was not a part of my plan to ample testimony that their fractures were apply splints, he pointly acquiesced, and rured by the means which I have described ceased to advocate their use; for which I in these papers. My next case is one of thank the reverend gentleman,—for many great importance in the history of the mode reasons, one of which is, because the feel- of cure now insisted on.

CASE 6.-George Wills, aged 30, living when such men as Mr. Pott, to use his heavy cart, the rail of which fulling across clare, "that without splints the his leg, fractured both the tibia and the fibida. He had, some three or four years of fractured bones," fibida. He had, some three or four years had writer, with more of a cart. And now for the contrust in the a source us, that " of treatment on the two occasions. In the ent pieces of the apparatus for first accident the limb was splinted up most int of fractures, the splints are by carefully -so carefully that he was kept in

bed for seven weeks, and a considerable it was only four miles from Newton. The time afterwards elapsed before he was able limb during the internal was frequently to work. On this occasion it was my turn bathed with warm was and lotions,—first to assist him. The fracture of the tibia was of Plumb. Superaces, challen, next—R. P. as oblique as it could be, the superior portion overlapping the inferior, and the point of the obtruding end above, having nearly penetrated through the skin at the small part of the leg. He was now placed in bed with his leg on a pillow, in the way which I have already sufficiently described, and, leaning on his elbow, he watched proceedings with much attention.

"Which way do you most usually lie in bed?" I asked. "Do you prefer lying on your back or your side?" "On my right side." "Very well," said I. He was then reclining on that side, it was his right leg that was fractured, so he remained in the same position. The leg was first gently extended with genuflexion, and the thigh a little raised towards the pelvis. A very slow and refterated course of extensions was then made, until the contour of the limb pleased me; the tailed bandage was next laid on, and then the pillow was tied up, padding it to a regular bearing on every part, and until the patient said, on being asked, that it lay easy in every respect-not harder at one point than another. The following dialogue then followed: -

Wills (reclining, half raised on his elbow) .- "Why, Doctor, don't you put splints

on my leg?"

R .- " Because, my friend, I always cure

broken bones without them.

Wills .- " Humph! Well, to be sure, Zir, you ought to know best about it; but when I broak my leg last time, that Doctor splinted et up well all the time I was in bed.

R .- " And for how long a time was that? Wills .- " Why, rather more than zeven weeks in my bed and room, and the splints were kept on arterwards too."

Were the splints applied tight or not?"

Wills .- " Tight, i'fath! ah tight zure cnough!"

R.-" How did your leg feel? Was it not very hot and painful at times?"

Wills .- "Iz, i'fath! 'Twas pain zure enough, it beated and clapped like one's pulze agwain (agoing), and I coud'nt sleep nor be azy, all day and night long, for a good while, and I ax'd the Doctor about et, but he told ma I must hear it, bekaze the bone coud'nt be cured without ct.

R.-"Well, no doubt what you say is true enough, I don't in the least doubt its truth; but don't you fear: I shall, in four weeks, make as good a cure of your leg as the other was in seven weeks, and you shall

not suffer this time."

Wills lay back in bed and shook his head, but answered nothing. His looks expressed his doubts without any necessity for speech. I saw him three or four times that week, as and paid me to with thanks.

tassa Nitratis 3 solve in Agua bilj. Tr. Opii, et Marrha, aa. 28s. Add. The bruise from the eart rail on the stense was sever, and he took Extr. Beladonne gr. ij ad gr. vj om. noct. with composing effects. On the seventh day Lint. Saponis Comp. was used to moisten the sore and tender surface of the leg. Lotion for the handage as before.

On the second week I saw him but twice. and on visiting him on the nineteenth day from the accident, never had I felt more surprise in such a case. I found my patient delighting himself at my expressions of surprise, with his leg resting on a pillow upon the long seat in the kitchen. I warned him. with some feeling, of the danger of coming down-stairs, thinking it premature, being a fracture of both bones, and one bone in this case could not become a support to the other-always better than a splint, if you please. But on looking at his leg I found that no limb could present a more fair and equable surface. He was a young and healthy man, yet the short time occupied in the remedial process surprised me. Union had taken place, though not firmly. While cogif ting over it, the jocose fellow threw the flexor and extensor muscles of his leg into strong action, which made his leg bend at the fractured part like an osier twig. I felt the blood rush into my face, and exclaimed-" If your leg is so well, don't play the fool with it." "Why, Zir," said he, "'lis no pain to me, " No, I don't suppose it is," said I, " but 'tis the right way to do mischief."

A medical man is all his life a student. Every case presents some new claim to his notice. Talk of displacing bones when once fairly reduced! Why, 'tis the surgeon's fault or the patient's, certainly not the fault of nature in her uninterrupted operations. The man did not displace the bones at all, and I was not slow in passing a circular overlapping plaster around the united parts, on my next visit, with a warm and comfortable bandage, the month being February, - the depth of winter. Words can faintly tell how delighted and thankful he was at this, to him, surprising cure. To be cared without pain was unaccountable to him, and he was endless in his contrasts between the two methods. No man could be better pleased, and he was, with additional good reasons, pleased, when he compared my charge with his former long bi

On the 25th of February, than five weeks from the dent, I called and reno had been out of doors superintending his man

CARE 6.—Mr. Bowden the master, fract which was broken obliquely, transversely, tured his flouring in the following Christman, four or five inches below the lower edge of also dislocating his ankles. He lay in bed the patella. The fracture was one of "the but a month and then beautiful the patella. but a month, and then recovered. He could not bear a plaster around the part, but got well without it.

CASE 7 .- An old Newfoundland man, residing in Kingkshenwell village, presented a schewhat parallel case. Twenty years before, and it had been my turn to serve him ; he had broken his leg while engaged in the Newfoundland fishery. One night in the Christmas season of foolish carousing, he fell down on his road home, in the dark and dubious way, and again broke the same unlucky leg. This might be called act the unlucky leg. This might be called act the second. His leg was treated with the same routine as my other cases, though with very He returned to his humble materials. work at the end of four weeks, and many a sailor like oath did he bestow on "the blockhead of a doctor" who had kept him "so long belayed in board splints and blankets, in his berth, on board the old brig, on the banks of Newfoundland."

CASE 8 .- Another case, which occurred the Christmas before, was that of a man 50 years of age, who had lived freely. Walking over a wooden bridge on a frusty night, his heels slid away, and he fell backwards, and the elbow of one arm received the violent shock of his descent He was a very heavy man, and the injury was correspondingly severe. Being at a distance of four or five miles, they did not send for me until the next morning, when I found the arm much swollen. The humerus was fractured obliquely, passing into the elbow-joint, and the inferior portion of the hone projected anteriorly, where the biceps muscles become tendinous, and the bone just pointed through the integuments, and made it a work of time and tact to reduce it, as the hone stuck in the tendinous expansion. Here was a compound fracture, with complications enough, and a bloated constitution to boot. Did I place this dreadfully injured arm in a splint? Would any other surgeon have laid it on a splint of any sort? Let the practice of Sir Astley Cooper and his colleagues answer,a practice recommended by lofty-minded men, in elevated stations in society, with all the force and influence of splendid folios. This man employed all the little resources which I could suggest to reduce the alarmingly increased action of the arm and forearm. Many would have recommended amputation at first, but he escaped that, and pagrene also, and in five weeks left his bed. bring a fork or a cup to his mouth. 20th of August last, Mr. of this town, while driv-well, had the harness we debed him soverely icks partion of the tible,

worst" species of simple fracture, as it is termed, the iron points or talons of the horse's shoe inflicting two wounds at the line of fracture, one of them deep and lacerated. There was much tumefaction in two hours afterwards, when I was called in. Truth compels me to say that a practitioner had examined the injury before I saw the patient, but a sudden obstetric call made him leave in a hurry, and the splints were left behind also. I reduced the ends of the bone, and bandaged and laid the leg on a pillow, in my old way. The pair of neatlyturned hollowed-out splints lay on the chest of drawers, and there they remained. " No, said I, as they lay there to tempt a surgeon to use them, "you are for ever banished from my hands. No more the galling splint for me; no more!"

Mr. Leslie, who usually attends this family, entered at the latter part of the bandnging-up, and, with true politeness, did not alter the state of things. It always gives me pleasure to record such instances of urbanity. The patient did well up to three weeks' end. Mrs. Russell was a very clever nurse, and bathed, and managed well the wetting system, turning the bandage off and on many times in the twenty-four hours. I am delighted to attend on these cases; they are worth a man's efforts and energies to relieve them. Mr. Leslie being away, I saw Mr. Russell every day, until Mr. Leslie returned, and splinting up the leg, took him This was on the eighteenth out of bed. day from the accident. Union had well advanced, the cure was so far complete, and the patient's impalience would not allow him to remain longer a-bed. The splitts were long, and well-padded, and as no particular soreness remained, they did no harm,-nor good, excepting that the patient's mind was assured that they would be "a safeguard against accidents." But their appearance is to me always awkward and grotesque in the extreme. Mr. Russell went down-stairs in a few days afterwards, and on Tuesday the 22nd of September, two days less than five weeks from the accident, he stood on the grassy plain of Denbury Fair, vicwing the horses, and soon wholly recovered, by the aid of the wide circular overlapping plaster and bandage, he having previously laid aside the splints.

Case 10 .- The last case, and to me and my patient not the least gratifying, I shall mention, may now be examined by all those who feel concerned in such misfortunes. who retr concerned in ance missorthes, Cherry Tracey, aged 40, the mother of ten children, on Wednesday, the "glorious" 21st of October last was gathering accorns, when, while holding fast by a small branch with one hand, and picking

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bed for seven weeks, and a considerable it was only four miles from Newton. The time afterwards elapsed before he was also like the during the integral was freq ently to work. On this occasion it was my turn be absist him. The fracture of the tibia was no oblique as it could he, the superior portion overlapping the inferior, and the point of Planck. Superiors. As gas. Add. The Iruise of the obtruding cud above, having nearly from the cart rail on the stones was severe, penetrated through the skin at the small penetrated through the skin at the small part of the leg. He was now placed in hed with his leg on a pillow, in the way which I have already sufficiently described, and, leaning on his elbow, he watched proceed- leg. Lotion for the bandage as hafore.

ings with much attention.

"Which way do you most usually lie lo bed?" I asked. "Do you prefer lying on your back or your side?" "On my right side." "Very well," said I. He was then reclining on that side, it was his right leg that was fractured, so he remained in the same position. The leg was first gently extended with genuflexion, and the thigh a little raised towards the pelvis. A very slow and reiterated course of extensions was then made, until the contour of the limb pleased me; the talled bandage was next laid on, and then the pillow was tied please. But on looking at his leg I found up, padding it to a regular bearing on every part, and until the patient said, on being asked, that it lay easy in every respect-not harder at one point than another. The following dialogue then followed: -

Wills reclining, half raised on his elbow). -" Why, Doctor, don't you put splints

on my leg?"

R .- " Because, my friend, I always cure

broken bones without them.

Wills .- " Humph! Well, to be sure, Zir, you ought to know best about it; but when I broak my leg last time, that Doctor splinted et up well all the time I was in bed.'

R.—" And for how long a time was that?

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CASE 10.—The last case, and to me and mention, may now be examined by all those who feel concerned in such misfortunes. Chorry Tracey, aged 40, the mother of ten children, on Wednesday, the "glorious" 21st of October last, was gathering acorne, when, while holding fast by a small bysach with one hand, and picking

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with the other, the twig broke, and the fall with force enough to fracture the tible transversely. This was a mild case of the sort. I saw it nine hours after the accident, and applied the wetted bandage over the leg. The fracture was one inch only below the centre of the bone. A pillow was too high for her leg, because she sank down so low in the bed; a little hollow was therefore nestled out for her leg in the bed itself, and therein the limb was padded up, on a good plane. She began to do well at once, and on the Saturday week after, in the evening, ten days only from the accident, on calling to see her, and asking her when she thought she would like to get out of bed, she replied with timidity, "Ha, sir, I have been out a little to-day." She actually had been out little to-day. for three or four hours. I cautioned her to beware, but she regularly arose in the morning, and remained out the whole of the day every day afterwards. A plaster was applied around the leg, in the usual way, with a bandage, by which means, in her two rooms on the same floor, she manages, with crutches, to perform her family attairs for a husband and several children. All this was done spontaneously, before I was aware of the full extent of her recovery. Indeed, the reader may have observed, that nature has often outrun my expectations in the progress of her work. I have assiduously watched the progress of this case, taking care to hammer in a rough nail in the end of each of her crutches, lest some slip should produce an unlucky fall, and mar this al-most wonderful and truly surprising cure. 1 believe the quickest union before recorded is one of twelve days, in a child, but this exceeds it in rapidity; but as to the degree no one can speak. A woman who has passed the prime of her days, having had a large family, enduring privations as a pauper, was here able in some degree to rest her foot on the ground, in ten days after the occurrence of the fracture! Let the doubters of splint-less cures hear this. Will they still assert the indispensable necessity of using splints? At the end of my present argument had I desired a case to form a climax, what fact could be more appropriate than that which I have just stated? Let the case be examined by any person. Let the rev. gentleman of Kingsteignton institute a personal scrutiny into the facts which it presents, and then let me have a fair meed of praise for introducing and advocating a mode of cure so benign in its influences. More than this I do not wish; with less I will not be satisfied.

In conclusion, let me address a few words in juxtaposition.

to the young student, whose mind is ardently But should both these bon engaged in a search after truth, and who do not fear they will be to has time and patience to consider the facts a condition to sustain the of a case. I will, in fancy, place myself in in such a state is like a dissecting-room, and imagine the shade of ceived a stunning kaoc Brookes, - would that he could m body still cannot rise again, until there is

be here, to descant on some such anatomical and physiological and cts as the following:

Every rib exocit the deat and the last is wedged between its neighbour ribs. Gravely the rib is shielded superiorly, and supported below by its fellow rib, the first and last excepted. In a fracture of these bones, each of its fellows forms a natural support to it. You cannot apply a splint here, and if you could, the natural allies of each rib would form a better support than any artificial aid.

The radius and ulna sympathize with and support each other, in the misfortune of fracture happening to either; while, with one point of exception, from peculiarity of structure and office, the interesseous muscle and ligaments keep them in close contact, and they cannot therefore require the aid of splints. If both these bones at once are broken, be assured it will be quite natural for them, like the Siamese youths, to lie still together, unless you molest and "bind them fast in fate," in the painful fate of splints.

Is the humerus or the femur broken? The latter, in particular, is invested all around, and beautifully and strongly inclosed within, by integuments,-by an unyielding fascia made tense at the pleasure of the will, supported by a mass of muscles, its natural defenders; with a host of vessels to supply it with warmth and to afford the means of restoring its continuity, a continuity not lost, but merely interrupted; nerves, also, exquisitely alive to pain, which warn of the approach of danger, and will not impel their obsequious servants, the muscles, to disturb the bone, unless offended by irritating causes; and if through force or violence the bone is impelled through the investing coverings, reduce it to its place in situ, and all will be well, if you withhold interference with the operations of nature.an interference that will be prejudicial, though honest.

In a fracture of the fibula we need not trouble ourselves with splinting, because its tried friend tibia will, with rest, compel it to keep its own place better than any external aid. Again, is the tibia itself broken? The interesseous ligament, when not ruptured, is a firm band of union between the two bones, just commensurate with their length. We may further quote the words of a good surgical authority:—"The fibula resists the causes that tend to produce displacement of the tibia, when fractured." Thus much for the support given by bone

recovery of struction. So the leg, if not state the my system in the glowing lanirritated, will the disposition to He still guage of science, and in a style which will
until well recovered. Assist the cure, and
charm the world to a belief of its truth. For
when once settled be careful not to indict
though I myself well know that in all cases

pain on it.

Reverse all this. Apply the splints First you will irritate, and then forcibly repress the influence of a most sensitive nervous surface, compressing arteries, veins, and absorbents, and then combatting the ill effects until you conquer and subdue their friendly resistances to your vile force, ultimately bringing some portions of the soft parts into painful collision with the fractured ends, to be grated between their sharp margins, - to be jagged by the teeth like fragments of the broken bonc.

If a surgeon who is also an anatomist, after pondering over these cases and arguments, still continues to apply splints to fractures, should not he -

But the language of sarcasm is not my forte, nor do I wish to use it, save by way of useful aid to mild arguments. Yet the importance of lessening human suffering, warrants the use of every means of rhetorical force. Let it not for a moment he thought, that in describing the ill effects of coercion and undue restraint under the employment of splints, I have at any time used the lan-guage of hyperbole. No; the superfluous misery endured in the slow and painful course of past ages, under the splinting system, can never be exaggerated in description. What a huge mass of human suffering has arisen from the unnecessary inflictions of pain by splints alone! I do not rashly speak when I assert that full one-half of the misery which has been endured in fractures, has arisen from the long-continued use of splints, or, in other words, what pain has been heaped upon us in these cases by maltreatment alone! But shall we still persevere in this course? Shall we still go on rolling up the Pelion of our powerful but foolish exertions to load the Ossa of unavoidable calamity? Forbid it, Heaven! Unavoidable misery is a mountain huge enough in itself to press us to the dust, without the weight of extraneous and gratuitous evil.

But granting all I have advanced to be strictly true; if, instead of myself, who occupy a private station, some one of those men who stand the highest in our profession, had first proved the truth and value of the splintless system, and then had sounded forth the great improvement to the world. with how much greater celerity would the change advance, and how much more worof public adoption and of confidence e considered!

ver, it has been introduced discrity of talent which.

of fracture, my mode of cure is to the patient the safest and the best, and, beyond dispute, cannot be surpassed in the simplicity of its operation; yet slow is the progress of first improvements! But I am well convinced that surgical art will not have reached the acmé of perfection, without some such simple plan of treatment as I have endeavoured to press on the consideration of my professional brethren, being first adopted. Yet an age may pass away before this mode of cure. waging war as it does with a multiplicity of interests and prejudices, shall conquer and prevail. Before I shall have aroused the attention of the carcless, made converts of the rich, persuaded the proud, convinced the opinionated, and compelled the interested and the obstinate to yield to the influence of shame, many years may have rolled away. Thrown then, as it is, gratuitously on the professional public, I hope that the public will give a fair trial to the system of cure, and pass a fairly considered verdict on that which I design to confer benefit on thousands of suffering individuals.

Nov. 10th, 1835.

REFLECTIONS

UPON

INFANTILE REMITTENT FEVER.

By JOHN ALEXANDER, M.D., Physician to the Infirmary for the Diseases of Children. Manchester.

(Concluded from page 410, No. 617.)

"WHATEVER splendour," remarks an experienced writer, "the actual treatment of diseases may reflect on the science of medicine, it by no means comprehends the whole of its province; for prevention being in every case preferable to remedies, the medical art would be more imperfect than other science were it devoted only to the latter.

Let us then (with a view to prevention) briefly allude to those circumstances which favour the origin of infantile remittent fever. They are of varied character. The neglected inhabitant of the damp cellar and the petted lordling of the luxurious nursery the half-fed child and the highly pampered offspring, are alike prone to an attack; the latter from the absorbent system being encumbered with a load of nutriment which but too often requires a fever to admit of its removal, and the former from defecthe facts and rules tive nutrition, developing a morbid action ed will, ere long, he which is observed to be equally excited by shed by some man of deficient or by superabundant support. and standing in society, who Hence it results that a child threatened with the malady under consideration, these to claim rable digest of the party of chart, regarded relatively to the ascertained matura (wills "Cyclopantia" differential the remarks from conclusively as a large of the conclu what scanty diet; whilst the debilitated and examplineous must, if possible, be more warmly clothed, removed to drier sir, and have better support. Unhappily, the last important desideratum is one which every medical attendant upon a dispensary must have experienced, as being easier prescribed than put in force, and hence it constitutes one great cause of the frequency and obstinacy of infantile remittent fever in the as the staple diet of the poor, viz., potatoes, present writer, to the disorder's aggression. remitient never attacks children at the with symptoms of mero disturbance of the breast, when the mother's health is good, first passages; sometimes under the slow speaks, I think, volumes as to the influence and fusidious form of marasmus, mattended of food in originating the malady. In both with much vascular excitement; and some the malady. impunity.

pathological views of our continental neigh- which in some slight cases may have apsours, without judging for ourselves, we peared, to the superficial observer, to have should refer the cause or nature of infantile been little threatened. On close attention, remittent fever almost exclusively to inflam, however, the characteristic evening febricula mation of the digestive mucous surfaces, is easily recognised, and secures the neces-On autopsy this status or condition is doubt | sary attention. less often observed: but practitioners in this country do not draw their conclusions from under consideration assuredly is the one limited data, on the isolated and deceptive evidence of mere morbid anatomy; although, I fear, it cannot be denied that, even with us, an undue attention is arising to the latter, which will prove eventually injurious relief is sought, and from an originally weak to symptomatology and therapouties, the or specifically affected state of the child's really practical part of the Hippocratic art. constitution. In a large proportion of these This creed is not the popular, and I hope cases, particularly amongst the poor, whose may be a mistaken, one.

But, to return.—The majority of cases of toract our remedial designs, litt-infantile fever the present writer has wit-done. In a few apparent nessed, have afforded little evidence of in- instances, however, w famination being its cause; neither does the bath, and proverties infinitely more important evidence of Horrital ratives (carried to MAN, FEMBRATON, and BETLER, sanction cocaded by Birth tools, has the idea. Moreover, Dr. Copland, in an good. Not has the occasion

be put upon a light unirritating and some- mation, is shown by the character of its early symptoms, by its course, termination, and consequences, and by the juvantia and ladentia "—a strumous distincts, a morbid state of the abdominal secretions, an (structed condition of the mesenteric glands, particular disturbance of the liver, or a debilitated nervous system, may, it is possible, give rise to this disorder by their single maloperation in individual cases; but their conjoint influence I apprehend should be relower walks of society. If, however, we ferred to, as constituting the usual origin of succeed in hanishing all fresh vegetable and the complaint. Discases are not, either in salted food from the dietary of the pauper their sources or their symptoms, regulated child, and substituting milk, bread, and rice, by the definitions of nosologists; and, pro-in their place, a great point will be gained; bably, that medical philosophy is not the most illogical which admits of a varied and contributes no little, in the estimation of the mixed causation as well as of varied effects! Infantile remittent fever making its ag-

The observed circumstance that infantile gression under varied forms, - sometimes the plethoric and debilitated, a course of times with many of the tomultuous phenoalterative aperient medicine is not merely mens attendant upon inflammatory fever, - I proper (as indicated by the character of the have in practice found it necessary to adopt abdominal secretions and appearance of the a treatment modified accordingly. When tongue), but frequently proves effectual in the disease commences with loaded tongue, warding off a strongly-threatened attack of nausea, chills, oppression at the precordia, To those families whose constipated bowels, and high-coloured urine, younger branches have been liable to febrile smeties are of signal service by relieving affections, an annual visit to the sea-side has the oppressed first passages, diminishing always appeared to me highly heneficial: the fever, and cutting short the complaint's nor are airiness of the sleeping apartments, iduration. Indeed, their use, continued for a the constant use, in clothing, of flaunel, and few mornings, accompanied by general aperegular daily exercise, to be overlooked with rients, and succeeded by strict attention to suitable diet, often suffices in a very short Provided we were servilely to adopt the time to restore the little invalid to health,

The most incurable variety of the disorder characterized by the apyrexial and marasmic conditions; doubtless from these two circumstances,-the complaint having in too many cases made progress before professional damp habitations and improper diet con

of a mild blister over the region of the liver or a mind sing over the tayon or as they because attende with benefit. Many practitioners enterted to be spine, and over the abdones. There is no objection to their use, as this form of infantile remittent is unaccompanied by irritability; but I may add, after an extensive trial of them, that the present writer has not been able to realize the benefits others seem to have derived from their employment. The following case will illustrate the disorder's obstinacy, and inculcate a cautious prog-

In the month of May last, the child of a Mr. II., of Rochdale, atat. fourteen months, was brought to Manchester for my opinion. It had been under the care of two highly respectable and intelligent practitioners of that town, who had adopted for a considerable time every variety of treatment they could think of. The child's case was, though by no means an uncommon, an admirably · marked example of chronic infantile remittent fever. Upon the closest scruting, complaint's progress, and the child took everything, whether in the form of food or writer. Indeed, according to my general experience, if the means alluded to before, of medicine in this uppromising state of atrophy. Change of air, a generous diet, and cordials, may be tried, and in some rare instances they unexpectedly effect our object.

When infantile remittent fever assails plethoric children, previously in tolerable health, it is generally observed under the last alluded to, or entonic form. For this variety energetic measures are required, and their use soldom disappoints us. After the prima via has been well cleared (of which the practitioner should have ocular daily proof), by the persevering use of purgatives, such as senna, calonnel, jalap, scammony, &c. and the accumulations so often observed in this complaint, are removed, it is not unusual to find the child complaining of pain in some one of the abdominal regions. Its seat is very various. A few leeches, warm fomentations, and a succeeding vesication, ser the antimonial clutment, seldom fail in its removal. After premising these meait has been customary with me to the employment of a mercurial d. c. creta), combined with doses, of which latter affections of the

men mich of hitaffile remittent fever. In seknowledge irritability to be one of its most prominent features. On this account the addition of a little oplum to the evening mercurial, in most cases is accomp with benefit, with this proviso, that the tongue is disposed to be moist before we employ it. Occasionally however, as with the adult, onlim disagrees, and hypocyamis affords a good subtlitute. Enemata, throughout the whole of this mindly, are most appropriate remedian variet of course according to are, temperatures, and other attending circumstances. As one almost invariable ingredient therein, spirits of turpiontine will be found useful, as in a large proportion of instances of the malady, the fever is heightened and the irritation increased by the presence of worms. As soon as the pyrexial symptoms have declined, and not before, calumba, iodine, and cascarilla, may be employed, in forms as similable to a child's palate as possible, intermitting not, however, the morning use of some gentla aperient, which, during the whole course of no evidence of organic disease could be the disease (a period averaging probably detected; little pyrexia accompanied the three weeks), must be regularly enforced. Wine may now be found a useful auxiliary,

In conclusion, let me remark that the medicine, that was given to it; yet I am junior practitioner must not be surprised at not aware that the slightest benefit followed the occasional failure of his best-laid and the use of those additional remedies which most promising measures. The fretfulness were for some time employed by the present of the little sufferer, the perversity of ignorant nurses, the occasional impossibility of administering remedies by the mouth, and viz. very warm clothing, the hot-bath, mer- the natural obstinacy and dangerous chacurial alteratives, &c. fail, after a fair trial, racter of the disease, will, sometimes, but little benefit will accrue from a further use too successfully, combine to thwart and disappoint his wishes.

Manchester, Nov. 11, 1835.

HEMORRHOID IN THE RECTUM.

FOLLOWED BY

ABSCESS IN THE PERINEUM.

WITH FISTULA BECT! BTG.

To the Editor of THE LANCET.

Sin,- As the following case will, perha be considered to possess some practical in-terest, I shall feel obliged by its insertion in the moss of your land. the pages of your journal. I am. Sir. your obedient servant,

ROST. ROWLET CHEYNE. 57, Berners-street, Nov. 11, 1835.

Mrs. K., atat. 50, of a sullow complexion and spare figure, housekeeper to one of the West-end Club-houses, consulted me on the doses, of which latter 22nd of last August, for what she called the affections of the very under sensualding with extreme weak-Every one who pain in the calves of her legs, increased by Walking, or any exaction. "The had thes which were now of a livid red colour, hot, suffered during two months, and knew no cause for her complaint. The menstrual secretion ceased six years ago, since which time, until lately, she had been perfectly well. She had never, to her knowledge, had piles, nor passed blood by stool. The bowels acted regularly, and without pain. She had never had leucorrhou; her constitutional symptoms, when I first saw her, were not severe, the pulse being very little quicker than natural, the tongue only slightly forred, and the skin cool and moist. She experienced, however, much anxiety (which was expressed in her countenance), from the apprehension of permanently im-

This history, I must confess, induced me to consider the case as one of sciatica, and (acting on that idea) to recommend very moderate diet, gentle aperients, thirty min-Ims of Vin. Colchiel in Mist. Camphore, three

bath every night at hed-time.

This and similar treatment, continued still there existed a sensation of weakiness, perforem; to relieve which, another opening and, lately, of soreness, about the hips and was made, and a great quantity of pur perineum; and once, when at stool, a slight flowed out. pain had been felt shooting through the anus. From these facts I now hoped to obtain light enough to dispel the obscurity of the case. As I was aware that diseases connected with the rectum often assumed very anomalous characters, an examination per annu, was immediately proposed, with the view of ascertaining whether the present; was a case of that nature. The result was, the detection, about an inch within the anur, on the floor of the rectum, of the presence of a soft elastic hemorrhoid, of the size of et catap. a cherry, surrounded by some thickening and swelling, as if the coats of the bowel | days. Sloughing has nearly stopped; no were pushed inwards by fluid in the vicinity. The impression, too, of distinct fluctuation, was given to the finger, when foreible pressure (which gave no pain to the patient) was made by the other hand, on the perineum. All doubt being now cleared away, the proper practice was evident. The contents of the abscess should have been at deep cavity surrounding the intestine, lateonce discharged through a large opening, and then, in all probability, my patient would have been well in a few days; nothing, however, would induce her to consent to my request: she could not imagine the existence of an abscess without much more pain than she experienced. Under these circumstances nothing more could be done than to advise her to keep quite quiet, to take a teaspoonful of Elect. Senne every night, and to inject an enema of warm bottom of the abscers, and contin water every morning.

Thus the case proceeded turn the arrived found to communicate three places when I found suffering acute three places with the Thus the case proceeded until the 1st of pain in the perineum, the integrements of from the sites

ind swollen, and acutely to on presu and avoilen, and actually seem on pressure.
There was, diships in plantaness or expected, a
great deal of symplectics, hever. The application of twenty-four folithes was immediately ordered, and afterwards a warpouldie; and is the evening these measures were repeated, and an anodyne draught was administered.

The next day the pain and swelling wer's less; but there was more fever, and some difficulty in making water. No further opposition being now offered, a free opening was made near the anus, when more than half a pint of dark-coloured offensive pur, with bubbles of gas, escaped, to the surprise of the attendants, and with great alleviation of the severe pain and feelings of tension in the part. A poultice was then applied, and directed to be repeated three times a day, and an anodyne to be taken at hed-time.

Sept. 3. Has had a restless night; pulse times a day, and the use of the warm hip- 120; tongue loaded with a brown for; copious discharge, mixed with sloughs of cellular and adipose tissues. Complains still until the 26th, afforded partial relief; but of much soreness and distention about the

Il Ammon, Subcarb, gr. xvj; Acidi Tarforize Dj ; Aq. Distit. Sing. M. et int. effervescendum 6ta quaq. hora smontor. Contin. catep. er haust. an::d.

4. Has had a better night; looks less anxious; pulse 110; lowels open; no difficulty in making water; copious discharge, and the sloughing continues. Cont. medic.

7. Has been improving for the last three pain; less fur. Cont. medic. et catap.

The three weeks following the last report were spent in aiding the efforts of nature to repair the extensive mischief, which, as has been seen, was the work of only a few days. During this time the sloughing process had converted the incisions of the lancet into a rally and posteriorly, discharging at first an unhealthy pus, which, however, ho-proved in quality, in proportion as the constitutional vigour of the patient was restored under the use of tonics and good diet. Strong astringent lotions were also employed, of which those composed of Sol. Chlor. Caleis, and port wine and water, seemed the most effective. The stage granulation at length commenced at all, save a fixtulous canal up, which, when traced

id to, and f of the hemorrhite third close to the

As it was now or the first to waste principles of the many and the control of the operation, this man performed,—the incident dividing all the parts included between the highest opening into the Latentine and the anns. After this the granulating processors commenced, and went on until it reached the situation of the two other points of communication with the rectum; and now, instead of again using the knife (as the hemorrhoid could be readily drawn out with a hook), a ligature was tied round its base, including that portion of the mucous membrane in which the third small aperture could be distinctly seen. In three days the ligature came away during the action of the bowels, and from that period the case proceeded so well, that towards the close of the month Mrs. K. went into the country quite recovered, promising however, to continue the use of an enema of warm water officers to that obloquy which it morits, we twice a week for some time, in order to ensure the regular action of the bowels.

Remarks.—This case is full of interest. It lessness, that is, perhaps, unique in the shows the fact that large collections of mathamatical annuals of our medical institutions. shows the fact that large collections of mat-annals of our medical institutions.

ter may take place in the neighbourhood of The principal medical institution in Presheavily many many training treatment. Letches, claim to the honours and the fees of a physhich, undoubtedly, should be applied in large numbers, followed by paultices, relieve the pain, but do not materially retard the sloughing process when it has once commenced. Indeed, we can do little more, when the case has so far advanced, than support the patient as much as possible, and aid the escape of the sloughs as soom as they are loose; for these, lying in contact with the living structure, cannot fail to prove a source of irritation.

as in the above instance, in a passive man, and three honorary surgeons attached to ner, are perhaps connected with some cause the institution; and so the rules enjoined of obstruction to the return of blood through and the reports continually declared; but of obstruction to the return of many his property in reality, there were six general practi-mently coexist with piles. In our present tioners. Notwithstanding this anomalous

rineum, with the consequent imperhe milineum, with the consequent imper-set circulation in the capillaries, is quite sufficient to explain the occurrence of sup-

CHARGES PREFERRED BY THE LATE SURGEONS OF THE

PRESTON DISPEN

AGAINST THE PHYSICIANS OF THAT IN-STITUTION. \

To the Editor of THE LANCET.

Str,-As you have always evinced a desire to rectify abuses in the medical profession, trust you will permit us to lay before the medical public, through the pages of your journal, an instance of intrigue and faith-

ter may take place in the neighbourhood of the retum, without being preceded by the cream, without being preceded by the cream of the land in the continued in the continued in the carly does it prove the great importance of freely opening abscesses in that situation at an early period. To the refusal of my patient to submit to this practice, all the subsequent michief was to be attributed. Inflammation, once set up in a tissue possessing such feeble virilly as the adipose (especially in individuals of an unhealthy habit, is very little nucler the combination of antiphlogistic treatment. Leeches, healthy habit, is very little nucler the con-practitioner, at the same time that he laid trol of antiphlogistic treatment. Lerches, claim to the honours and the fees of a phy-

Most abscesses near the rectum, forming, were, ostensibly, three honorary physicians eatly coexist with piles. In our present tioners. Notwithstanding this anomalous a the rectum probably state of things, the greatest harmony seemes t way through the hemorhoid to prevail among the honorary officers up in fact, what is called "a to December last. Then an alleged irregular tite dance of some of the medical officer. an irritation laduced the sub-committee (whose duty l the abscess; was to see that the affairs of the institution of the institution of the state of the same of the same of the same of the neglect, and where the

some of the medical officers were to resign, redignations, but took are steps to fill up the as their places could readily be supplied. The truth of this statement Dr. Moore afterwards chose to deny, notwithstanding the Dr. Moore, and at his house. He so are warms chose to cory, neverthestanding me interestation of the sub-committee, alleging that he had morely directed the sub-committee to "look requently reminded his colleagues, in his after the shop," meaning the dispensing of peculiarly clegant language, in that "there medicine (the Ductor's phrasoclogy must be no splitting," but "all must put frequently needs interprotation); but, unfortunately for himself, he had declared to a colleagues "that no opinion should be given medical friend shortly after meeting the to the committee, or to the subscribers sub-committee, that he had been telling without a general consultation, and that all them "to look after the dectors." After must go out or remain in together; adding hearing the testimony of that friend, he ." If any question be put to me. I shall say. "I reluctantly admitted that he had made use can make no reply till I have first committee of such an expression, but said that it was my colleagues." merely used "by way of a joke." Some: In May a meeting of the subscribers to the people, however, have such an old way of Dispensary was called to consider the resig joking, that no persons but themselves can nation of the medical officers, and make conceive how their expressions can possibly some "verbal alterations" in the rules o be construed into a jest. The gentlemen of the Institution. Dr. Moore drew up a me the sub-committee thought that the Doctor imerial to be presented to the meeting, it was in earnest, and as they had not the which he gave a partial statement of the candour or honesty to bring a charge against causes which had led the medical officers to the offenders (and they well knew who resign then appointments, and in which he they were, they hit upon the expedient of declared the differences between them and procuring a book, in which they resolved the committee to be "irreconcilable." that the medical men should enter their deference to his opinion, four of his col names, and the time of their attendance, leagues signed this address, and were the whenever they came to the institution. In prevented from being personally present a this they exceeded their powers, for their the meeting. When the subscribers met duties were defined to be simply to observe they expressed no opinion of the cause o and report to the general committee.

immediately entered a protest in the book was still not made. When two of the sur against the measure. This protest the physical manufacture when the others are seen as a common such that the result of sicians, and Dr. Moore with the others, at the proceedings of the advertibers, they feld is proceedings of the advertibers, they feld is proceed in the proceedings of the advertibers, they feld is proceed in the proceedings of the proc to find that the instigator of the whole uffair precettaining the feelings and intentions o was arrayed against them. The general their supposed friends, before they took any committee was called together, and the final step. Accordingly they called upor medical officers, as part of the committee, Dr. Moore, who not them with a smile, and attended the meeting. An attempt was the salutation of "Well, gentlemen, I know there made to force the obnoxious regula- what you have come about, but I have made tion, but meeting with none resistance that up my mind to stay, who ext. goes out, and they seemed to anticipate, the authors of the measure, with a very lad grace, coughanted to modify it, bullging the house-sure geon to be the inspector, instead of attempted ently. but so I have ing to compel the honorary officers to he threw upon the tal

seif-inspectors.

The treatment which the medical officers change the subset with at that meeting, was such that had suddenly they thought they could no longer continue Ale would not do to q

offence rested. Dr. Moore (whether he as serve the Limitution, and shortly after scroen himself from consure, or not, he heat wards, they all sent the sub-committee clandes secretary, offening, herever, to fulfil the tinely, and told them, that they must "look professional duties until successors were to the doctors," and they need not fear if appointed. The committee accepted the same of the medical officers were to region to the doctors.

the re- goation, but they confirmal all that The book was first presented to the surthe committee had done, and passed a rid
geons, who, not aware of any neglect on
the reclude four of the honorary intdica
their part, and knowing that the sub-cominfliers from the committee; thus actually
mittee had no authority to enact any regulaattempting to punish them for having re
ton for their guidater, naturally felt indigisted a most arbitrary and uncaded to
meant at what they regarded as an insult; and some observation

bedy of subscribing that "the poor should seeith Character of the medical aid furnished not be made to desired the late of the to the sick poor of the several parishes other sentimental expressions of "humanity" which he had entirely forgotten that the bull several parishes, and called "The Union comprises fifteen parishes, or had wholly overlooked, for ave months, during which the affair had been pending.

The surgeons afterwards found to their sur Cise that the other two physicians of the charity, Drs. Alexander and Norris, influenced by Dr. Moore's representations, had also come to the determination to sacrifice their word and consistency, to what they conceived to be their interest. Thus was explained a previous declaration of Dr. Moore, that he knew that there were medical men who would serve the charity if the number of its officers was reduced.

After such an instance of duplicity and deception, the surgeons considered themselves All taken from the nearest point. I am sorry bound, for the honour of the profession, to that I cannot at present add the population separate themselves entirely from the playsicions, and to act independently of them, bury, and Northfleet, are considerable. On They accordingly withdrew from the Insti- the forming of this Union it was at first possession, apparently to their great satisfaction. Although they had received official intimation that the committee had accepted their regionations, they knew that no apology would be offered for the insults into the control of t would labour under the disgrace of having tion of the guardian, or the relieving officer, one of their number excluded from the 10s, in addition being allowed for each case

animosity; but we conceive that it is our duly supplied with medical men, is within duty to expose conduct so unprofessional, 5 or 6 miles of the most distant of these have brought to light. We offer no comments upon the previous statements, nor duty for so madequate, and, as regards attempt to ascribe notives to individuals, proper and efficient assistance and a due last rest satisfied with a simple declaration supply of remedies, so contemptible and sanction of every honourable man to the sion, including Cliffe, Cobham, Cuxtan, course which we have pursued, and that Halling, Higham, Frinsbury, Shorn, and due.

We have the honour to be, Sir, Your obedient servants, ROBERT BROWN, Late Hon. Surgenta RIPHARD INMAN, JAMES HARRISON,) PERSON. Preston, Lancashire, Nov. 12, 1835,

THE MEDICAL CONTRACT FOR THE ESFORD UNION.

which I shall arrange alphabetically, and place the number of miles that they are distant from the residence of the medical officer (who does not even live in the Union).

in the case of each parish :-Cliffe 5 Chalk 6 Moepl Cuxton 4 mm 9 Cohham 4 Northfleet 19 Denton 7 Nursted 8 Frinsbury 2 Shern 5 Strood 1 Halling 5 Higham 4

tution, and left the physicians in peaceful intended to make two divisions of it, and a which had been given them, and that they and medicines, in all cases, under the direccommittee and have an inspectarship ap-pointed over them.

Chalk, Denton, Ifield, Luddesdown, Moep-we regret, Sir. the necessity of this ex-lam, Northfleet, and Nursted (aithough posure, and disclaun all feelings of personal Gravescul, a large and populous town, and and so inexplicably mean as that which we parishes, not one medical man was found of the truth, assured that we shall have the disgraceful a sum; and, for the other divireprehension will be bestowed where it is Strood, one only offered from among about twenty in Rochester where the one resides) and its neighbourhood; and whether from necessity or otherwise, the guardians actually appointed this one for the whole I'nion, with the united salaries.

Now, Sir, passing by any observation on this sacrifice of professional respectability. this contemptible value for medical services, offered and accepted, I would ask what opinion must a humane mind form of the views and intentions of these " guardians, so called, of the poor, towards sick panpers? What must be the opinion of the poor themselves? It appears to me that had the " guardians" boldly advanced a resolution al eminently that medical aid to the sick poor should be as a Member; difficult to obtain, they could not have hit the rights of on a more effectual plan. In cases of fracto pour the turn or other accidents, hemorrhage or in-

flammation of the lungs, life may be lost by the very delay caused by having many miles to send; but even in ordinary cases of iliness, that the poor creatures should have to send or attend personally at so great a distance, seems a monstrous cruelty. I am told that the guardians think it best to have but one responsible medical officer, whom they require to be a legally-qualified prac-titioner, leaving to him the supply of necessary aid. But lo they require also, and see, that the aid a furnished, is that of " qualified" persons Can they expect the medical officer to expend so much of his paltry salary as a qualified person would have a right to expect? I think, Sir, that these are matters for the serious consideration of the guardians," ere a coroner's jury remind them of their duty.

In the furnishing of medical aid to the Unions in general, and to this Union in particular, one would almost he led to consider that the very lives of paupers were put in competition with a few paltry pounds sterling. Many other observations auggest themselves to me on this occasion, but the communication of Mr. Rumsey coming before me, and having reason to expect that his questions will be generally considered and replied to by the medical men in this neighbourhood, I shall for the present suppress further remarks on the matter, and am, Su sauther ticating my communication in a private note, yours truly

HUMANITAS.

Rochester, Nov. 9th, 1835.

GERMAN JOURNALS.

July, 1835.

The two last Numbers of the above journal, which we have received, contain :--

1. Practical Observations by Professor FLEISCHWAYN, of Edangen. 2. On an Epidemy of Augina Parou lea, at Ohrdruff, in 1830, by Dr. KRUGELSTEIN. 3. A Pew Remarks on the Diagnosis of Intestinal Cicatrices, by Dr. Albers, of Bonn. 4. Practical Remarks by Dr. Lowenmann. 5. On Thymic Asthma, by Dr. Hin-cu, of Konisberg. 6. Two cases of Religious Maduers. with remarks, by Dr. Weiess. 7. On the till the 11th. On the 12th it diminished, efficacy of "Argilla depurata" in the Diar- and had completely disappeared on the 12th rhug of Children, accompanied with vaniet. rhum of Children, accompanied with vomiting, by Dr. G. E. Dunn.

We shall notice only the most remarkable with difficult deguate of the above communications. The first is the cervical chain contained in the "practical observations" of excessive thirst, and Dr. Fleischmann.

PRESERVATIVE EFFECT A BULLADONNA ATINA. ABAINST-ME

Some experiments with this medicine t were made on fifty-two children during an cuidemy of scarlatina, and though not on a sufficiently extensive scale to have much weight, deserve to be added to the number of those instituted for a similar purpose?

The extract of belladonna (2 grs. to an ounce of distilled water) was administered to fifty-two children, of from six months to fourteen years of age. Each patient took, morning and evening, as many drops of the solution as he counted years, and this dose was in some instances increased. The remedy was thus administered for the most part during five weeks,-the duration of the epidemic.

Of the fifty-two individuals forty-eight remained free from any attack, and four were affected with the disease. In two families, where the children commenced taking the remedy immediately on the disease attacking one of the family, all the children remained free from contagion, although they were in constant communication with the affected individual during the whole course of the disease.

In several cases 'Di the author remarked symptoms of the action of the belladonna a few days after its use; such as disturbed nights, slight inflammation about the throat, salivation, thirst, torpor, delated pupil, pain in the heal, comiting; and one girl, six years of age, was seized, on the 10th day after the first dose, with fever, pain in the throat, Hefeland and Ozon's Journal. - June and restlessness, and delirium. On the following day the whole of the body, except the face, became red, and was covered with miliary vesicles: this continued a couple of days, and then disappeared.

A boy, four years of age, who had taken the bella lonna for three weeks, became very uneasy and disturbed on the 5th of March; on the 6th this had passed off. On the 9th, the child, enjoying perfect health, was covered in all parts of the body, except the face, with a red eruption, which remained

A child, eighteen months of taken the belladonna sign ukin. The eruption w

on the second and the child was well on the fifth.

From the above experiments the author concluder:-

1. That the belladonna seems to have an influence in counteracting the contagiousness of scarlating.

2 That in some cases it diminishes the susceptibility for the contraction of the discase, though it does not altogether remove

3. That when the disease does occur during the use of belladonna, its character is much more mild than in ordinary cases.

4. SCIATICA CUBED BY OPENING THE SCIATIC NERVE.

In many cases (says Dr. Lowenhard, as the patient was nearly in a fainting con-the author) of obstinate sciatica, the cause dition, he took a restorative. of the disease is unknown, and all the remethose of the extremities; and M. Johert a few menths. years ago divided and removed a portion of. we do not at this moment remember what the result of that bold operation was. The cight days the patient recovered a good deal of strength; a considerable quantity of a following case, though not exactly of the grayish fluid, different from pus, was dissame nature, deserves to be recorded.

Case. - Mr. B. 38 years of age, of good constitution and sanguineous temperament, same discharge continued, the patient was was seized with pain in the region of the left hip-joint, in consequence of some violent exertion. The pain continued fixed for about two months, and then extended downwards in the direction of the sciatic nerve. After the expiration of aix mouths, the pain became so severe that the patient was unable to place his foot on the ground. He now demanded medical aid for the first time: various remedies were tried in vain, and he came under the author's care in six months afterwards. The patient was now much emaciated; the injured limb particularly reduced in size, and the heel so pain- from the joint itself. I that the patient could not stretch out his without aid, and had the most acute cord about the thickness of a

wowing down a dirty sediment. r some reflection the author conceived that perhaps the swollen nerve contained a watery fluid, as in the case mentioned by Richter (Speciel. There. part 2, p. 79), but how to give issue to this fluid was the question of most importance. A simple incision would easily have produced the desired effect, but it was necessary at the same time to impress a stimulus on the muscular system; the author therefore determined on employing the actual cantely, which was applied immediately to the nerve, where it passes between the trochanter major and the tuberosity of the ischium : on the iron being pressed with some force into the bottom of the wound, two to three ounces of a yellowish-gray fluid came away. The wound was then dressed with some mild salve, and

The day after the operation, the patient lies which are applied fail to relieve the with a very small pulse. Some stimulants patient from the dreadful and constant suf- and cordials were given. On the 21st same tering to which he is exposed. The effect state; the wound still discharges a little of division of the branches of the third pair fluid, and was dressed with ung. canthar. of nerves, has induced some surgeons to The pain of the foot has now changed into recommend a somewhat similar operation for a dull sensation, the patient slept a little recommend a somewhat similar operation for this night for the first time since many

22. Passed a good night; he can now the aciatic nerve for obstinate sciatica, but stretch out his foot without aid; the wound charged from the wound. The injured limb increased rapidly in size, and after a lause of some months, during a part of which the perfectly enred.

There can be no doubt, from several cases which have been published, that water may accumulate in the tissue uniting the medullary filaments which compose a nerve, nearly in the same way as in hydrocephalus. The author is inclined to attribute both phenomena to a similar cause, namely, chronic inflammation. In the present instance it scens probable that the capsular ligament of the hip-joint was also involved in the disease, and that the quantity of fluid subsequently discharged was in part furnished

5. THYMIC ASTUMA.

The attention of the profession, says Dr. under the skin, in the Hirsch, of Konigsherg, was first drawn to merre, which was this peculiar affection of children, in the chancur; this part year 1830, by Dr. Kopp, who gave it the the the touch; the name of "Asthma Thymicum;" since then the urine deep red, several interesting observations have been 2.3

made by the German physicians, of w the author of the memoir new before as

gives an ample reservi.

Asthma Thymicum, or, as it is more generally called in Germany, "Kopp's asthma," attacks children between three weeks and nighteen months, but prevails most between the fourth and tenth mouth. It is characterized by accesses of spasm in the air-passages, and genoral frritation; the respiration becomes suddenly suspended, and we ob serve only a whizzing, very fine, small, and imperfect inspiration, an embarrassed passage of the air through the rima glottidis, highest degree. The tone has a certain analogy with the crowing inspiration of nate; and now, even when the child is free tions, and which resemble the tone in a very set, he is carried off suddenly, as if by nervsevere degree of croup: in the most danger—ous apoplexy, without asthma, râle, or any perceived only at the commencement of the other children. paroxysm, being immediately suspended, to On examination of the body after death, gether with the breathing; or on the cessarian we find a blue colour of the skin; congesor when the attack has been very violent, peculiar "chlous-looking" fluid. In the cases that the child remains for some time pale, where the gland was weighed, a good deal flaccid, and with a tendency to sleep. In the of difference was observed. Korpus intervals of the paroxysms the child is gay, the largest to weigh 14 dres the respiration quite unembarrased, and Plater, if oz.; the asi the patient seems to enjoy perfect health. of 91 drachms; Ka Kopp gives as peculiar symptoms the two varied between six following, viz., the tongue during the inter-

mile reseases projects by little beyond . in leath, and the polation of the hears in correly the side of the several genuine. can scarcely the cases of this disease the dest symptom has not been observed, and even in healthy children the pulsation of the heart is not readily felt. The parovysms are generally single, with an interval of eight or fine days, but by degrees they occur more frequently, and even reach ten to twenty in one day; in this period the child frequently goes off suddenly; however, in several other cases a second period sets in, which is charactorized by general convulsions of an epiwhich is spacemodically contracted in the leptic nature. The cerebral and respiratory paroxystas never occur together, but alterbooping-cough, but it is much fuer, higher, from the attack, the lumbricales and the adand less deep; the closest analogy we can ductors of the thumbs become spasmodifind for it, is in the spasm which frequently; cally contracted, and give the hand an apattacks certain hysterical women. In cer- pearance of deformity. The child now comtain cases we remark from five to six monly dies in a paroxysm between suffocawhistling, deep, and difficult inspirations, tion and anoplexy; or, in many cases, when alternating with scarcely observable expira- ; the accesses have been severe from the outons cases the breathing is completely sus-ingony; in this way the child of Professor pended; the fine inspiratory scream is then Hick died, Rest's Magazine, ax. and several

tion of the attack it gives the first indica- tion of the brain and lungs; softness of the tion of returning life; it is quite charactright ventricle; the foramen ovale someteristic of the disease, and pathognomic, times open, and in all cases the thymns The remaining symptoms of the paroxysms gland is remarkably enlarged. The long are the natural result of the spism of the and broad diameters of the gland are rerespiratory organs; the child is violently markably enlarged, but chiefly its thickcontorted in the bed, or under a more severe ness; in the latter case the laugs were freattack seems quite overwhelmed; the face quently pushed down by it into the lower is distorted by the expression of painful part of the cavity of the thorax; in other anxiety, is of a blue-red, or pale colour; cases the thymns was found closely conthe nostrils are expanded, the eyes fixed, nected with the great arterial and venous the hands cold, the thumbs contracted; the trunks of the chest or neck. The tissue of excretions pass involuntarily. Within a half, the gland appeared normal, or (what was or one, two, or three minutes, the parox- more common) was more flexby, red, and yem goes off: the child utters a painful and dense than natural, but never showed any uneasy cry, and soon becomes gay and play- trace of hardening, suppuration, tubercles, ful. It is only when the constitution is weak, &c. When divided, it frequently gave out a

very various; the quicker and more the proxysms, and horize it seems to the la small feeble children it weight (accord-Dr. Eck's child wiel on the third week; drachm; the average weight may be esti-Rullman's (Kopp, p. 64), after a suffering mated at from two to three drackers; it of twenty months. When a cure takes increases up to the second year after birth; place, the symptoms gradually decline, and remains stationary to the eighth or tenth the sease goes off in one to three weeks; year, and then gradually becomes absorbed but in other cases the spasma are not compictely removed before one or two years.

cularly exposed to this disease; in many months it is 1.099; in new-born children cases the mothers were of a weakly phthis 1.071; in a child fourteen years of age 1.029, sical constitution, and several writers have and at a later period is lighter than water. remarked a family predisposition. Boys In the authors thymicum, however, the are more frequently attacked than girls, weight of the gland is very considerably It holds gond also with respect to adults, increased, and varies from six to fourteen for from Frank's observations (Prar. Med. drachms, while its thick fleshy structure Pracept. 11, p. 760; men are more exposed | contrasts strongly with the soft spongy apto asthmatic affections than women, in the pearance of the normal gland. proportion of six to one.

same name, that it is difficult to say what particular maledy is meant; however, it i evidently differs from the disease which now occupies our attention, by the nature and ! length of the paroxysms, and by the acute march of the disease.

chronic hydrocephalus, a peculiar cough, has been seen early, the paroxysus are not which affects the child when awakened from alcep; the infact becomes stiff, the whole; general convulsions. ledly blue, and he remains for a minute without breathing, until the respication re- by the employment of any temporizing recommences with a loud cry. This symp-imedics. The first and most pressing inditom is constant in the latter period, and eation is evidently to moderate the spasthough it bears much resemblance to "Kopp's i modic attack; this is best done by the adarthma," may be distinguished from it by ministration of small doses of the " aqua the other symptoms of hydrocephalus.

and morbid anatomy of this disease, the remedy is not dangerous, and has the most author concludes that it consists, -

iderably in size and weight; methoral months. ing to Haugsted's experiments) scarcely a to the sixteenth or seventeenth, when nothing but a rudiment remains. Its specific Children of a scrofulous habit are parti- gravity also varies; in the fietus of eight

Having established the coincidence of The diagnosis of this disease is not very enlarged thymus gland with the disease in difficult, and it hears but a slight analogy to question, the author proceeds to answer a f.w of those mentioned by authors. Mil-several objections which may be opposed to lar's Asthma is a disease so loosely described the idea of the asthmatic symptoms being by English writers, who have confounded really dependent on the abnormal state of various and different affections under the the thymus. Our limits will not permit us to follow him through these; we shall therefore pass at once to the treatment.

The prognosis of the disease, though a very dangerous one, is not hopeless, especially when the child is strong, and not sub-Goills has described, as a symptom of ject to catarrhal affections, when the case very frequent, and before the appearance of

In the treatment, we must not lose time lauroce:asi," which are to be gradually in-From an examination of the symptoms creased. When given with precaution, the beneficial effects. When the spasus are 1st. In a periodic tonic spasm of the rest very violent, a small dose of musk may be spiratory organs, and perhaps the heart, added; in addition to these, asafutida, zinc, which, as the disease advances, extends to and particularly the sulphate of zine, have in and spinal marrow, giving rise to been given with very great benefit. The pavalsions and death. 2nd. In an accord object we have in view is to diminish the thymus gland, which the state of congestion towards the heart the lungs, heart, and the state of congestion towards the heart the large little states. or less disturbs and lungs, by proper dict, by frequently-repeated levery four to eight days) local bleadof a new-born child inge, blisters on the chest, and other similar means, regulated of course by the strength tere.
and constitution of the child.

Several physicians have endeavoured to act immediately on the enlarged gland, by the administration of anti-scrofulous resolvent medicines (and apparently with much success). as mercury, digitalls, iodine, &c. Twenty years ago, A. Burns proposed to extirpate the gland by making an incision in the anterior part of the neck, between the sterno-hyoid muscles; the finger was then to be worked down into the chest, between the starious and gland, and the latter removed with the aid of a polypus hook; but this operation has never, as one may well conceive, been attumpted on the living body. The following case, selected from amongst those published at the end of the memoir. will serve to give an idea of the progress of the discase.

CASE .- Victor V. M., twelve months old, suffered at an early period of birth from diarrhea; this however soon ceased, and the child became healthy; when, at the age of five months, he was seized with chronic bronchitis; from this time the mother remarked a symptom which she had not previously noticed, viz., that the infant on awaking from sleep, or immediately after, had the respiration suddenly suspended; the attack however som went off, and was generally mild in the commencement, but after the lapse of some time the paroxysms became more severe. The breathing was now completely suspended, the face expressive of great auxiety, pale, or at times purplish, and the body conculsively bent back. wards. After one or two minutes the child recovered from the attack, drew a few firm deep inspirations, and then uttered some sharp cries, after which he became gay and apparently well. The nature of the disease was evident; leeches were applied to the breast, followed by a blister, and small doses of calonicl with rhubarb were administered.

This treatment at first recented to be attended with benefit; the puroxyans were suspended for a week, but soon returned with increased violence, even every one or two hours; musk was now given without any amelioration, and after a lapse of eight days the child was carried off in a fit of suffocation, without any general convulsion.

The body was examined thirty hours after death.—The thymns gland was remarkably enlarged, and filled the whole of the anterior mediantinum; from the middle of the gland a process was sent off, which closely embraced the common jugular vein; the substance was very dense, and it weighed ½ drackms, or 570 grains. The right lungwas venarkably compressed, byt going in struc-

tere. The appearance of the heart was normal; the right wantiele was very soft she left was the foramen ovale was closed. The head was not aranimed.

managament to the terminate of the contraction of t

On Dropsies, connected with Supp. cased Corspiration and Congrabile Princ. By Just a THAN OSBORNE, M. D. Loudou: Sherwood, 1835, pp. 61.

THE condition of the prine has received less attention from the Scotch school of medical writers, and from all the theoretical schools of the continent, since the time of lieffman. than its importance in pathology and in practice would warrant; partly owing to the horror of humoralism prevailing, and partly in consequence of the want of good chemical tests of its constituents, or to the exaggerated views with which certain ignorant empiries and mountebanks choose to minical the community. The orthodox practitioner could not but treat the glass with disdain in which the quack had pretended to see the disease ; and, " to cast " the fortune of his patient; and to avoid giving occasion to adious comparisons, he could unreluctantly abandon signs which have know scarcely how to ecceptise, much less to interpret, - overbooking there very critical points on which Hippoceates, Galen, and the ancients, made the whole course of discuses to large; for, unfortunately, the authority of the ancient Greeks, and the light of their genius, were hidden from the earm maity amongst us, by their works not being translated, as was the Bible, into English. Cullenists, Brownists, and theorists of every class, found it easy, in the last century, to divert the profession for a time from those extensive and easily-discerned changes in the accretions which the aucients had signalized, and to direct their attention only to the beatings of the pulse, to the tongue, and to the extreme vessels.

The investigations of chemistry, applied to the uriue by Berzelius, Prout, Marcet, and others, have already become of practical importance; the presence and the proportion of uren, the phonphates, but augar, deserve in many cases without than any other sympathology is more attributely be found about a stion.

dropsy, and coagulating in the urine when i desect in size, and become hard in proporexposed to heat, was first detected by Dr. Wells. Dr. Blackhall milds further observations, and confirmed the announcement of Wells, that in a great number of dropsics, in which the urine congulated by heat, there was evidence of inflammatory action, and the in such cases, bleeding was productive of very marked benefit. Dr. Crampton recorded some cases in the "Memoirs of the Dublin Medical Association," to confirm the evidence in favour of bleeding. The inquiry rested at this point until Dr. Bright made the striking observation, that coagulable urine was connected with a diseased state of the kidneys. Drs. Christison and Gregory shortly afterwards published eighty-seven cases, and amongst those, the granular deposit in the kidneys was always detected when examination after death took place. Dr. Osborne has, in the volume before us. presented the results deducible from thirtysix observations, so that the evidence relative to this disease seems now sufficiently extensive to positively determine its nature. ney, and professes only to have been concated by him, we proceed to notice.

Dr. Osborne has described the appearance of the kidneys very succinctly and clearly.

"When an injection is thrown into the strery, even in the most successful manner, point: and which she become more firm The cortical portion of the kidney is the lability are signified by its not taking place times find is an in the lability are signified by its not taking place times find is an in the lability are signified by its not taking place times find it filling up, and encroaching so much on the other part, that the tabular portion is limited to small, insulated portions; and in these cases the tubuli increase in density, and become more confused together, the nearer they approach their termination in the mamiflated processes. In some of the most acute cases I found the lining membrane of the pelvis and upper portions of the uterus in a state of the vascularity, resembling crimson the changes produced on the sixe remarkable, and in my follow this rule,cases, the kidneys natural standard; cones spea sie te-

tion; the cortical structure appearing to be removed, and replaced by the gray deposit.

The smallest quantity of albumen is detected by the bi-chloride of mercury; but when this is used the urine should be acid, or many of its neutral salts will be precipitated. From frequent observation, we can declare that the acid urine of healthy persons, particularly when they have been taking severe exercise, yields a precipitate with this delicate test; and when influenza was last prevailing in London this precipitate was unusually shundant. Nitric acid, when there is more albumen, is a good test. Heat coagulates the albuman only when it exists in considerable quantity: when, therefore, the urine is said to be albuminous, it is quite necessary to state what tests have been employed. Da Osborne remarks, that .-

"The examination of the urine in this disease must be conducted according to one fixed rule, otherwise we shall constantly meet with apparent contradictions. The urine should be that which is passed in the Still, so difficult is " judgment" in pathology. morning before breakfast. It should not be that the relation of dropsy to the granular examined till it has couled. It then is condition of the kidneys is by no means yet insually of a pale citrine colour, simi-transestablished. Dr. Osborne was prejudiced parent or translacent, but not transparent against the opinion of Dr. Bright, in connecting congulable urine with diseased kid-vessel there is an opake, whitish cloud, consisting of the immers of the miner of the sisting of the mucus of the urinary passages, and differing from healthy mucus by its verted by the force of facts, some of which, greater density and opacity; while in other with the modification in the treatment advo- cases it differs from the healthy state by containing no mucous cloud. On heating this arine, in a spoon, over the flame of a candle, white congula are formed in those portions of the fluid next the metal, long before the heat has advanced to the boiling till the fluid has boiled, or till some of it has been evaporated; by no congula forming, and the fluid being rendered merely turbid; and, hastly, by throwing up a froth when boiled, which appears to be produced by the amallest quantity of albumen that can satisfactorily be tested by heat. I may here mention, incidentally, that I use this mode of examining urine in other diseases beside dropsy, and without any expectation of meeting albumen."

The proportion of ures, and the specific gravity of the urine, are diminished in this disease. The quantity of urine is not much altered.

Is congulable urine invariably the result

and sign of a granular, morbid condition of the most general cause of the disease. Supquestion in the affirmative, and animadverts very fallacious terms, with some severity on those who think further observations are required. He states collateral circumstances of all the other cases, led to the same conclusion :-

"The negative evidence in my possession is too copious to be detailed. It is, however, decisive as to the question at issue. It! which the kidneys were healthy, and the iously sought for every opportunity of examining the kidneys of every individual in whom the urine had been examined during life; and in up one instance have I met with congulable urine without diseased kidneys, or healthy kidneys with coagulable nrine.

Dr. Osborne has laid down two propositions, between which there seems to us to be some discrepancy. He calls this discree renal dropsy, and thereby seems to assert that the disorganization of the kidn-y-of the secreting gland - is the cause, the source of dropsy, - accompanied by coastable prine. An alteration in the secreting gland will doubtless account for an alteration in the properties of the secretion; but an aiteration in the fluid from which the secretion is eliminated may also account for an alteration of the secreted product, and effect the precise change in the kidnay described by Dr. Bright. If, as Dr. Osborne contends, dropey with cospulable urine is attributable to suppressed perspiration, it inevitably follows that a change in the proportions or nature of the constituents of the blood precedes the disease of the kidneys, and that course on mecane or one kidneys, and that peared to agree best with the individual this afternation of the kidneys is an effect of case, at hight at the hour of going to be a state of the case, at high the case of the case, at high the case of th the modified finid which those organs se- The patient also took at night eig crete.

Dr. Osborne's system of treatment is employment system founded on the assumption that the "con-yearsy he less lightly tinuous suppressed perspiration," which he to resulte he were proposes to denominate "Anidrotis," is journal paredient.

the kidney? Dr. Osborne answers this pressed perspiration, we tally remark, is a ay indicate two entirely different states of the cutaneous surface; for in popular language it merely that out of thirty-six cases, nine autopsies denotes dryness of the skin; and this state evinced the disease of the kidneys in every of the skin may arise from its temperature instance; while the symptoms, causes, and being a few degrees higher than usuall or from the fluids with which it is saturated having less elastic force. But the practice of Dr. Osborne appears to have been remarkably successful, and the results alone -independently of any theoretical conconsists of numerous cases of dropsies, con- sideration whatever-decide on the merits nected with diseased liver, impediments of of a therapeutic system. Of the 80 cases lity, which terminated fatally, in which the treated by Dr. Gregory with disretics &c., urine was examined before death, and found 45 died; of 36 cases treated by Dr. Os. not to congulate, and the kidneys were found borne, only nine terminated fatally; in the to be free from disease; also cases ending one series 56, in the other 25 per cent. fatally, but unconnected with dropsy, in perished: a proportion very favourable to the latter treatment. The numbers are not urine did not congulate. This evidence sufficiently numerous to furnish exact data appears to me peculiarly valuable, inasmuch of the absolute mortality of this disease when as during the last three years I have any of the absolute mortality of this disease when under medical care; but 51 deaths in 116 cases,-46 6 per cent .- is a high mortality, which would place the dropsy nearer to diahetes and phthisis, than to fever or inflammation. Bleeding, purgatives, and other remedies, were employed in complicated or obstinate cases; but Dr. Osborne thus describes the most essential parts of his treatment : -

"When a peri at was placed under my care, with general a Joun, congulable urine, and dry skin, I directed him to be kept in bed. in order to main ain warm hed the surface, which is usually disposed to be cold. It has happened frequently that, by external bent clion, an improvement both in the quantity and quality of the usine, and a material subsidence of the adema, have taken place. The first me licine ordered was usually a purceative; and in the choice of this, in order to avoid ambiguity as to its mode of action, I abstained from the use of all those articles which are reputed discretic; such as compound of jaiap, or supertartrate of potach; and I generally employed the scuna mixture. I then commenced a diaphorate course, by administering foor-baths, hipbuths, or general baths; the last either of stater or of vapour, according as they ap-

. I have some that we

of Puls. Jacob. par. 4., 61 Puls. Tot ing Confeet, Aromet!" Opie, and 10 gra

We have read Der Osberne's elegantlywritten book with much pleasure, and do not doubt, from the new and interesting facts which it embodies, as well as from the instructive manner in which the subject of the Beense is treated, that it will shortly be in the hands of all who take an interest in medical discovery. On this account we have freely stated whatever objections we consider to lie agains: Dr. Osborne's theoretical views; while we have detailed the result of his observations and experiments in the pathology and therapeutics of those dropsies which are accompanied by coagulable urine, and connected with disorganized kidneys.

THE LANCET.

London, Saturday, November 21, 1835.

of Medical Reform made some progress- calling general attention, by personal apwe are at least assured that it made much peal, to its examination, is a meritorious one, noise-in the Irish capital during the week we cordially concur in the favourable estipreceding the last. On former occasions this mate which we hear was formed by his subject has always been touched by the Pro- auditors of the manner in which Mr. ELLIS fessors of Dublin with a degree of delicacy dist harged the duty he had undertaken. But and reluctance which attend the handling of if our report of the lecture be correct, we a dangerous topic. The speakers seemed to cannot state that we think his enumeration feel as if some fatal catastrophe was neces-, of medical abuses was so comprehensive as sarily involved in its discussion. On the it should have been in a discourse professedly present occasion, however, the fearful ques- devoted to their discussion. Some of these tion-from the contemplation of which the omissions are indeed so remarkable, that we most courageous at one time used to shrink 'mean to notice them. In our experience, -was fairly brought before the public; and every sound reformer has always looked unon examined with a degree of freedom and fa-! the system of compulsory apprenticeships as miliarity that would indicate the total loss one of the most baneful usages of the surgical of its pristing terrors. To Mr. Ellis, one profession in Ireland. They have also ever of the lecturers in the Peter street Medical | thought the scale of fees to witness hospital School, the merit of being the first to ap- practice most oppressively and iniquitously

ment think, the temerity to announce his intention by public advertisement. No serious consequences, however, of which we have heard, have as yet followed the rash undertaking. He not only survived the exposition of a multitude of medical abuses in the medical institutions of these countries, and of absurd enactments in the statutebook of medical law, but, strange to say, he was cheered throughout his statement of the case of reform by a numerous assembly of students and practitioners. It is surely a step gained, in Ireland, in the progress of the question, to convince, by actual experiments, the hypochondriacal advocates of improvement in Dublin, that there is, after all, nothing dangerous in the entertainment of a topic in which mere reason and evidence are combined. To Mr. ELLIS are the profession in that quarter indebted for the disl coverv.

So far, therefore, as the act of divesting Jenging by appearances, the question the theme of its imaginary horrors, and of reach this hazardous subject appears to be unjust. Yet upon these two important items a discourse recently delivered in in the catalogue of medical abuse, no opidishment to which he be- nion was given in the oration of Mr. ELLIS. discussed the lead- In these omissions, which we presume were but had, as accidental, he was neither just to himself contemporaries nor to the question which he derigned to

the absence of condemnation of such glaring convince Mr. ELLIS the doctrine is with sceming justice, expose him to unwor- "cthics" is to be defended, let the labour thy suspicion that he was performing the be performed by those who practise and play " with the part of HAMLET left out by profit by it. Reference surely are not dilled special desire," The Tories, indeed, of the upon to burden their case with the pullinmedical correctations have already had the Ition of abuses, for the removal of which have been busy all the week in balancing abettors of this system be given "an inch," the unjustifiable inference from a mere acci- they will instantly take "an ell;" and inproceedings. Making every allowance for surgeoncies in the Meath Hospital, was pernice discrimination, it is unquestionably HARRAN for the situation of physician to true, that no man has a right to enter into the same establishment, was most virtua compact which will be productive of de- ously made. Neither Mr. Ellis, nor any a successor. This power constitutes nothing jutors in reform could look upon the act as less than the justification of one evil by the "the devil citing Scripture to suit his own morality permanent by precedent,-nay, between these parties, the line of demarcaconferring on both an abstract existence, tion is on every point sufficiently defined to and liberating their author from the tram- guard the reformer against mistake mels of responsibility! This, to be sure, description. It is to prevent may be good law in the hospital market, of such errors, that and a consoling enactment it must be to points for comme purchasers in that arens of bargain and otherwise contain

advocate, and he ought to have foreseen that jude; but the reflection of a moment must and notorious features in the picture of incompatible with the reselved standards of medical economy in these countries, might, morals and justice. If such a system of secucious malignity to turn to their purpose they may be pledged by the elevation of this construction of the occurrence; they their name and their principles. If the dent, against their own candid and avowed stead of being conciliated by the concession. advocacy of these abuses. Mr. Ellis will, the first act of their gratitude will be to we have no doubt, on some future occasion, convert the charitable boon into a new see the necessity of putting these cavils to weapon of aggression. Upon this single rest. He may also fairly take the same admission, we have no doubt, for inopportunity of reconsidering certain opinions stance, that Mr. Cusves would undertake in his discourse, in which other medical to produce a plausible vindication of every practitioners certainly cannot concur. In appointment which has been made in Stespeaking, for example, of hospital appoints : cens's Hospital, from the hour of its foundsments derived by "purchase" and "de-!tion down to the installation of WILLIAM acent," our report of his lecture describes Courses by Abraham, his father, -- that he him to have said that the persons who are would engage to entirty the greatest scoptic concerned in the support of this infamous in misgovernment that the promotion of traffic and practice, are warranted in their three apprentices, by Mr. CRAMPION, to the intention of condemning the crime and feetly consonant with the ordinances of saving the transgressor, which we consider reason; and that even the payment of two to have been the object of Mr. ELLIS in this hundred pounds by Dr. GRAVES to Dr. triment to the public welfare. Within that other reformer, would, we presume, wish to class of evils falls every treaty to purchase a | be quoted as an authority by Mr. Cuback. permission to kill or care the inmates of an in the establishment of such conclusions as hospital, with liberty again to "sell out" to these, even though Mr. E.z.ra and his coadexistence of another,-making vice and im- purposes." In the question now at issue

MIRTITUDINOUS have become the coma plaints relative to the " new arrangements" for providing medical attendance under the Poor-law Amendment Act. The letters which we continue to receive on the subject are needly all directed against the conduct of the Commissioners who are sitting at Somerset House. In this wholesale condemnation of those gentlemen there is manifested very considerable thoughtlessness. and no inconsiderable portion of injustice. In the last session of Parliament it was distinctly stated by Lord Joun Russell, Secretary of State for the Home Department, that the subject of providing medical attendance for the sick-poor, should receive the immediate consideration of the commissioners, and, very soon afterwards, Mr. Hopoges, the Member for Kent, and a deputation of medical gentlemen from that coun-Lewis and his colleagues, that the Boards tive to the medical contracts, is minted by to state that so far as the Poor-law Commisrously exerting themselves in the rural dis- in the newly-created Unions, has been tricts, would attempt to infuse into the discussed with much perverseness of judg-Boards of Guardians, some feelings of huma- ment, and, in some cases, accompanied by nity towards the poor. The names and evident signs of factious malignancy. addresses of the members of the Boards of Guardians who have made some of the infamous contracts which have been so justly e which was given by ers to Mr. Hopors has been broken,

RUSSELL have been falsified, public indignation, instead of being directed towards the Home Office and Somerset House, ought to fall, with undiminished weight and severity, against the merciless Boards of Guardians who have attempted wilfully to sacrifice the poor, by withholding from the wretched sufferers, efficient medical skill, and even necessary medicine, in the hour of sickness, It must be admitted by every impartial person, that in carrying the new law into operation, the Poor-law Commissioners are placed in extreme difficulty. The Poor-law Amendment Act is an unpopular measure, -in our opinion most justly so, as we certainly consider it to be one of the most harsh enactments that ever received the sanction of a British Legislature. It is next to impossible, therefore, that those gentlomen can take a step, in any direction, without giving offence to a large portion of the community. It will be recollected that one great complaint against the new law was, ty, were informed by Mr. FRANKLAND that the power of managing their own funds was transferred from the rate-payers to the of Guardians in the respective parishes, had nominees of the executive Government. full power to contract with as many medi. The objection was founded in truth, and it cal men as they thought proper, and on was correctly and constitutionally urged. such terms as they might consider that the But the Commissioners, in relation to the interests of the poor demanded, in the parimedical contracts, have entirely obviated tishes in which the Boards exercised their such an objection by allowing the Boards of functions. On whom, therefore, ought the Guardians to make their own contracts for censure to be thrown, if the contracts are medical attendants. The authority is in the characterized by a disregard for the interests | hands of the rate-payers or their elected of the poor and the welfare of the profes- i representatives. Had the Commissioners sion. Obviously not on the Commissioners, exercised their full power, and taken the but on those rate-payers who have been privilege of making medical contracts, from elected to constitute the Boards of Guardians. the rate-payers or the Boards of Guardians, Instead, therefore, of attempting to prove then the despotism of their conduct would that the conduct of the Commissioners, rela- ; have been denounced. Really we are bound traits of odious cruelty, it would be well if sioners are concerned, the subject of prothe writers and observers who are so gene- viding medical attendance for the poor

As the experience of one year has made it but too apparent that the Boards of Guardians cannot be safely entrusted with the aped, should be forwarded to us medical care of the sick poor, the Poor-law Until, however, it can be Commissioners could not be censured if they were, henceforth, in all new contracts, to withhold the management of that department from those bodies, and retain over it is by Lord Joux their own uncontrolled authority. Though

the saving of a few pounds in the 2 the Boards of Guardians may induce them to make disgraceful and brutal contracts with low-minded medical adventurers, the Poorlaw Commissioners sitting in Somerset House cannot possibly be influenced in their conduct by any such unworthy and sordid motives. The interests of those gentlemen are of a totally different character.

Another article by Mr. Radley, on the treatment of fractures of the bones, without the employment of splints or tight band. ages, will be found at page 283. The subject is one of deep and pressing importance, as we are given to understand by Mr. RADLEY that the non-application of splints to fractured limbs is attended with an inconceivable degree of case to the victims of the accident. When, therefore, it is horne in mind that the great object of cultivating the science of inedicine is, in every instance of disease, to diminish the measure of human suffering, nothing but prejudices of the most odious character can prevent the system practised for so many years by Mr. RADLEY, from being brought into immediate operation in our public hospitals. In again adverting to this interesting subject. we ought, in justice to that distinguished surgeon Mr. WARDROP, to place before our readers the following sentences from a clinical lecture which was delivered by that gentleman and published in Tur. LANCEY of Oct. the 4th, 1834, page 55:--

show that splints, bandages, and the complicated mechanical contrivances usually employed in the treatment of fractures of the thigh-bone, are not necessary in all cases, and may sometimes be altogether dispensed with.

The injurious effects which are producted by the use of splints and handages in the treatment of fractured bones may frequently be observed, and I am convinced that in many cases and under many circumstances they may be well dispensed with."

"While splints may no doubt be often employed, at least without mischief, there are, on the other hand, cases wherein they are decidedly hurtful; I allude to those in which the soft parts adjacent to the fracture are so injured or bruised that the pressure of bandages or other apparatus becomes a source of irritation, and thus creates more or less inflammation, which, instead of promoting the reunion of the fractured bone, length,

at proc save known a time soft alon a from this a

In fractures of the ver limbe I would therefore strongly urge surgeons to consider in what cases or under what circumstances splints and bandages are requisite, —in what cases they are hurtful,—and when their application is nugatory. If the fare not decidedly necessary, or considered improper, it is of great importance to attend to the kind of bed on which patients with fracture are to be placed, taking capacial care that it is one plane surface, placing a dossil of tow to fill up any inequalities, such as that in the ham or at the heel, preventing the smallest exertion or muscular action being made by the patient to support the limb, and thus allowing the fractured member to be in a perfectly quiescent state.

"This simple mode of managing a fractured limb has also the advantage of admitting the ready employment of leeches, or such other local applications as may be requisite to subdue any fallammation at the scat of injury."

COLUMN CONTRACTOR OF THE

Tax Conneil of the University of Landon, . on the requisition of a numerous body of the proprietors of that institution, have anpolated a meeting of the shareowners, to be held in the first week in the ensuing month. The chief subject to be considered by the meeting is, the charter, which, it is understood, the Crown is willing to confer, with certain restrictions in the conditions. As we take a very deep interest, on purely public and national grounds, in the continued success of the University, we shall "The subsequent cases are intended to book forward to the proceedings at this meeting with considerable anxiety, and not without some degree of apprehension. The institution, so far as the medical department is concerned, has become so firmly established, and has taken so bold and successful a stand,-far out-topping, in celebrity, every one of the "recognised" establishments connected with our endowed hospitals, - that it is now clearly evident that no charter, or extrinsic aid of any kind, can increase the unility, or add to the reputation, of the University medical school. The best socurity for the continued prosperity of least this branch of the establish be found in the talents and professors.

In the next Lat roposed object of

ARREAGEN TOR PRACTITIONERS IN THE COUNTRY The Marchioness of Londonderry, who is in a delicate state of health, will, it is expected, shortly visit the metropolis for the benefit of more skifful medical advice."-Sunderland Herald, November 14

is really surprising that the intelligent conductors of respectable country journals should introduce such trashy paragraphs into their columns. There is scarcely a town in England which does not contain practitioners in medicine who are equal in ability to those who are styled " first-rate practitioners" in the metropolis. When operations are requisite, we admit that the patient is safest in the hands of that surgeon who is frequently called upon to use those appropria of medical practice, steel instruments; but in cases which require no such aid, the sufferers would act wisely in not relinquishing, on slight grounds, the pure air of the country.

ROYAL MEDICO-CHIRURGICAL SOCIETY.

Tuesday, November 10th, 1835. Mr. EARLY, PRESIDENT.

MORNIO VASCILARITY OF PARTS

This Society commenced its first medical soirce for the winter this evening, and was numerously attended.

ings, was directed by Dr. J. Yellouv to in rising, however, was simply to prevent the subject of the vascularity of mucous the discussion from dropping. and serous membranes. The author in ; his communication,—and in this consisted rose to prevent its continuance, for as it its substance—considered that the pre-seemed that the profession knew not what sentation of a vascular appearance in any inflammation was but judged of it only by dicate the existence of infammation, as swelling, and pain, the could not consider reddened appearances might exist, with that the paper which had been read tended tion, and in order to show the fallacy of no detectable morbid change. appearances, the Doctor exhibited a draw-Mr. Mayo could not agree with Mr. Amott in his view of the discussion. Al-

of vacquiarity, the

should be paid to the position of the body, because vascular fulness in the dead subject is exceedingly delusive; and there will, moreover, he found various degrees of vas-cularity, which, as in the example presented,

are simple cases of turgescence.

Dr. Weathernead considered that this important topic ought not to be allowed to pass by in allence. That a turgescency of vessels was not a sign of inflammation, he readily admitted. But the difficulty was first, how is the effect to be explained? and secondly, how were the true and unequivocal signs of inflammation to be described? How, for instance, came blood to be accu-imulated so largely in the heart, when the bloodvessels are themselves, comparatively speaking, empty? Did not the circumstance move that the vessels had the power of propelling the blood onwards, after the heart had coased to beat? He therefore regarded the turgescency of vessels in mucons tissues, to arise from the weakened state of the vessels, situated as they were remotely from the centre of the circulation, as compared with those vessels which were more advantageously situated for propelling the blood onwards.

Dr. CLENDINNING agreed with Dr. J. Yellowly, that the turgescency of vessels in most instances occurred simply from the position of the body, and in such case must not be regarded as proofs of inflammation having existed in those parts. He had seen, at coroners' imprests, this state of the vessels adduced as a sign of inflammation, the ver-Attention, at the opening of the proceed, i diets being founded accordingly. His object

Mr. Annorr, on the other hand, at once part, from disease, does not always in its external characters, - heat, redness, out the existence of inflammation. On to communicate or elicit anything suffi-this division of the subject Dr. Yell-ciently exact to make it worth while to de-ROLY considers that pathologists of the bate the matter. The paper certainly did day have yet much to learn before they can not say what inflammation was, and until positively affirm whether the change is a all agreed as to what it consisted of, it would result of the process of inflammation or not, often be found impossible to account for post-According to present notions on the subject, morten appearances, whether they were he observed, this vascular or reddened appearance is oftentimes pronounced to be in must have observed that a redness was freflammatory, when that process has never quently seen to exist in a part antecedent to existed in the part. In proof of the asser- death, after which it disappeared, leaving

> ular, but in which the vascularity though occasionally no traces were left after the not on inflammation, but death, when reduces had previously existed, the property of the anbject still required | secuted, how were the profession to discover e examination. or know of what inflammation consisted?

Here the subject was dropped.

TEMOUR ON THE SCAPULA.

in THE LANCET lately. The details of the case ran thus in Mr. Earle's paper: - James Jackson, admitted September 10th, 1835, into St. Bartholepartnok of every motion of the scapula, and ; the treasury. was evidently in close contact with the bire. The man's aspect was bloated and unhealthy, and he had been a free liver. Leeches were applied and the arm was supported in a sling. Several consultations were held, as to the propriety of removing the tumour with the knife, but unfavourable opinions of the case were formed, and it was deemed not advisable to operate, from the probable malignancy of the tumour. Mr. Earle, however, was of a different opinion, which he founded on the perfectly healthy condition found necessary, the scapula should be a serious aspect, and went on increasing, taken away also. In the course of the oper and the portalities, dreading the edicts of ration, the tumour was found adhering firmly a second operation, neglected to apply for to the inferior angle of the bane; but the relief; and from the incapability of following remainder of the transur was easily deshits employment, he became reduced to a only a small spicula of bone was found no extended up to the grain. The left atm cessary to be taken away with the fore µs. particularly) and the left leg were new Two arteries were tied. After the removal redematons; the pulse 120 and facility and man left the hospital, on November the 4th, night in the workhouse, but nourishment and had since regained the use of the arm was then too late, and this nouring he discrept shelfactorily. The case, the report went. He (Mr. H.; considered the case to well on to say, was valuable in a practical point illustrate the proposition laid down by Mr.

Partridge had informed him that there was other disease was detected in an appearance of the partridge had informed him that there was other disease was detected in an appearance of the partridge had been appearanced in a side of the cheer; the to be able to continue the "Transactions,"; as in most persons of the keeping up of which constituted the themselves up as the

pride of the Society. At the commencement The Secretary (Mr. Partridge) then read of the sessions, invariable actuality of subarreport of a case in which a large tumour jocts was complained of act at the terminawas removed from the scapula by Mr. Earne, some account of which was reported Society to call an additional meeting. He, however, had to congratulate the members on its present flourishing auspices, for no session before had presented so many highly September 10th, 1835, into St. Berthole- respectable names of greateness who wave the left scapela, suffering from a tumour of desirous of becoming follows of the Society, the left scapela. Thirteen months ago his at- Finally, the President alluded to the extention was called to the stat of affection, penacs incurred "in moving the llouse of by pain which extended down the arm of Commons" in order to obtain the charter, the same side, and went on increasing up to These had threatened to become a serious the time of his admittance, when the tumour inconvenience, but they had since been had grown to the size of an ostrich egg. It liquidated, and prosperity now reigned in

LONDON MEDICAL SOCIETY.

Monday, Nov. 9, 1835.

Dr. Whiting in the Chair.

CHIMNEY-SWEEPERS' CANCER.

Mr. Il orrow introduced the subject of of the integraceuts covering and surrounds thinds y-sweepers cameer, and related the ing the mass. The secretus major antices following case of a patient aged forty-free and its several digitations were easily traced, years, who was in Guy's Hospital for the and between that muscle and the under survisioned discuss about eighteen months ago, face of the scapula the tumour was situated. When the wound presented a entrace of the The patient was willing to undergo any size of a free-shiling piece, which was ope-operation rather than its removal should rated on, and believed to do well, but the not be effected. The operation was p r- man left the lengual before it was quote formed on the 3rd of October, but it was louded. Twelve non-dis before he Mr.H. undertaken with the understanding that it was consulted the vound had again assumed tached from the surrounding parts. A small state of almost artical starvation. The disportion only of the bone was absorbed, and case had commenced in the scrotum, and a compress and bandage were applied, and the man was evidently sinking, from the during the progress of the cure, not a single exhausted state to which he had suffered unfavourable symptom had arisen. The himself to become reduced. He was a fortof view, and proved the advantage of form- Abernethy, that cancer will invade any ing a diagnosis on anatomical appearances, structure of the body; for on examining the The tamour presented a specimen of albu-tibia in this case it would be seen to be af-minous sarcoma. After the report had been read, Mr. Earle bad made no complaint of his suffering lastid he had brought it forward, because Mr. that part. On inspection of the r

he could get it, to the temptation of rather medullary sarcoma affecting the drink

Mr. Carse inquired if the members had

lands of the body were found affected. related the case of a butcher who app and attended with a burning heat over the surface of the wound.

absorption had caused disease there.

who recommended its removal; but Mr. one nature; and on examining more care-The disease was supposed to have been it ceased spontaneously, and the patient brought on through the irritation caused by became more fleshy, and he concluded that riding on horselack.

bony preparation belonging to the man who fering from irritable bladder, and fell down died from cancer, still maintained that it did, dead. At the autopsy every viscers of the not represent simple exostosis; for the par- body was found studded with tumours, simiticles arising from the deposition of fibrine, lar to those on the external surface of the radiated from a centre, like the hones of the skin, and an effusion of fluid was seen in skull in the fietal state; it presented also a one of the ventricles of the brain. cellular structure, and the marrow was con-! tained not in the regular canal of the hone, of hospital reports were consulted, they but in distinct cysts.

Mr. Buyant asked whether Mr. Jones rould not have considered it a case of exif it had been unconnected with secheu, cancer.

lied, certainly not, but

m the body was

bone.

Dr. THOMPSON argued that it depended found the disease invariably to return after in great measures as to the soot becoming operation, for he had heard Mr. Travers re- absorbed and affecting the system/whether muck that it invariably reoppeared.

Mr. Jones did not regard the disease of to carcinomatous affection. In ordinary Mr. Hooves aid, that this man was perfectly free from other disease in all the visition should be severally avoided. In contrast, the other than the several s cera; but in other kinds of carcinoma, the roboration of his statement, Dr. Thompson Proper nourishment last year would have well, and led from his avocations an active prevented his life from being shortened by life. The man left town to visit his friends, the disease. The pains were lancinating, and it would seem that from the change to a state of inactivity, a torpor of the bowels followed, which aperients failed to relieve, Mr. DENDY thought that had the man and the man died. On inspection of the lived longer, the disease would have produced body, a tumour, decidedly of a scirrhous greater ravages in the system. He thought nature, was found at the termination of the that some modifications of the disease might colon. The caliber of the intestine did not occur in all parts of the body. How far exceed the diameter of a quill. The disease snot could effect a change in the houes he was not developed in any other organ, thereknew not, but he could not believe that its forc he wasted to the conclusion, that if the necessity of having recourse to the aperients A GENTLEMAN, whose name we could not had not been compulsory, and produced irrilearn, regarded the disease as local, but ca-tation on the immediate seat of the disease, table of being easily excited. This gentle the part would have remained quiescent, and man was led to relate a case of hemorrhage the patient's life been prolonged. The Docin a chimney-sweeper from the stomach, for related a second case in support of his to the extent of seven pints, which proved position, that of a man aged fifty years, who fatal after a second attack, when the sto- felt tolerably well, but suffered from vomitmuch was found converted into a diseased ing, which led him Dr. T. to treat the dismass weighing sixteen pounds. A second case as a thronic affection of the stomach, tase was related, which consisted of a small Becoming, shortly after, more fully acspot by the side of the perds. The patient quainted with his sufferings, he .Dr. T.) consulted Sir A. Cooper and Mr. Abernethy, was led to conclude that it was of a cancer-Abernethy observed, as it was a partion of fully with this impression, he found several malignant tumeur, that somer or later the tumours about the size of a pea, adhering circulation would become affected. The to the skin of the arm and scalp. Attempts penis was removed, but the patient deed, to allay the vomiting failed, but afterwards he should get well. About one month after, Mr. Joxes, after making a section of the he rose from his hed to micturate, then suf-

Mr. DENDY believed, that if the records would tell us that almost in every instance the disease returned again, after the operation for capeer was performed. He did not look upon soot as a common irritant, for it failed to produce the disease in many parts of the system.

TUBERCULATED DISEASE OF THE UTERUS. Mr. Bayant rose to give the particulars

n which he had plisted a individual from whom the mor sen taken, had not fallen un ect of the case, a lady, The sub The subject of the case, a lady, I, aged fifty-two years, was of are and spare habit, and had for s years suffered from indigestion, acaied with headache and singgishness became " irregular," and about eighteen knowledge, where iodine had been appli months ago the catamenia ceused altogethad increased the tumour in a very short ther. She was next troubled with vonding, period to double the size it presented when about half an hour after taking any food; the iodine was first used, a hardness was felt on the right side, and Mr. Monar, in order to counterbalance she became emaciated. Latterly, she sufcreased, diarrhess followed, and she died on the disease, and kept it under control. the 30th of October last. Several weeks weighing five grains; when dried it was of sible condition. a bright colour, with a tuberculated surface.) The Parsons to previous to the adjourn-The uterns had undergone the change ob-sment, requested to relate the following case: served in the preparation, but this change .- A lady, who was extremely pullid, and was not suspected, as the attention of the labouring under all the characteristic sympmedical gentleman Mr. Hiff, was not distrement of a severe constitutional disease, was rected to it by the patient. The case was suddenly attacked with suppression of urino, interesting, from its adding confirmation on which was found to arise from the mouth of an important topic, that a disease of a the womb pressing forward, as as to preformidable nature might go on even to the vent the urine from flowing. The uterus destruction of life without being suspected, was tilted back by the practitioner, and and in which no symptoms are manifested, a catheter was introduced to draw off the either to lead to a detection of the disease, accumulated fluid. The mack of the merus or suspicion of its existence.

The PRESIDENT asked whether the thickenlog of the pyloric orifice of the stomach, was of a cancerous nature.

nion led him to that conclusion, although the thickening was not great.

Mr. Moore was opposed to the opinion that the disease was of a tuberculated nature; he regarded it as rather of a scrofulous kind, and his judgment was supported by the accounts of the French pathologists. M. Louis had recorded, that of upwards of 300 cases of disease of the womb, only one of tuberculated disease of the uterus existed. He (Mr. M.) was led to this conclusion from the nature of the inflammation (not having examined the preparation very circumspectly), which was of a chronic kind, and unattended with pain.

Mr. Carer thought that the time of the acnt the lady was sciety might be spent more profitably, by lociety might be spent more profitably, by considering the relief of parients at the early | dered nuneces

d be done in ad found bene ! or whi icial results from the s e of fodine, from pressure, or from counter-irritation

A GENTERMAN mid, with regard to cancerous affections of the breast, that he could of the bowels. About three years since, she inform the Society that in a case within his

the last case, briefly alluded to one in which fered from forcing pains, after evacuating isdine, combined with mercury, and so softthe bowels, but no symptoms of uterine dis-level down as not to produce irritation of case existed. The evacuation gradually in- the skin, decidedly lessened the activity of

Dr. Jourses believed that the profession previous to her death the irritability of the knew but very little about these diseases; stomach ceased, and she was able to retain but he felt convinced that it might be reher food, but was distressed by flatulence tarded by taking from the part affected the and pain in the bowels. On examination of supply of nutrition as much as possible; the body, the beart was found to be exceed abstracting blood from it that being the ingly small, with its vessels enlarged in pabulum of life, applying leaches, allaying caliber. The gall-bladder was distended pain by coollient and soothing fomentations, with a cream-coloured bile, and its coats and avoiding irritants, for "ubi stimulus, very much thickened; in the ductus come ergo flaxos," and keeping the excretions musis choledochus a calculus was impacted, and secretions of the body in the best pos-

was found hardened and callons, indicating a scirrhous affection. Repeated discharges of blood occurred from the uterus, and pressure gave considerable uncasiness. The kely was ordered to remain in bed, to have Mr. Bayant replied, that Mr. Iliffs opito be prevented, and to take bland food. On a second visit, he : Dr. Whiting; found her suffering from more acute symptoms; the tumour had increased, and become exquisitely sensitive to the touch, and the patient was labouring under irritative fever. A second application of leeches was directed, and the following week found her infinitely better, and the tumour subsiding rapidly; but it was deemed advisable to continue applying leeches until all the sympton abated. Iodine was rubbed in abdomen, and he (Dr. W.) th gentleman who attend plied it to the mouth

PATRETER MEDICAL SOCIETY

Mr. R. QUAIN Pr

Tax newly elected President, Mr. Richard. by his predecessors in the chair, this evening addressed the Society in an inaugural speech. He thanked the members for the honour they had conferred on him; but at the same time a retrospective view of their past presidents, and many able members, almost induced bim to shrink from the reand (if we understood the statement cor- sponsibility of office, though no member felt really, not only caused the discontinuance more anxious for the welfare of the Society, of his attendance at the meetings of the than he. Of its usefulness there could be Society, but also everywhere else from home, no question. For himself he could say that When Mr. Kingdon informed the Society the had never entered its walls without de-These notes

> The discussions this evening commenced .631 , lately forwarded to him (Dr. J.) for

Dr. Jourson answered in the negative. in consequence of a remark from Mr. Lynsu, He had written to the parties, and embodied that although the members might firmly in the correspondence the opinions of the and conscientiously coincide with the mo-Society. Not that he expected to hear very

ANTIMONY IN PRECMONIA.

Dr. Annison requested the sense of the Society respecting the efficacy of the anti-

monial treatment in pneumonia.
Dr. Jounson considered Dr. Addison, as an hospital physician, best calculated to give an opinion on this treatment. In pulmonic inflammation, he (Dr. J.) had pushed the antimonial treatment further than in any other inflammation, but would not trust exclusively to it. The use of the lancet he regarded as highly necessary and beneficial in weakening the action of the heart and arteries in inflammations.

Dr. Appraon replied that he did not allude to antimony, when used in combination with other remedies; for, in the ordinary use of antimony, calonel and opinus gene-rally were combined, and not unfrequently

A The close that a co drawn up by sons sion (not confined to the by Mr. Headland, the merciary of the Society, which it was attended should be ented to Mr. Kingdon, after it had been ed by as many members of the medical profession as accorded with the originators. that his conduct had not in the slightest degree merited the stigma cast on it by the Council of the College of Surgeous; for this reflection, as Mr. K. professed it to be, on his moral conduct, preyed most heavily on his mind,

of "the disgrace" as he termed it, under riving benefit from the discussions. which he laboured, from his rejection by arduous duties that he had elsewhere to the Council, he said that the heaviest of fulfil, would, he trusted, become an apology fliction that he felt arose from the fact that for any imperfect fulfilment of his duties in what he had most attempted to preach to the Society, which at any rate, however, he his children,—the propriety of preserving would endeavour to perform with the strict-their moral characters unimpeachable,—he est impartiality. The Society had this set-minself, it would seem, had not been able to sinn to lament the loss of one of its most accomplish in his own person. On that or—zealous and able members. It was not his was not necessity, so far as his conscience Mr. Burnett, as ample justice had already was concerned, for Mr Kingdon to feel hurt been done to his memory. at being passed over by the Council, for he necessarily form but a very brief outline of might be assured that in the eyes at the the address of the worthy President.) profession he would not stand degraded one iota, probably the reverse, for the pro- by Dr. Lyonaun Stewart inquiring whecerdings of the Council in Lincoln's Inn ther Dr. Johnson had received any further Fields had long ceased to be regarded with (particulars of the case 'see LANCET, No.

respect by medical men,

A vete, however, was placed on the ad- his opinion, and detailed to the Society, dress being left in the rooms for signatures. Dr. Jourson answered in the negating tives which had actuated the gentlemen in 3000, as it was a case not likely to be cured drawing up the document, yet he fer one expeditiously, if at all, cand this he said from a very long acquaint. ance with Mr. Kingdon) could not put his name to a paper that conveyed, even indirectly, and although denied to the public, a suspicion that moral delinquency had ever hung over Mr. Kingdon's character. This he considered the address was calculated to do, and most of those present acquiesced in the opinion. It was deemed advisable that certain of the sentences should be crased, and a new copy produced and offered for signature. Although these brief proceedings took place in the library of the Society, was not wished that the address should be d as emanating solely from the o chairman's object in bringd arose, he said, from the

members would be

preceded by the use of the lancet. But the that occasion, found that only disadvantreatment that he referred to, was the trust-tageously checked the disadvanting to large doses of antimony to the exclu-that by first bleeding the distinct, as much in company with a general practitioner, great benefit derived from the treatment, and he was unwilling to interfere with the remedy that was producing such beneficial results. It was persevered in, and it quickly effected a speedy and complete cure. What he (Dr. A.) looked upon as constituting the tering from half a grain to a grain of tartaremetic in solution every one or two hours. The first and second doses probably produce vomiting, followed by nausea and free diaphoresis; and he would ask whether we were not justified in abstaining from so harsh a remedy as mercury, and adopting antimonial treatment in preference, at least in the milder forms of inflammatory disease. Of late he had had reasons to doubt whether pneumonia was so severe as it was formerly taught to be. They used to be led to believe that it was a most serious and fatal disease, seldom admitting of cure. Cases had occurred within the last few years which had led him to doubt the correctness come under his observation, where the disthe majority of cases, were injurious, and some untoward accident. smaller bleedings as by far more safe and more appropriate.

school was certainly in favour of the anti- Mr. W. had found, that if the inflammamonial treatment, and that the rate of mor- tion was first attacked by a full bleeding, so tality under its use was not more than one as nearly to produce syncope, and then fol-in eight cases. This calculation was made lowed up by large doses of antimony, the from cases of the serious kind, and after latter had proved a most valuable remedy moderate bieedings had been used.

Mr. H. Jounson remarked, that during the time he was at St. George's Hospital, several cases of pneumonia were admitted, in which the antimonial treatment had received a fair trial; but from the result, it was considered to be an inefficient remedy. If a preference was to be given well acquainted with the use of merenry, for even Andral was only now beginning to was found to have taken place, and the regard mercury as a powerful remedy. He lymph through which the adhesive process differed from Dr. Addison as to the mildness was maintained, presented, from evaporaof pneumonia. He (Mr. J.) had found it tion of the serum, the same phenomena in any thing rather than a mild form of disease in the surgical wards of St. George's.

Dr. Jounson remarked that in 1812, an ample opportunity was afforded for experimenting on pneumonia in the Scheldt, when that disease attacked almost every inwhen that disease attacked almost every in-dividual there stationed, and the medical officers employed under government on do the disease.

sion of other remedies. He (Dr. A.) was as their strength would admit, and then induced more particularly to give it a trial, exhibiting calomel, only in sufficient doses from having seen in a severe case of laryn- to act on the secretions, more benefit was gea, which he had been requested to visit obtained than by any other kind of treatment.

Dr. Addrson still maintained that prinmonia was not so fatal as was generally conceived. He thought that Mr. Johnson was particularly unfortunate in selecting cases from the surgical wards of an hospital, to illustrate cases of genuine idioantimonial treatment, consisted in adminis- pathic pneumonia, for he (Dr. A.) was not a stranger to that division of our public institutions. There pucumonia would either be found occurring with other diseases or in broken down constitutions. He (Dr. A.) was sure Dr. Johnson would excuse him when he said that pneumonia did not terminate in expectoration,* unless complicated with broughitis, and he very much doubted, whether the majority of these cases were not cases of bronchitis, instead of pure pacamonia.

Mr. Jounson could not regard picumonia as a mild disease. He had always found that the more actively it was treated, the fewer were the deaths. As to puenmonia in hospitals, the fact was that pneuof this proposition, and many cases had monia could not be explained by a few cases, and the patients that he had selected from case had been altogether overlooked. He the surgical wards were, many of them, in certainly thought that large bleedings, in rude health, who had been overtaken by

Mr. WADE said, with regard to the treatment of pneumonia, according to the mode Mr. Costello said that the Italian of exhibition recommended by Laennec, he in his practice. With regard to a remark (which had been incidentally made, that all adhesions of the pleara were not the result of inflammation, he would give an example in proof of the allegation, that had made at the time considerable impression on his mind. A portion of the lung recently taken from the body was brought to him, which by him, he would choose the mercurial. He he divided into two portions, and then did not think that the French surgeons were placed their out surfaces in opposition. On the following morning a perfect adhesion

It may be necessary to state—as the r of the proceedings to the proper compass does not make this isolated point obvious Johnson assigns expecturation monia, which Dr. Addison detom of that affection when

appearance as were produced by the known process of inflationation.

Mr. SMITH believed that pneumonia attacked two kinds of constitutions, the strong and the delicate, and he presumed that the mercurial was best adapted for the plethoric, and the antimonial for the weak. The President then adjourned the meet-

(Saturday, November 7-Concluded.)

REMARKABLE DISEASE OF THE BRAIN AFFECTING THE SENSE OF SIGHT.

After the statements had been made respecting the late Sir David Barry, which were reported at page 264, Dr. Johnson communicated a paper

symptoms." The subject of the case was eve and sear the brain. The forms and years. colours of these spectral illusions were in | Mr. Verrall, said, he was induced to cessantly changing, but without any mitigative relate the case of a boy aged 11 years, which

recovered from this state, whether through wers of nature or active depletion, gustful. After a few weeks he was the city, and transact busi-But the spectral images and faculties were perfectly intact. per returned with in-

tions, as above mentioned, and notwithstand ing the same means were employed as for the last attack, he died at the end of three or four days, from the commencement of the apoplectic invasion. The body was ex-amined on the following day. There was nothing unusual in the membranes of the brain. The right lateral ventricle contained nearly two ounces of clear ruid. The left ventricle was occupied by a series of hydatids, of various sizes, and filled with fluid of various consistency and colour. The cluster of hydatids sprung from the floor of the ventricle, by a kind of peduncle, and penetrated into every sinussity of the cavity, pushing its branches anteriorly, so as to pass over and before the thalamus nervi optici of that side, and even into the opposite hemisphere of the brain, destroying all which was cutitled "A remarkable Disease the parts in its progress. Both thalami of the Brain, attended with distressing were reduced to a pulp, as were, indeed, the whole of the anterior lobes of the brain, an eminent artist residing in Albemarle- which would not bear the least handling street. The complaint commenced several without falling into a state of deliquescence. years ago, in the form of a sensation of The optic nerves were pressed upon by the flashes of light before the eyes, to which hydatid mass, and reduced to little more were afterwards added, pains in the head, than the size of threads, and these were of and the sight was gradually, and in the end, very soft consistence. There was no change and the sight was gradually and in the very solutions and the sight that totally lost. The chief phenomena, how-im the coats, or the humours, of the eye, ever, which annoyed him, was a series of The most remarkable phenomenon in this dazzling images, perpetually playing on the inclancholy case, was the intensity of brightoptical apparatus, by day and by night, with ness which always accompanied the spectral a brightness unspeakably distressing, some times assuming the forms of angels with dazling and painful splendour never forfaming swords, every motion of which sook them. It rendered the life of the sufsecned like an electric flash, to blind the ferer a scene of dreadful agony for some

tion of the sufferings they produced. With he believed was somewhat analogous to the the exception of some irritability of temper, foregoing interesting case. This patient, there was not the slightest affection of the who he had examined at the Western Disintellectual powers. Memory, imagination, pensary, complained of having before him and judgment, were unimpaired. He was repeated flashes of light. He (Mr. V.) sus-led about the streets by his servant, and at pected that his faculties were not perfect, as tended to all matters (where sight was not the boy looked stupid, and the questions The eyes themselves presented no appear mother; and on further examination he ance of disease. These symptoms were found that the arm was slightly paralytic, ameliorated, from time to time, by tartar and that the fingers were wasted. No change emetic plasters to the nape of the neck, could be detected in the eyes,

leeches to the temples, and aperient and Mr. THURNAM requested to know whether diaretic medicines. In the spring of 1835, the cysts were accidental serous cysts, and he was seized with all the usual symptoms what was the condition of the plexus of apoplexy. He lay in bed motionless and chorides? insensible, passing the urine and feces in-

Dr. Jonnson replied that the cysts were voluntarily; the pupils were dilated, and filled with fluids of different colours; some the power of speech was lost; but to the of the cysts were circular, the others oval, astonishment of his medical attendants, he and all sprung from one root.

The Passibent (Dr. Addison), inquired if there were any somnolency? (The answer was in the negative, except during the apoplectic seizures. At other periods, his

Mr. STREETER .- In the detail of the August last he was symptoms, the expression " the only alterapoplectic symp- ation in the intellect that occurred, was an LOUISING DE DELECTE WITH TERMOR.

yeard ask, does temper belong to the lie tellect ortainly not; but rather to the disposition!! He (Air. S.) in the next observation; has a difficulty, as all present are not acquainted with the phenological disposition of the brain, of making himself under-face of doing justice in the matter. The face of the brain, of making himself under-face of doing justice in the matter. favourable to the doctrines of phrenology, was used in the course of lectures delive functions assigned to those parts were the other from exhausted nervous power, greatly disturbed, or greatly exalted, while I am extremely gratified that so able and sight was destroyed, though the eye re-experienced a physician as Dr. Roots is, that the disease had not extended to the the greatest importance in practice. My cortical structure of the brain, or the views were derived from considerable ex-membranes would have been involved in perience, and, since the publication of them, the piscase. The term "anterior lobe" was I have seen them confirmed on various itself a vague one, for there was not the occasions. I beg to refer your readers to tomists to mark the separation of this divi- sadjoin my division of the complaint, with made by Mr. Streeten, but we have not space to give them.

anti-phrenologist, but a phrenologist, and mefacient of J. FRANK . he would observe that although the unte-; rior lobes were reduced to a pulpy state, they bility of temper and violence upon being opwere yet capable of carrying on their functions. He did not bring the case forward tenance often wild or flushed, and the head as an argument against the science, but hot. rather that the science might clear away the difficulty which it presented.

The Society then adjourned.

DELIRIUM CUM TREMORE.

To the Editor of The Lancer.

Sin, With reference to the note subjoined longue." to Dr. Roots's excellent becture on delirium I would beg leave further to refer your tremens, just published by you, I wish to readers to what I have said respecting instate, that I have used the English expression termediate varieties, or modifications of the sion "delirium with tremor," and it only, complaint, and as to its nature, &c. and without the knowledge that the Latin. Sir, your obedient servant, synonyme had been employed by my friend! Dr. Elliotson. I do not even now know in which of the journals the lecture, in which this term was used, has been published, Lancet, otherwise I should have had great pleasure by Meyers, Land

stood; he however considered the case as English term, which only I have employed The disease commenced in the floor of the by me during the winter of 1825 and 1826 ventricle, and made its way forwards and The same of the complaint is of comparatively upwards, producing softening of the anterior little importance; the pathology, the forms, lobes. In the contre of the under surface and the treatment of it are the topics that of these anterior lobes, that portion of the most deserve attention. As to these I am intellectual brain is situated, which discuttled to more credit than has been tinguishes the form and colour of objects, awarded me. I am certainly the first who He helieved that it was a well-established distinguished two species of the disease. fact in pathology, that the is flammation of One which I have stated to proceed from a nerve heightened its functions; and here inflammatory or excited vascular action in the symptoms indicated that the peculiar the membranes and periphery of the brain; mained apparently healthy. The whole of has done me the honour of adopting altothe anterior lobes were disorganized with- gether my views as to the pathology and out there being any disease of the mem division of this disease, as well as to the branes, and hence it was fair to conclude treatment founded on both, as both are of faintest line of boundary assigned by ana- my article on this complaint; but I may sion of the brain from the rest, except at the names and definitions I have given of its under surface. (Some further remarks, each species. I need not aid that the treatapropos to the science of phrenology, were ment appropriate to each is fully explained.

" I. DELIRIUM WITH THEMOR PROM EX-COTED VASCULAR ACTION IN THE MEM-Dr. Johnson said that he was not an Branes of the Brain (Encephalitia Tre-

" DEFIN. - With great terror and irritapoxed; a frequent, fall, or hard palse; coun-

" H. DELIBIUM WITH TREMOR FROM EXHAUSTED NERVOUS POWER (the True Delirium Tremers of modern writers, and D. Traumaticum, or D. Nerrosum, Duruy.

" DELIS .- With a morbid recurrence at the patient's ideas to his acocations; a frequent, weak, or small pulse; cool, humid, or perspiring verface; and loaded, but moint

I would beg leave further to refer your

Bulstroile Street, 16th 1

* The passage quot

PEDICAL '

To the Editor of THE LANCET.

Sin, - After a patient perusal of the various essays forwarded to the Medical Reform Association, the Committee of Examination " have decided that there are not any arce deserving of the prizes, although many deserve considerable praise, from the talent and research displayed in them.

It is my duty therefore to inform the es-sayists that they can obtain their essays by sending a note, with the motto, when any more specific communication that it may be necessary to make, will be made.

I am further directed to communicate the fact that the 100% will still remain in the hands of the Treasurer, Joseph Hume, Esq., M.P., and that the Association will be happy to receive any essays on the question originally propounded, which must be delivered; in, on or before the end of December, 1836. Further particulars I shall take the liberty; of requesting the insertion of in the pages of your journal in the course of a fortnight or three weeks. I have the honour to remain, Sir, your obedient servant,

> JOHN Errs, M.D., Hon, Sec. to the Med. Reform Assoc.

89, Great Russell-street, Nov. 17, 1835.

CLINICAL LECTURES IN LENBON .-- To the Editor. - Sir, -- It is stated in your Number for November 7, that 12 years ago there ; was not a chnical lecture given in London. As regards the Hospitals, to which the statement appears to refer, this may be correct; but as the fact is not stated with such limitation, I beg to observe that Clinical Surgicul Lectures were given regularly at the Finsbury Dispensary by myself in the October of 1821, subsequently to my election in the preceding April, and these were I believe. the first clinical bectures delivered in London. Leaving it to you to make any use of this note you may think proper, I remain, Sir, your obedient servant,

GEORGE MACILWAIN.

Mar ne

Argyll place, Nov. 17, 1835.

Cabout twenty years of age, had isred under disbetes mellitus for up of two years, and had taken successi mineral acid, tinct. ferri mur., et pot sulphas, but without effect. In the me of May last I commenced exhibiting in in the different forms of the ioduret of iron, and of potassa, and, lastly, in the form of tincture. Shortly after the commencement of this treatment a good deal of expectoration took place, and mucus was thrown up regularly every morning. By degrees the urgency of the case subsided, and now, although the weather has become cold, very little tendency to diabetes remains. I hope that others may try the effects of this drug in this generally uncontrollable complaint, and watch its action and result. I remain, Sir, your obedient servant.

C. A. D.

Goswell-street-road, Nov. 17, 1835.

_ Our correspondent should have added his name.

DISTRIBUTION OF SUBJECTS. - To the Editor .- Sir,-1 shall feel obliged if some explanation is given in the next Number of your valuable periodical, of the cause of the present very unequal distribution of subjects for disaction; one of the west-end schools having as many, or more than they can dissect, whilst in the Borough we can get very few indeed, bearing no comparison to the demand, and proving a very serious inconvenience to the students in general.

I am, Sir, your constant reader, A WEBS-STREET PUPIL. Nov. 16, 1835.

". We much doubt if the " distribution" is unequal. Does our correspondent know the proportions on authentic information?

To the Editor .-- Sir, -- I throw myself on your justice, in transmitting the following reply to an article in a late Number of Tue LANCET, Aug. 29, on the subject of " Dr. Wright's Pearl Ointment for Cutaneons Diseases." of which I am (by purchase) the proprictor. The writer of the article, without qualifying doubt, asserts that the active principles of this cintment are arsenic and IGDINE IN DAMAGES MELLITUS .- To bichloride of mercury, -- yet it does not conthe Editor. Sir. The perusal in your extain an atom of either of those substances! cellent journal, of a paper on the discovery. It is not surely too much, therefore, to exsugar in the blood of a diabetic patient, pect that his pathological deductions are aced me to forward to you a no equally fallacions; and that the symptoms, k case which I have treated suc- which he describes as having succeeded to in the connection of cause and effect, with the application. The writer of course is too homographic a man to ascribe effects to this ointment which he does not conscien-

tiously believe to have resulted from its was, or which he knows were produced by other treatment; he is evidently a man "who bears his faculties so meekly," that he is wont rather to extenuate faults than " set down aught in malice." * * Sir, yours respectfully,

ZACCHEUS HUNTER. Webber Rew, Blackfriars, Oct. 24, 1835.

*. No attack having been made by our correspondent, "A Licentiate," on the character of the late Dr. Wright of Stafford, we have omitted the concluding portion of Mr. Hunter's letter, thinking that it was both uncalled for and unnecessary .- Ep. L.

NORTH-LONDON HOSPITAL.

LITHOTOMY. - Mr. LISTON performed this operation on the 28th of October, on a youth aged twelve, who had suffered under the disease for some time. The operation was performed in the usual manner, but the surgeon found it necessary to divide the right side of the prostate, in consequence of the inordinate size of the stone; he re-marked that he preferred taking such a step to lacerating the parts. The stone was such a clear and simple account of the stomach as he of about the size of a pullet's egg. The wishes to see, in the Paint Namber of slittle Monthly operator observed that it was not often that! Magazine published in London, called "The Chrisstep to lacerating the parts. The stone was operator observed that it was not often that stones of such a size were removed from subjects so young, but he had in some in-stances met with them much larger, even in it was always necessary to proportion the forceps to the size of the stone to be removed. The operation was completed been doing well.

BOOKS REDEIVED.

Elements of Bedside Medicine and General Pathology, or General Disease-Discourse, with a Sketch of the Origin, Progress, and Prospects of Clinical Medicine and Surgery, &c., with a Confession of mixed M₂ ical Faith, &c. By J. S. Thorburn, M. D. London: Longman and Highley, 1836, 8vo. pp. 437.

An Experimental Guide to Chemistry. By Edward Davy, M. R. C. S., 1836, 12mo. pp. 98.

St. Thomas's Hospital Reports. By John F. South, Assistant-surgeon. No. I. Nov.

An Inquiry, physiological and pathological, into the Proximate Cause of Cholera. By Protheroe Smith, M.R.C.S., and Senior Surgeon to the Parringdon Dispensary. London. Builliere, 1835.

CORRESPONDENTS.

A Non-professional Reader will find just tian Physician and Anthropological Magazine.

Our arrangements do not allow us to devote the space which would be requisite for the insertion entire of the communication of Bristolieusis. patients under six years of age. In the the writer has no objection to allow such a careful and present case the operator used a small adult the vein of bought and argument from the super-forceps, remarking, after the operation, that statice of expression which arround it, we will find room for Lis views.

ERRATE W .- The initial F. in the name of Mr. within two minutes. The child has since Banicle, attached to the letter at page 271, should

METEOROLOGICAL REPORT.

(Betract from a Meteorological Journal kept at High Wycambe.

Lat. 51° 37' 44" North. Long. 31° 45" West.)

Nov. 9 10 11 12 13 14	Thermometer.		Barometer.		Rain.	Wind.	Weather.
	Highest.	Lowest.	Highest.	Lowes.	las. Dels,	1	4.5 2
	36.75 36. 40. 40.50 39. 38.50 42.	32. 32. 33.50 31.75 31.25 33.75	29.96 30.11 .11 .03 .11 29.94 .86	29.81 30.06 .06 29.91 30.07 29.86 .81	0.06875 0.00625	N.W. N.W. N. N.W.	Dull and heavy. Fine through the day. Fine through the day. Morn fine; rainevening a Fine through the day. Dull, with all

4

THE LANCET.

Vol. 1.1

LONDON, SATURDAY, NOVEMBER 28, 1835.

T1835-36.

NORTH-LONDON HOSPITAL.

CLINICAL LECTURE

ON CASES OF

ERYSIPELAS OF THE HEAD,

Delivered in the Session 1835-36,

BY DR. ELLIOTSON.

same disease, and all illustrative of the great and cheeks was inflamed, the redness was advantage of a particular mode of treatment. They were instances of crysipelas eyelids. The skin felt hard and brawny, of the head, which is a most dangerous and there was considerable pain in the not have to treat a patient with it; for al- had great thirst, and a feeling of nausea.

though one may follow plain indications lits bowels were open three or four times in the treatment, disappointment frequently is day, the evacuations consisting, he said, the treatment of the said of the s attends our efforts, and patients die with of clear water. Pulæ 120, skin bot, hands signs of inflammation of the brain or its tremulous, and he had altogether an agitated nembranes, more or less effusion of fluid being found after death in or upon the brain. Years in the West Indies and America. All Many of these cases yield to bleeding, cold the inflamed part of his head was directed nourishment are very soon required. But tion had occasioned the cuticle to come off however plain the indications, we are so in many parts. often disappointed in the treatment, that I

said his age was forty-six, though he looked at least ten years older, and had the appearance of a dissipated man. He was a poor shoemaker. He denied that he had ever been a drinker, and also most positively that he had ever had venereal disease. but his wife is now in the hospital on account of secondary symptoms, and he appeared a most unfavourable subject for the discase. On the 15th he had been attacked with rigors, followed by pain in the head and back, general heat and thirst, and some degree of purging. On the 16th and 17th he found that his face had begun to swell; it had also a feeling of tenseness and smart-I HAVE four cases now to mention to you, ing, which continued to increase. At the gentlemen, which were all instances of the time of his admission, the skin of his nosa disease, and I would at any time rather head and cheek; his tongue was white, he applications, purging, mercury, and starv- to be well moistened with a saturated soluing. Other cases require these measures in tion of the nitrate of silver, but no medicine a mild degree. In other cases, again, evacu- was given him. On the next day, the 19th, ants cannot be borne, and quinine and good he was found to be much better; the solu-

He suffered a good deal of smarting for was very thankful when Mr. Higgirssome hours after the application, but was
sorrow made known a mode of treatment now perfectly free from pain of any kind,
which was much more beneficial than the remedies already in use. Now, it is a rare less tremulous, he had had one evacuation; thing for one man to have four cases of cry- his thirst was much less, though his tongue sipelas of the head all occur nearly together, was still white, and he had not slept in the and all do well. The disease is far more night on account of the soreness of those dangerous in those who have passed the parts of the skin where the cuticle had middle period of life, and in those who have been raised. On the 20th there was a little affered from intemperate habits, or from pain and swelling on the left part of the In question two were young nitrate of silver had been applied. This be attributed to costiveness, and he was ordered five grains of calomel and ten occurred in a man, of colocynth directly. On the 21st, as the

had been more or less delirious, was like severe nature, have lately been admitted, a person in delirium cum tremore, and had and I think it is a pity to lose the oppornot complained of his arms. Upon further examination both his legs were likewise in the same condition. His debility had been extreme, and to have made incisions, I felt satisfied would have caused his immediate death. He could not have supported the hemorrhage which incisions such as would have been necessary to beneat him would been as severe as any I have witnessed or have occasioned. I therefore contented a long period. I had at one time very ample myself with applying the caustic, but, unfortunately, on account of the violence of the man, it could not be applied properly. It was applied, as I have mentioned in a former clinical lecture, with a stick, but, through the man's turbulence, it was done so inefficiently, that there was no chance of its producing good, and it was certainly not applied until far too late to be of service, even had it been applied in the best manner. To have made incisions into the limb, even juries, slight or severe; and is a frequent at a later period, to let out the matter, would attendant as well on the most trifling operaalso, I am satisfied, have been useless, be- tions as on those of a more severe nature,cause the incisions must have been carried a disease which, when it prevails, is calcuto a very considerable extent, for on ex-lated to mar the best efforts of the surgeon amining after death, suppuration was found in conducting the treatment of injuries, or down as low as the various bones of the in cudeavouring to relieve patients by opeextremities to a very great extent. It was ration. a case in which no treatment whatever could have been adopted until it was too late, on neet with it both after injuries, and, to use account of the existence of the disease not a doctor's phrase, as an "dioptable file-being known earlier. Afterwards, when the country that is, it comes on of itself, and does there was a probability that matter existed, not arise from or depend on any other dis-I myself should not have thought of having case. It presents different degrees of seincisions made into it. I may mention that verity. It attacks merely the surface of the deep suppurations existed where no caustic body, the vessels which ramify on the sur-had been applied, just as where it had; and face of the chorion, which you see exposed in many places where no inflammation after the application of a blister, the vessels could have been suspected. The inflamma- which supply the corpus mucosum;—those tion had in all begun at the deepest situ-ations, and extended upwards to the sur-face; for in all, the deepest situations exhi-of the cutaneous tissue is discased; and, ocbited the marks of the most advanced in- casionally, something more, - the parts unflammation.

NORTH-LONDON HOSPITAL.

CLINICAL LECTURE

ERYTHEMA AND ERYSIPELAS, in depth.

Delivered in November, 1836,

BY MR. LISTON.

THE last time I had the pleasure of socing it will follow a trifling wound, especi you here, gentlemen, I proposed saying any of the fibrous tissues, or of something with regard to stricture of the at the point of the elbow urethra and other diseases of the urinary tacks of erysipclas are al urethra and other diseases of the panied by more or organs, but two very interesting cases, more panied by more or organs, but two very interesting cases, more panied by more organs.

tunity of making some remarks upon the cases whilst they are fresh in your recollection; therefore, with your permission, I shall for the present delay my observations on urinary diseases, and take up the subject of erysipelas.

The cases to which I have alluded be opportunities of observing this disease in an hospital that was extremely unhealthy, until the management fell into new hands, when, having the opportunity of becoming in some measure the instrument of reform, I endeavoured to amend the unhealthy condition of the institution, and succeeded in my object. Now this is a disease which is well worthy of your attention and study, seeing that it is apt to follow all sorts of in-

dermath.

The one form of the disease, also, is apt to pass into the other. The erythema, so called from its red appearance, is apt to pass into the substance, and become what is called "erysipelas," a disease which involves the neighbouring tissues. We have then an intense redness of the surface, and a swelling of the parts attacked, which passes into the subjacent tissue. Thus the disease is apt to spread both superficially and

The constitution is predisposed to attacks of crythema or crysipelas. Disorder of the digestive organs predisposes to it. It is very apt to attack hard livers, and those who indulge in spirituous liquors. In such patient

autumn it mostly prevails; and at those peby the London road, must have observed a valescent. large piece of flat ground, covered with and before that regiment left the barracks, a considerable number of men, and two or three of the officers, were destroyed by

The disease may also be produced from exhalations from dung-heaps, or filth collocted about hospitals; and I recollect that a hospital at Edinburgh, in spite of all trances I could make, a quantity

The state of the atmosphere predisposes contagion. There is not the least doubted / very much to the disease. In warm damp that. One of the cases at present In the weather it is more frequent than in very hospital shows that fact tolerably well, cold or very hot weather. In spring and though a stickler might say that the woman was exposed to the same exhalations, or to riods you can almost predict with certainty the same atmosphere as her mistress, whom the prevalence of erysipelas from the state she attended with the disease before she the atmosphere. It also often arises came in here. I allude to the patient who my putrid exhalations, and the exposure is lying at the farther end of the ward of patients to miasmata. A very remark- No. 2. Her mistress had crysipelas followable instance of this occurred some time ing puerperal fever, and our patient was ago, in the cavalry barracks in the neigh- attacked with erysipelas in a few days afterbourhood of Edinburgh. Any one who has wards exceedingly severely. She was brought been in the North, on going into Edinburgh here, and with difficulty she was made con-

I had very good opportunities of being luxuriant and rank vegetation, and present- assured that this disease was contagious, in ing an intolerable nuisance to the nose. The the hospital to which I have alluded. When water from all the sewers of that beanti- I became a dresser and a house-surgeon ful town are collected into a sort of filthy, there, and for a long time afterwards, eryputrid rivulet, which I think they call the sipelas raged in the establishment as a per"Tumble," and in that way is collected feet plague. No patient was admitted with in reservoirs; here and there are floodgates, a breach of surface, an ulcer, or a wound of and at certain periods this horrid collection any kind, without suffering crythems or is allowed to flow over and irrigate the crysipelas; and scarcely a single operation meadows which I have mentioned; and such was performed, seldom even blood-letting. is the effect of this process that you cannot without the same result to a greater or less pass in that direction, especially just before degree. This arose from the foolish practhe setting in of wet weather, or a storm, tice of washing every sore indiscriminately, without being almost suffocated, and finding as was the fashion of that day, with a sponge it necessary to hold your nose all the way over and water, and I believe the same sponge half a mile or more of road. I am, in fact, and water were often used for many sores, astonished that the nulsance is not abated, and the consequence was that a patient with An attempt was once made to have this a putrid sore, or labouring under an attack lovely stream covered over, and the contents of crysipelas, soon became the means of carried down to the Forth; and if I mistake spreading erysipelas through the ward; and not, a bill was carried into Parliament with it was only when I took charge of that hosthat view, but great efforts were made by pital, and exercised a great deal of care, in-the proprietors of the land to prevent the troducing such a better system of dressing passing of the measure, and they succeeded as is now pursued here, - after destroying in getting the bill thrown out. No wonder all the sponges, and directing that if the they should be anxious to preserve a uni-wounds were washed at all (and there is no sance which produced them, I believe, some use in washing anything but the surround-20t, or 30t, an acre annually, for land which ing skin), they should be washed with clean previously was not worth twenty shillings, water and tow,- that we succeeded in im-The cavalry barracks stand pretty nearly in proving the state of the hospital. I was the middle of this swamp, and some time booking the other day over the list of pa-after a regiment of Dragoons was stationed tients on whom I operated in that hospital there, and on the very day following that for stone, and I may enable you to judge of upon which those sluices were opened, the benefit gained to the patients by these and the irrigation commenced, eight cases changes, when I state that of about forty of crysipelas appeared amongst the troops, leases I think not more than five were lost. who were previously perfectly healthy; The same remark applies to the operations of other descriptions; and certainly a very great number of the operations which I performed in cases where the union of parts by the first intention was necessary for the cure, such as operations for hare-lip, and the restoration of lost features, were treated with equal success. I believe that a great deal depended also upon an improved yentilation of the wards; and Sir GEORGE BALshore was collected into one bear me out in saying, that to such a fearful extery patient that was reevery patient that was reextended the disease prevail at one time in that institution, and so difficult was its prethat that they talked of taking off the aropagated by vention, that they talked of taking off the

f, or removing the ceiling, and retaining titses and very rapidly destroys it, ultimate-dears, to see if that would do any good. By destroying the skip hot because, as old from much alighter and simpler causes than ! Accourate Hospital, says, a man's waist-

ds would load us to suspect.

Egythemists confined to the surface, and which supply she skin, which then niccesses a bright reduces, which is lost, at rily suffers also.

This putvid secretion access after injury the part may pit slightly when the disease from a had alour. Exceedingly had effects is advanced, and some slight offusion has result from inoculation with a fluid of this occurred in the cellular tissue." The patient kind. Nurses who wash bandages or complains of a burning sensation of the poultice-cloths, sometimes get their fingers part, but not of throbbing or violent pain. In crysipelas the whole thickness of the skin bandages, and are thus inocclated, although is affected, the ressels part with more of the matter is so exceedingly diluted, when a their contents, and an effusion of serum great degree of action is produced in the very often takes place under the cuticle, skin, and a quantity of this purulent fluid is pected to be enabled to illustrate these ob- of secretion which is found in bruised wounds which, I presume, are to be found in the extensive collection on the other side of the by inflammatory action and the deposit of way, and for which I wrote, but they are lymph. This aerid fluid is poured out, is not forthcoming. What you now see are extensively infiltrated, destroys the tissue. more like caricatures than realities, but, in and is often the cause of the rapid spread the absence of better drawings, they may of gangrene. Before a part becomes ganserve to illustrate the disease. Here are grenous, a streak, a darkness, a sort of resicles produced by the oxing of the vesicles brownish tinge, is seen on the integuments, sels, and in consequence of which vesicles or above the part which altogether has perish appearing, the disease is placed in the order od. There is a brown streak seen running called "bulke," and claimed by the physician. In the course of the vesicles. This is not Here is a drawing of a case of bulke, which was "diffused inflammation," as it has been admitted into the bospital; the vesications, called, of the cellular tissue, but an infiltra-had all formed without the existence of tion into it of putrid matter, which the cell-any previous inflammatory action. But the of the tissue, being broken up, readily admit vesications do not uniformly occur in ery- The streak running in the course of the sipelas, and I do not see why physicians vessels is not the result of inflammation in should have the exclusive charge of this the vessels themselves, but is the effect of species of the disease. There is also effu- the cellular tissue being there very loose, and sion into the subcutaneous cellular tissue, readily admitting the secosity. The late Dr always producing more or less swelling, Duncan, junior, of Edinburgh, -called "juparticularly in those parts where that tissue nior," when neither very young nor very is exceedingly loose, and casily broken up, well-conditioned,—a very learned man, and as in the scrotum, the prepace, and the long editor of the Edinburgh Journal, wrote eyelids. The effusion takes piace in those a book on what he called " Diffuse Cellular parts very early in the discase. Sloughing Inflatumation, making a sad mess of the severy soon developed in them. The effutuation, and doctors generally do when, step sion consists in general of an albuminous ping out of their proper sphere, they attempt serosity - of lymph, - gelatinous looking, to teach surgery, or to meddle in any way but congulating naturally, the former kind with diseases which are curable, under procoagulating only by heat, or the addition of acids or of alcohol. In the more advanced stages, the lymphatic effusion very often becames puralent, and you have decomes permission of pas in the part most infamed and but it often suffers from infiltration follow posits of pas in the part most inflamed and that it often sunces from manufation todow most tense; and on cutting into it either ing upon affection of the neighbouring and daring life or after death, you perhaps find investing structures. I am not very sure that in transactic gangrene it would be a little beyond this, lymph is found filling up the cells of the subcutaneous tissue; and yet a cight ligature, when, from the plane and there and there as globule of pus appears.

Supplies of these is merely albuminous services an animalism of the control of the inflammatory fever, and the control of the c Parther of there is merely albuminous se-rosity; but in many cases there is a secre-tion of an exceedingly acrid nature, dark probably, on the and putrid, which parses into the cellular practice; I do

Erympolas, however, as you see, may arise Farke, a surgeon at one time in St. Barproposals to unroof and refloor a set of coat cannot be long on are without his coat burning also. There is a loss of thelyesucle which supply the skin, which then necessa-

You see it marked in this drawing. I ex- formed in the cellular tissue. It is this sort servations by some drawings of the disease, There is excitement of the surface, without and the same of th

We had very good instance of the de-truction of the cellular tissue lately, here, a a patent who was admitted with a bursal plargement over one of the ligaments of patella, which he attributed to kneeling Thard ground at prayers, he being a very gid Catholic; but before he was dismissed e was seized with an erythema of the scroim. What that arose from I know not, nless it was from the accumulation of It might be from wearing dirty reeches, to which the old writers somemes attributed the spread of venercal disuse. Certainly the erythema was just as kely to have arisen from wearing dirry nee from kneeling at prayers. This eryy swelling of the scrotum, and in twentyur hours afterwards there was a large allular tissue, and the skin was only preented from sloughing by a very free incion into the part on each side of the raphe. Very often, after inflammation at the surfter erysipelas, and the result of this infiln one of the first patients to whom I al-

sing then also violently delirious.

upply a tournique, in such eases, though matrie region. The pulse came down to his is almost the only surpose for which 1 116, and she rather improved. The pure an fancy a terrilogue to be of use now at tures were repeated very freely, six or sight tures were repeated very freely, six or eight dozen being made over the eyelids. There was great infiltration over the eyes, so I took the liberty of putting the lancet in at the root of the nose, and ran it powards, in the mestal line, for an inch or so, in order to allow the serosity there collected to sercape in that way, and a line of the nitrate of silver was drawn across the upper pas of the thorax, with a view to prevent the extension of the luflammation in that direction. She became a good deal better, and on the 28th of October, having been admitted on the 22nd, the pulse had come down to 90, and was very weak. On the 30th the pulse was 95, and very weak, and she was ordered a little port-wine, with a reaches as was the enlargement of the mixture of cyanuret of potass, tineture of hyosciamus, and infusion of rhubarb. iema, however, was followed very rapidly. She was not in a state to bear any further abstraction of blood, and this medicine was given to allay the general irritability, and to ark speck at the lower part of it, in the put the stomach into a better state, and clear the tongue. She is now convalescent. but still remains in the house.

Case 2 .- On the other patient an operation was performed, out of complaisance, as ce, we see more or less effusion into the the French call it. She came here to have allular tissue, as well after crythena as a tunour situated betwiet her accident a tumour, situated betwixt her eyelids, removed, on account of the deformity it occaation is long after the crythema has dis sioned. Her friends had advised her to have ppeared - the rapid formation of abscesses. it removed, and it was dissected out, accordn one of the first patients to whom I alied in the female wards, a number of lose abscesses formed in the scalp, several aye after the disappearance of the redness the surface, and we were under the nessity of making about six incisions into saity of making about six incisions into my house, to have the stitches taken out, ie scalp, for the purpose of evacuating the the wound having been brought together by two sutures. On her way home from my Case 1 .- Having made these general re- house, or on her road to chapet, I do not tarks, I turn to the cases before us. Here know which, she was traced into three or a map of the first patient, who, it appears four gin-shops, which she did not leave, it is on her statement, had attended her misces during three days and nights, while drop of comfort, and the consequence was ic latter was suffering under an attack of that on the next Tuesday she was attacked ysipelas and puerperal fever, of which with crysipelas of the head and face, and on ne died. On the third evening of her at- Wednesday was admitted here with inflamindance, the servant was attacked with mation of a rather severe character. Her liopathic crysipelas, violently affecting, in-pulse was very strong and full, as it had aming, and distending, the entire surface been from the commencement, such as you the head and face, and extending some dis- might expect in inflammatory fever, and mee down her back. The cyclids were so felt warranted in abstracting a little blood. such distended that vision was completely I therefore ordered about ton ounces to be patructed. In this state she was admitted, taken away, and this on the next day was On found very much buffed and cupped. Common ressing the stomach great induration and aperient medicine not affecting her, it hethreme tenderness were perceived. The came necessary to give her croten oil more scies were very rigid, the pulse was 120. than once. The parts were punctured, and as ordered some antimonial medicine, afterwards fomented. Although at first she which several vest less had very soon became weak and low. The type marts, were very freely of the fever changed entirely. The tongue the benderness of the became loaded with a brown crust; the led to the hypo- pulse was weak, indistinct, and exceedingly

chick. In a day or two she became delirious, better instance of the hope results of por-like the other patient; it was even necessary severing to the life; the action case in his per-indeed to put her into a strait-waistcoast. Inlahed, and I have commented other far-gone This delirium was followed by coms. One cases in which all the powers memord to have ans cerrum was recover by coma. One case in which all the nowest secured to have day the redness had gone off suddenly, gone except that of swallowing. I recollect which I am inclined to attribute to her having been exposed to a current of cold air by whom I was much concerned, who that subtle comming of the water-closes door, next mitted to the severe operation of the upper jaw for temour involving of a most procarious state, and had, in fact, Erysipelas of the head and face superversit, every sign of dissolution except one. She but, from some cause or other, the crystoplas was lying stretched out in had, has ex-suddenly disanneard and come a most and come a second or the second of the second was lying stretched out in hed, her ex-suddenly disappeared, and come came on, tremities were cold, with scarcely any pulse, and a practice was pursued in that case breathing, the mucous rattle, and a lifting and the patient ultimately recovered. up of the nostrils; in short she was coma-tose—quite insensible—and could not be crysipelas, I caution you that although there roused in any way. The only symptom is an appearance of strength and inflammawhich encouraged me to hope that she tory action, there is no great power to susmight still struggle through was, that she tain that action; and if you remove blood had not lost the power of swallowing. She in any great quantity, the patient will be took any thing that was offered to her, - liable to sink rapidly. The type is very first port-wine, and afterwards some gin- often, almost from the first, of the typhoid she has been supported until now, and as an inflammatory fever, it is very apt to though she is still in a very precarious state, tchange into the typhoid. On looking over yet I think there is some slight chance of her 'Mr. Wernand's excellent book "On recovery. I may add that, in addition, a Blood-letting" the other day, I observed that large blister was applied to the back of the he mentions, amongst many other cases in head and neck, with a view of producing a which he recommends blood-jetting, that of diversion of the secretion from the base of a lady labouring under ervsinelas, to whom the brain. We find in many cases, as in he was called, where, on entering the room, this one, that when the crysipelas goes away he found a quantity of wine-and-water by rather quickly, effusion takes place at the the bed-side, which she had been ordered to base of the brain, and sometimes symptoms take, with bark, every hour. In that case arise which would induce us to suppose that he says he changed the practice, and bled offusion had taken place, but without our her three times. But that is a practice afterwards being able to discover any effu- which I would not have you follow in all sion of serum. Professor Buans has stated cases, though the lady recovered. You in his "Principles of Surgery," that in must be cautious in these cases, of resorting erysinelas "the high excitement of the sen- to blood-letting. You can take away blood tient extremities of the nerves, from inflam- by puncture, a practice first introduced by mation, often causes torpor of their origin. Sir Richard Donson, with great relief to and produces all the symptoms of hydro- the vessels affected, allowing their serous cephalus, without a drop of water, or any contents to escape, and getting rid of the trace of inflammation, being discoverable." swelling, --preventing, indeed, the formstrace of inflammation, being discoverable." swelling, --preventing, indeed, the forma-The probability was -- from the symptoms in tion of matter, or, what is worse, the dethis case-from the deep come observed - struction of the cellular tissue by sloughing. that effusion had commenced, and a very In other cases, again, there is a great large blister was, therefore, as I have said, deal of effusion into the cellular tissue. applied over the back of the head and down between the coverings of the cranium, or in betwixt the shoulders, and this was followed an extremity, and you will be able abunby good effects. The patient was next day dantly to empty the vessels, to evacuate the better, her breathing became easier, the life effusion, and to accomplish your purpose, ing of her nostrils went off, the extremities by having recourse to one or two incisions became more warm, and she now makes at- of no great extent. That practice, however, tempts to speak, and seems to know what you could not follow in the face, with any is going on around. All this shows you that propriety, from fear of producing deformity; in such a case it is unwarrantable to stand but still you might employ there a great by, and to give up the patient as lost without many punctures, which are preferable to making any remedial attempts. In the most leeches, because the bites of leeches very desperate case of this disease, or of any often become irritable, and rather ten other, it is your duty to act upon the maxim, keep up the inflammatory action. that so long as there is life there is hope.

As long as the patient can swallow, you of leeches. By those pure must endeavour to keep up the circulation remove as much bleep up the patient cartainty and prevent sinking. There could be no the natient course.

-none at the ankles; she had laborious very similar to what was adopted in this one,

with very great readiness, and in that way nature-a low fever. Though it commences

such. In the sort 1911 are very often white extrinsied to the surface, which I alled on to make decline in the control of some coefalled on to make measure individuals the inter. Without thought the late, matter will satter. Withou stage was matter will bring in very prest describing in Sarge bag. one time arm sloughting of the Brous saue occurs, and ultimately, the destrucon of the patient. I have again and gain seen sloughing of the aponeurosis of pecipital bone, where the patients have gled through, in spite of the treatment, ad in spite of the neglect, though a great of such patients have died. You rould therefore make the incisions, and at a early period, that is, as soon as the prence of matter is indicated. You are not wait for the redness of the integument, r for the thinning and pointing of the ab ess, but must make the incisions into lose parts which feel boggy. It is much ctter, indeed, that you should be disap-ointed occasionally in not finding matter, ian that matter should be left under the raip. In erysipelas of the extremities, here the formation of matter, or sloughing, threatened, you must use pretty free in-The suggestion of this practice is laimed by modern writers on surgery, ut the fact is that the old surgeons knew amething about it, as well as the surgeous f the present day. Here, for instance, is n old writer who says, that "scarifying he skin in gangrene is a very idle practice, pless the surgeon hath sagacity enough, then the membrane is not destroyed, but nly ready to suffer, to cut largely through oth, and thereby let out the inflamed juices nd by that means take off the distention." f that is not to the point, I am very much nistaken. The writer proceeds to say, " In uch an act, the surgeon shows both judgsent and resolution, and such good treatneut continued may cure the patient." here is just as much in this short quotaion, as you will find in some of the modern

548V8. Now it is not necessary to make an inciion from one end of the limb to the other. laving searched out the point where the nfiltration is greatest,-where you think here is a certainty that the cellular tissue s broken up, and where the matter, if any, nay be discharged, you should there make he incision; and one incision is just as good is half a dozen, or a very long or large one. The patient Brown from whom this sketch vas made, was admitted into the hospital ome time ago. He had received a blow on he point of the elbow. I do not know vhether there was any wound: but if any xisted, it was small; but I again warn you, hat those wounds over the point of the over my joint, are very apt to PRODUCT.

ing lotion or other, very likely contains Goulard's extract, and there was a gre degree of tension and throughland. Late t part which was principally infilted made an incision, and a quantity of blood was evacuated, and sero-purulent matter ill-digested pus. Immediately upon the incision being made, the redness went off. In two days he returned here with a discharge from the wound, in no great abundance, perfectly healthy, and with the whole of the inflammation gone. The man was cured, in fact, upon the spot.

Now as a local application, I would recommend to you, in preference to any other, frequent fomentation, and with fluid of a comfortable temperature. You may have your liquid for fomentation, medicated or not, as you choose. Patients, however, are inclined to use, and persevere with, medicated applications much more readily than others. You may have simply a couple of bags, containing chamomile flowers, in a basinful of hot water; one of those hags, after lying awhile, is to be squeezed dry and placed on the part, and the two are alternately to be applied, hot and hot, for half or three quarters of an hour at a time. These applications are very grateful to the feelings of the patient, and give much greater relief than any other. They act beneficially by keeping the surface perspirable, promoting the discharge from the surface, and increasing, also, to a certain extent, the secretion into the cellular tissue, - a means which nature employs to relieve the excited capillaries. When effusion can take place readily into the cellular tissue, the inflammation is of a milder kind, the patient suffers much less, and great advantage may be derived from increasing this effusion instead of pre-venting it. After the fomentations you may dust the diseased part over with some bland powder, - flour, or any thing of that kind,with a further view of relieving the feelings of the patient and of protecting the tender This prevents any and irritable surface. sudden change of temperature, or blast of cold air, from repelling the inflammation; but you are still to foment, after the incisions or punctures have been made, from time to time, say three or four or five times a-day, according to circumstances.

I should have mentioned, in speaking of the constitutional treatment, that it was essentially necessary to put the digestive organs into proper order. The bowels must be emptied, and any unessiness which exists about the stomach and liver must be resignit,-wounds of the fibrous tissue lieved by the application of leeches, and you will find a great advantage after the erysipelas. This bruise was bowels are emptied, from the exhibition of small doses of antinonal medicines, company and the small doses of antinonal medicines, company and the small distance bland if you like with a little school. bowels are emptied, from the exhibition of seance which is seen bined, if you like, with a little calomel.

The works of DESAULT, which were revised and edited by Because, continue and cellent memoir on this subject, where practice of exhibiting small doses of an-timony is recommended strongly, and this ractice you will have no reason to regret. he antimony keeps down the force of the circulation, it acts beneficially on the bowels, and it promotes the secretions generally, while undue inflammatory action exists. blackened with the caustic. In others, Afterwards it will be necessary to amport have been drawn here and there, transthe patient's strength by every possible ly, longitudinally, and "sinntendicularly," as means, by nourishing food, and in some cases even by wine and stimulants of one sort or another.

erythems, and when it does not involve a of his way. large surface. Sometimes trifling crythema I may add, that sometimes the mischief follows a puncture with a pin, or a fish-bone, of crysipelas is not confined to the cellular or something of that kind, impregnated tissue and skin only. Now and then even the hand, the nitrate of silver may be rubbed seen great portions of them slough out. I on with perfect propriety. The inflammation have seen a limb rendered perfectly useless the this way will be extinguished; but if in consequence of the destruction of the part, and an infiltration is very likely to men, in which the disease commenced with supervens, so that, instead of the mere erysipelas, producing this effect on the hones, surface, the whole thickness of the chorion in the foot. The patient was treated by a was directed to this a good many years ago, rate the constitutional disturbance, the local in treating a case of crythema of the hand, symptoms were allowed to go on. I saw the fit was precity extensive; it massed over one, patient when he was moribund. The whole or two flugers, and involved the back of limb was swollen, and he was then heetic; the hand to above the wrist. I rubbed he was, in fact, in the last stage of existthe nitrate of silver over it, thinking I ence. A few days afterwards be died, and was doing no harm, but the next day I was I preserved the bones. See their condition. of patrid fluid to escape, by incision along s whole of the back of the hand, and I do not think the patient excepted without a ation; even the knee-joint was involved; and take the parion compared without a same, even the ance-joint was intrinced ensationable destruction of the cellular tisters was actually necrosis of several parts of the articular extremity of the tibia. He suffacements of the internal organs, which happens when the inflanmation disappears where the disease commenced with the cold lettime. The matient than becomes in fact, headers. cold lotions. The patient then becomes In fact, house cometose, or his breathing is embarrassed, would said it.

y he much more a for he internal appar is stain. I have see applied with the late than to bring it been blisters and cauterios applied with the latter view, without effect. I have soon, both in public and in private, cases of erysipal treated by the nitrate of silver, where the whole surface has been rubbed ever and our transatlantic brethren express it. Some of the patients have done well; in others extensive destruction of the cellular tissue. Now as a means of preventing the spread with formation of diffused abscess, has ocof inflammatory action, the nitrate of silver curred. This is very likely to be the case. may be used, drawing with it a line be- and through the hardened and blackened yond the skin which is affected, a consider- epidermis it is not easy to discover the misable way from it. This practice has been chief early enough to adopt the proper pursued in both of those cases that are now means for giving relief. I am not quite up in the ward, and very great advantage to the relionale of the practice, or the indeed may be derived from adopting it precise intention of those who recommend Tae inflammation very rarely oversteps this and pursue it. I had once the pleasure of line. How that happens I shall leave to some being a colleague with a gentleman who of you ingenious gentlemen to explain, but took the very odd notion into his head that an action is evidently established in this way he could care all patients who were la-on the surface which is incompatible with bodning under the disease in question by the progress of the crythematous blush. painting them over blue, -perfectly blue, -The nitrate of silver is a very good applica- with mercurial ointment. I should think tion where there is but a slight degree of that long before this he has seen the error

I may add, that sometimes the mischief with putrid matter; and when the inflam- the bones are affected by it. Muscles are mation is limited to a finger, or the back of affected by it occasionally, and I have a large surface is affected, the nitrate of fascia and the muscles. Sometimes you silver, in driving inflammation from the sur- find the hands contracted, and put into a face, is apt to cause it to affect some other very awkward position. Here is a speciwill be inflamed, and a considerable degree physician, and a very rising one, now deof swelling, and perhaps a destruction of ceased, in a fever hospital; and whilst everythe cellular tissue, will follow. My attention thing was done, I have no doubt, to modeset the necessity of allowing a quantity The local mischief had been going on for petrid fluid to escape, by incision along many weeks; the periosteum had been destroyed; the bone was penetrated by ulcor-

"phiegrecom hatour;" but t er of these m at depend very mon the skill and activity of the sur-it will neither be "phiegmonous," augranous." "gangropous," nor "necrotic" (to coin w adjective), if the surgeon knows what about, and gets the patient under re early enough in the disease. There should be no destruction of the cellular tissue, far less of the skin or of the bone in those Cases.

I do not think, gentlemen, I have anything else to say on this subject on the present occasion.

ST. THOMAS'S HOSPITAL.

CASES AND CLINICAL REMARKS.

NEW TREATMENT OF WOUNDED ARTERIES.

CARE 1. - Wound of the Brackiel Artery in Venesection .- Eleanor Hughes, retat. 25, married, admitted under the care of Mr. Tynnell, March 3, 1834, occasionally suffering from headaches, and in being bled this morning the brachial artery was wounded. Compression was made above the puncture, but she lost eight or ten ounces of blood, and became extremely hysterical. Soon after, a "ring tourniquet" the insertion of the corneo-brachialis. The ing slightly; general health tolerable. ring tourniquet consists of a metal ring, larger round than the limb, and about an tapped so as to admit a screw, to the lower | puncture. end of which a pad is fixed, the outer end having a small handle to turn the screw, so adhesive deposit now quite absorbed; the that the pad can be carried to or from the artery can be felt pulsating in its natural centre of the circle. This instrument makes situation, but not at all increased in size, pressure only on two parts - by the pad on strength, or volume. On the 16th she was the astery, and by the portion of ring on the limb immediately opposed to the position of the artery; thus it does not interfere with the lateral circulation. A firm compress, wetted with cold water, was applied over the wound; the limb was handaged tightly, from the fingers to the tourniquet, and the arm was elevated so as to favour the return of the blood to the heart. The whole limb was enveloped in flannel.

9 p.m. A dose of ammonia with campbor mixture relieved the hysterical symptoms. Tolerably easy, but rather restless; pulse soft and compressible, tongue slightly furred. Opi Sed. In xxx.

a telerable night, complains of

in the arm, which is of the the temperature as the rest of the budy. 6. Bowels have been opened once only,

and that by medicine, since her admission. Complains of pain in the arm, and is very

restiens; pa e 90, and soft. 7. The ring tourniquet slipping very much, a common tourniquet was put on instead. Whilst removing the compress and bandage from the puncture, about a tempoonful of healthy pus escaped, which afforded her great relief. Simple dressing and a soft compress of lint were applied, and the whole was secured by a slight bandage. A common arm-splint was placed on the under surface of the limb to keep the arm extended. Pulse 94. Ordered Colorynta and Calomel, and an enema every evening if

8. Has been rather sick; the arm has been very easy; very little discharge from the wound, and no hemorrhage, although the tourniquet has been stackened considerably. Bowels relieved three times; pulse 90, and soft.

necessary.

9. No sickness, but says her arm feels hot and burning. On removing the dressing, a little pus escaped, but the wound is granulating.

10. Her arm is very easy. As, however, she complained of great pain from the tourniquet, it was taken off. No hemorrhage has occurred since.

15. The wound nearly healed; there is much adhesive deposit still left around the was put on, so as to compress the artery near artery, through which it may be felt pulsat-

17. Going on extremely well; arm supported on a splint in a semiflexed position : inch broad at the circumference, which is a firm compress is still applied over the

> April 10. Puncture perfectly healed: the presented cured.

> Remarks .- "I have seen the patient frequently since" (said Mr. TYRRELL, in commenting on the case), "and she can use her arm without difficulty, even in heavy work. There is no appearance of disease of the artery or veins. This is the fifth case of puncture of the brachial artery in bleeding, which I have thus treated, in every instance, successfully. In one case I had an opportunity of examining the parts several weeks after the cure had been completed. The patient was at St. Thomas's Hospital, and in performing venesection, one of my dressers punctured the brackial artery; I was sent for, and adopted the treatment prescri the foregoing case, with success. Some weeks after, the patient died suddenly, when I found that the median wein had its cases obliterated for half an inch above and be

united, and its caliber perfect. The parts are

preserved in the museum."

CASE 2 .- Wound of the Radial Artery .-W. Lowe, metat. 22, carpenter, admitted under Mr. Tyrrell, Nov. 11, 1834. In cutting bread with a penkuife, the knife slipped, ran into his wrist, and was immediately followed by a large gush of blood, which he commanded by pressure till he arrived at the hospital. On examination, a small wound in the integuments was observed, which penetrated to the radial artery as it passed over the insertion of the muse, sunin. long. Large gushes of blood pumped out rapidly, but were restrained by pressure of the vessel above. A common phial-cork having been split vertically, one portion of it, wrapped round with lint, was placed with its convex surface upon the artery above the wound, and tightly confined with sticking-plaster, which immediately arrested the hemorrhage. The edges of the puncture were then brought together with plaster, a compress was applied over it, and the whole was confined with a roller. The hand was tightly handaged, from the fingers to the wrist, and the limb kept elevated.

Nov. 12, 13, 14. Going on well.

17. On opening the bandages to-day, union had not taken place, but the bottom of the wound was healthy and granulating. There was not the least bleeding either from the wound, or on removing the compress on the radial artery. He had some pain and cedema of the hand, owing to the bandage round the wrist, which was therefore loosened, the arm and hand well kept up by pillows, and a large poultice was applied to the hand. In the afternoon bleeding again occurred; the compress having been taken off, it was reapplied; the limb was confined as before, and the hemorrhage stouned.

24. No disposition to bleed since; the wound only requires cicatrization for its

perfect cure.

28. The compress is still retained, but not so tightly as to prevent the flow of a certain quantity of blood.

Dec. 5. No return of bleeding, the external wound is almost healed, and on the next

day he was presented cured.

Remarks .- " The vessel," Mr. TYRRELL remarked, "was wounded in a position in which it could have been secured without difficulty, but the case illustrates the success of the plan. The treatment I consider especially applicable to wounds of arteries difficult to get at by operation, without risk to other important structures, as in the case of puncture of the brackial artery, in venesection, or in wounds of the palmar or plantar arteries. I have treated all the above named vessels, on the plan described, successfully. The principle of the treatment consists in arresting or diminishing favour!

low the puncture; it was adherent to the the low actions to the injured vessel, artery; the wound of which was firmly pressure of the trunk or tranks codimu pressure of the trunk or tranks commu cating with it, in keeping the wounded p carefully adapted by moderate pressured in preventing renous congestion, by position and support of bandage, and in forming the adhesive union by perfect quiet. It is necessary to persevere for two or three neeks to cusure a perfect cure."

> BROKEN CATHETER IN THE BLADDER EX-TRACTED THROUGH THE URETHRA.

> Joseph Strangmore, wtat. 40, admitted under Mr. TVRRELL, Jan. 11, 1835. Has had stricture for some years, and passes in-struments for himself. This morning, however, on passing the instrument, it met with great resistance in the bulbons part of the urethra, and on using force the catheter a No. 6) gave way an inch above its curve, where it had been once soldered. He immediately set out from Reigate, twenty-one miles from London, and walked a considerable part of the journey. A sound introduced by Mr. TYRBELL evidenced the piece of catheter lodged at the fundus of the bladder transversely, its extremities being held with some firmness by that viscus. He dislodged it by passing the end of the sound beyond it, and drew it forwards to behind the prostate gland, where its position was still transverse. The bladder seemed to contain several ounces of urine. sound was withdrawn, and one of Weiss's instruments for extracting small calculi, which was nearly straight and had a strong spring, was introduced. One extremity of the foreign body was now free, and after several misuccessful attemuts. was seized and cautiously brought into the urethra. With the finger in the rectum to compress the arethra between the foreign body and the bladder, so as to prevent any retrograde movement of the former, the piece of catheter was then drawn out. It measured three inches in length. The examination and operation together occupied about twenty minutes.

Jan. 14. Feels quite well, and has passed his water much more freely than for some years past.

The museum of the hospital affords several portions of catheters &c. removed from the bladder, but all by the lateral operation, Mr. TYRRELL says he believes "that this is the first instance in which an attempt has been made to extract by the urethra, and he trusts the publication of it will prevent the more severe and hazardons operation. cases of a similar nature, for the How forcibly these latter observe be made to apply to cases of bladder, and extraction by that operation

BTIMULANTS.

puel Wiseman, ætat. 49, admitted under Mn Trarell, Sept. 22, 1835. While ra-the intoxicated he had slipped down and broken both bones of the left leg, at about their niddle, where they had been already fractured five times. Much contusion attended the accident, and there was considerable spasm of the surrounding muscles. The limb was placed on a pillow, spirit-wash was applied, and next day the leg was put in splints and placed in a swing-box. R. Mist. Senn. Comp. p. r. n.

Oct. 2. He complained of headache, which continued the next day. On the 4th, his bowels were freely relieved by medicine given the night previous; but he still complained of headache, and seemed rather heavy, and the head was hot. B. Pulv. Jalap. c. Hydr. 5j, bac nocte. Lot. frigid. capiti.

5. He complains of pain in the head, and has partial paralysis of motion in the left arm; the sensation is perfect; entire paralysis of motion of the left side of the of blood which is essential to its functions, face, but the tongue is drawn towards the affected side; pulse 72, and bearing pressore. C. C. ad Exvj occipiti. Ahrass, capiil. applie. Lot. frigid. Rept. Pule. Jal. c. Hydr. Mat.

8. Has been frequently delirious; the paralysis continues; pulse irregular, and very compressible; bowels open. He was ordered a pint of porter, and four ounces of gin daily, which latter he began to take next morning.

symptoms of paralysis subsiding.

was removed from splints, and the fracture open, the bone exposed, and the patient found firmly united.

cylindrical bone of any size had escaped, went on without a check, and did well. in consequence of these fractures he has One, perhaps, of the most trifling injuries

ACTURE OF THE TIBLE AND FIBULA, one for which he came under my care. He wire paralysis on the team worn an iron to make up the difference in the length of the two limbs, and it entitled the same of the two limbs. abled him to move himself about, but with some inconvenience. Finding this, I stated that it was possible to set the recentlybroken limb to the same length as the one formerly broken, and at his wish I did so. I made an angular union of the second limb, and reduced it to the same length as the other, and he was enabled afterwards to make progression more easily and rapidly. Wiseman appears to have that condition of bone which renders it extremely brittle. In such cases (unless at an old period of life) there is almost an equal facility of union. In the man who had had twenty-one fractures, the accidents were repaired with great rapidity, the union of fracture of the femur being perfectly firm at the expiration of three or four weeks.

In examining particularly into Wiseman's case, it may appear remarkable that the man should suffer from headache, and suddealy have the paralysis displayed, without any active mischief in the head. But there has been a portion of the upper part of the epinal chord deprived of the due quantity and it thus influenced merely those portions

of the body which I have stated.

I have had several somewhat analogous cases under my care. The first instance in which I had a distinct perception of such a case in a surgical patient, was in a coalporter, who became intoxicated, tumbled from a waggon, and had both wheels pass over his arm, when so much were the parts disorganized, that it would have been difficult to recognise them as belonging to the human body. Amputation was resorted to. 10. Slept well; no delirium; pulse firmer; For two or three days the man went on extremely well, but on the third or fourth 13. The paralytic symptoms have entirely day the man was suffering from erysipelas. subsided, and on the 4th of Nov. the limb I found the parts, previously united, again delicious. I then learned that he had been addicted to taking a large quantity of sti-Remarks .- " This case," said Mr. Tva- muli. The pulse was irregular, not inter-RELL," is one of extreme interest, - first, as mittent, but easily compressible; sometimes regards the injury of the same limb several, the arteries appearing to dilate, and sometimes before. It is unusual to find, at the times to contract more than natural. I imme-middle period of life, many fractures occur-diately sent for a pot of porter and a gill of ring in the same individual. I have, how- gin, and gave it into his hand, when he took ever, had under my care a patient several nearly the whole at a draught, went to sleep. times who is a remarkable instance of fra- and awoke after many hours perfectly sane. gilitas assium. He had been the subject. Theorysipelas subsided, healthy granulations when I last saw him, three or four years, formed on the stump, and by the continuago, of twenty-two fractures. Scarcely a ance of a moderate quantity of stimuli, he

An height from seven to eight inches, inflicted by an operation, is that for cataract, time I had him under my care, was However, sometimes patients, at an adthe three of fracture of one thigh-bone, vanced period of life, lose an eye from the the leen fractured previously, want of power to carry them through the care the liferent surgery, that care. A short time since I operated on a inches than the feeble, man between sixty and seventy years

of age, and antracted a cutarect. The days by stimulating. If such fatients were after, the apothecary came to say that the on good dist, and had warm clothing man was complaining of pain. The apother pure atmosphere, I believe very many creaty had employed leecher and blisters to loss would be lost than there are at pres anbdue inflammatory action, but seeing that under circumstances such as 1 have man the patient's countenance was pailed, his hand cold, and the pulse irregular, I decided on giving stimulants, in spite of local pain, redness, and swelling. I ordered him a dinner of good broth, meat, and beer, and or five patients suffering from erysipelas at of the tumour. once. One of the patients has been taking five grains of quinine every three or four hours, and a pint of porter and a bottle of wine a day, and he has recovered; and the other, a bed or two off, has done well under loss of blood and powerful purgatives.

Applying these views also to medical cases. I formerly had many opportunities of conducting post-morten examinations in the hospital and out of it, and of examining cases where the patients had died of fever. and (in children), of measles, scarlatina, and so forth. In many of these cases we found that the patients had suffered from a serous effusion. Very often rallying from the primary disease, children are seized with local is, in most of these instances, that the viscus has really suffered from a deprivation of blood, and death is consequent on serous effusions. Thus you will find the cellular tissue of the lungs gorged with sertan; the cavity of the pleura half full of fluid; and, where the symptoms affect the brain, you find its effusion in the ventricles at its base. Thinking over these cases, and conceiving them to be somewhat analogous, I was led to make the above observations. Where there in strength there is no objection to moderate counter-irritation; but where there is irregularity of circulation, the abstraction of blood is always mischievous. The great reason why such depletion is resorted to of pus. over and over again is, the slight temporary relief which it affords. In the case before us the man was cupped and leeched, and he appeared to be better for a short time, but was absorbed, and the accepted he afterwards became more restless and distinatural size shorter. turbed, and then he was relieved altogether June 16, whe

Case 1.-Richard Drake, wtat. 32, adalso a small quantity of spirits. On the mitted under Mr. Gaken. April 3, 1835. Of following day but one, when I paid the usual unhealthy aspect, rather stout, fair, and invisit with the pupils, we went up to see temperate. Twelve months since he struck the man, and, rather to my surprise, the his scrotum against a gate, and it became section was united, and the eye appeared as tender and rather swollen; these subsided, if no untoward symptom had followed the and in three weeks he noticed a swelling at operation. The stimuli saved the eye. We the lower part of the scrotum, unaccomhave further illustrations of this point in panied with pain. It first increased, and erysipelus. In one instance a patient re- then remained stationary for six months, covers rapidly under the abstraction of after which it again increased. The seroblood, and in another it would be injurious, turn is now about the size of a very large Abraham's Ward, being low and close, was pear; fluctuation is very distinct, but there formerly especially the seat of such cases in is only slight transparency. The testicle is this hospital. In that ward I have had four situated about the middle of the hinder part

> May 20. The operation was performed as follows: - A trocar and canula having been introduced, about eight ounces of fluid were drawn off. The canula still remaining in, a needle six inches in length and as thick as a probe, with a trocar point at one end, and an eye at the other, was introduced, armed with twelve threads of ordinary seton silk, into the canula, and having been carried upwards perforated the tonica vaginalis and integuments, near the upper and fore part of the swelling, and was drawn out by that aperture. The canula was then removed, and the ends of the thread were tied loosely together over a space of about two inches.

21. Eight a.m. Slept tolerably well; some important viscus has, according to the slight headache; tongue white and moist; doctrine generally taus ht, apparently become | inil. The scrotum is about half as large as congested or inflamed. The fact I believe the operation, and has a slight blush upon its surface, but there is tenderness only in the situation of the testicle. No pain in the loins, as in some instances directly after the operation.

One p.m. Headache; skin het; tongue white and dry, with thirst; pulse 90 and hard. The surface of the scrotum is red. and its size nearly equals that of the hydrocele; it is tender when touched, and he complains of a dragging pain along the spermatic cord. He has also considerable pain in the loins and down the insides of the thighs. The threads were withdrawn after twenty hours, and were followed by a drop

Three p.m. Pulse 86; all the sy of excitement are diminishing. tion gradually subsided. The

formal as in the preceding case. The second succeeded the first." Another was successwas withdrawn after twenty-four hours, the ful, excepting that there was a little suppressual symptoms of inflammatory action have ration in the cellular membrane. In an-

ing appeared.

torily, and the cavity of the tunica vagi-nalis having become obliterated, the scro-tum has resumed its natural size. He was finid. In another the success was not comtimeefore presented cared.

since, and four days ago the swelling be-came painful and inflamed; and within this time he applied a handred lecches, but "The object of the radical cure is that of without material benefit. When admitted causing such a change in the tunica vaginais the swelling was about the size of two fists; as will prevent the reaccumulation or re-and, instead of being pyriform, as usual, it production of the fluid. It is generally was tender on pressure, and quite transparent.

were withdrawn, and the seton was intro- person in whom the radical cure was effectwere withdrawn, and the seton was intro-duced as in the other cases. He passed a re-tless night, and next day the scrotum was reproduced, with the cavity as perfect as it regions to about a third of its former size: might be in the healthiest person. I can swellen to about a third of its former size; tingme of in the about a slight inflammais red and painful, and he has some pain in his loins, accompanied with slight fever. The seton was withdrawn after twenty four the exhalent arteries, at any rate in sufficient number to necessity any red integration of the number to necessity any red integration of the number to necessity any red in the number to necessity and number to necessity and number to necessity and number to necessity and hours.

Oct. 3. Swelling and pain somewhat diminished, but the reduces still continues.

6. The sweiling continues subsiding, but the scrutum is still painful on pressure. In other respects he is much improved. On the 10th he was discharged for disorderly conduct.

illustrate a plan of treatment, of which not be regulated; unless, indeed, in the cases Mr. Green says, "that aithough not alto- above cited, a method is offered which will gether novel, it may, perhaps, be deemed, aid us in adjusting the requisite degree of an improved method of effecting the radical inflammatory action. Surgeons, however, cure of a hydrocele." Mr. Green's clinical conceiving that the object was the obliteraobservations on the patients extended to the tion of the sac, have adopted various plans of particulars of five other cases. Of the a very severe kind, often unsuccessful, and above cases, he says, "the first completely sometimes fatal, viz. the method by incision, answered my expectations. The second which consisted in laying open the cavity of

Cuse 2.—William Penulus, stat. 31, addition was withdrawn at ten. Probably the refman, of intemperate liabils. Seven were man, of intemperate liabils. Seven were since he strained himself, and on the following morning observed his serotum was performed again, and it is worth new life in at the lower part to twice its small time in this case, that the same individual When now admitted, the swelling ex- evinced much less disposition to inflamhit ed the usual appearances of hydrocele, mation in the second operation than in the ly 11. The operation by seton was per-! first, although the second operation quickly other, suppuration took place in the cavity Aug. 9. The cure has gone on satisfac- of the tunica vaginalis, which rendered it plete, but in that case it appears that two Unit 3.—Thomas Spencer, actat. 25, omnibus driver, admitted under Mr. Green, Sept. 25, 1834, short and stout, but soft and flabby, operation was required. On the subject of and his appearance indicating intemperate the radical cure of hydrocele, some remarks, habits. The disease began four months amongst others, to the following effect, were

"The object of the radical cure is that of retained more the shape of the testicle. 1: stated, that the object is to obliterate the search of the testicle. 1: carrily of the tunica vaginalis, by causing adhesion of its sides, but a preparation in Sept. 30. About twelve ounces of fluid this hospital exhibits a tunic, taken from a number to prevent any redundancy of the secretion. I strongly suspect, that in many instances of the radical cure of hydrocele, no more has been done than is to be seen in this preparation; and if we could always hit the quantity of inflammation which should produce this, and no more, it would be a better treatment than causing the obliteration of the cavity. But, unfortunately, under all the plans of treatment hitherto Remarks. - These cases are intended to adopted, the quantity of inflammation canand third were also completely successe: the tunic from top to bottom; that by ex-I we have only to draw attention to cirion, in which the whole reflected portion On the other five cases he of the tunica vaginalis was cut away; the he first case was a partial method by constic; the plan of seton as used was withdrawn too by Mr.Pott, who carried a seton through the of the pain experi-tunic, and, then allowing it to come away by ulceration, thus laid open the tunic.

There were all adopted to cause suppuration it is possible that the inflammatory act and excite a granulating process by which excited by extraneous bodies may tend to t

"The treatment most generally adopted inflammation. As, however, this result at the present day, is that by injection, only observed in one case, and no such and I suppose that most surgeons would position was manifested in a number of ca he ready to bear testimony to thousands of which the success was perfect, we of hydroceles cured in that way, without perhaps warranted in drawing a conclu the least ill consequence; but so uncer-generally in favour of the effects of the stain is the degree of inflammatory action: Of course inture cases (and I shall could that will be excited, that under appa- the plan; will decide the point. I should rently the same circumstances, the inflam state that the requisite inflammation is atmation will be in some cases excessive, and tended with the ordinary symptoms of pain. in others insufficient. There are likewise heat, swelling, some reduces, and some conno circumstances by which a judgment can stitutional affection. There should be, I be formed, at the time of the injection, think, some affection of the pulse, some mas to what exactly the subsequent effect will dication of febrile action, before the acton is be respecting the quantity of inflamma-tion. One person will complain of extreme moved; I believe you then will have excited pain from the injection, and, perhaps, ren- inflammation enough to cure the disease. dered cautious by that symptom, you allow So that it is not whether the seton has rethe fluid to escape; but notwithstanding this mained in ten, twelve, or twenty hours, but pain, he may not have sufficient inflamma-whether the requisite inflammation is pro-tion to cure the disease. Another patient duced. Perhaps twenty hours is about the will scarcely complain of any pain, and you average time for the seton to remain. are perhaps induced to allow the fluid to "This plan of exciting inflammation by a remain within the tunic a longer time than seton will answer your purpose in various ordinary. But instead of the inflammation other cases, as in gaughions, when you canbeing proportionate to the pain, there may not get rid of by bursting them under the prove excessive inflammation, which subset skin, or by puncturing them with a surgical tion to the plan of injection, which rather in the same way. The surfaces of these applies, however, to a possible want of skill cysts being thus brought into contact, you may be thrown into the cellular membrane edly, and in hydrocele of the thyroid gland, of the scrotum instead of the tunica vaginalis. I was consulted respecting a large swell-or escape into the cellular membrane instead ing which was evidently situated in the of through the canula. The accident may thyroid gland, in a lady. Many plans had easily take place; I recollect a case in which been adopted but without success; I had no a patient died from it.

in the tunic, and that the seton might then cured, and she remains well to this day." be withdrawn, and no further effect be produced than is necessary either to change the surface of the membrane or obliterate the tunic. Generalizing the facts which have occurred in eight cases thus treated, I venture to say that the plan of treatment is well adapted to answer the end for which it was intended. In one case there was excessive inflammation, and a suppurative process in the tunica vaginalis; and the possibility or probability of this occurrence is perhaps the most serious objection to the operation. It might, indeed, raise a doubt on the principle on scute bronchitis. He of itself of the operation. You introduce an bronchitis was not named by extraneous body into the tunic, and allow it to the present century to remain till inflammation is produced, and had it not been

the cavity should be filled up and obliterated. supporative instead of the edesire form on.

quently is both inconvenient and dangerous needle, and which it would be dangerous to to the patient But there is another object remove. Enlarged bursar may be treated in the operator. The stimulating liquor obtain adhesion. I have done it repeatinducement therefore to go through the "After weighing all these circumstances, same routine of remedies. It appeared to it struck me that if a seton were carried me quite clear that there was a cyst conthrough the tunica vaginalis, there would be taining fluid. I accordingly introduced a sufficient source of irritation, and at the canula, by means of a trocar, for the dissame time the opportunity of regulating its charge of the fluid. I then carried a seton degree, that is, that the seton might be al- through the cyst, and allowed it to remain lowed to remain till there were symptoms of till what I considered a requisite degree of such a degree of inflammation as is requi- inflammation had been produced. The resite for the change necessary to be produced sult shortly was that she became completely

LONDON MEDICAL SOCIETY.

Monday, Nov. 16, 1835.

Mr. CLIFTON, V. P., in the Chair.

TREATMENT OF BRONCHITIS.

MR. ROBARTS, the secretary, re



fants he considered it not unfrequently implicated with pneumonia, and sometimes minating in croup; or, on the other hand, up terminating in bronchitis; the last of ich, he thinks, is the most common. The ctions of respiration were more promine in bronchitis than in pneumonia. As to the severity of the disease, he was convinced that practitioners would generally do well to leave nature to accomplish the cure her own way, for the more they attempted to do, the greater number of patients they lost. In the young, if left to nature, not more than one in fifty cases would be lost. When he first entered the profession, he adopted the depleting treatment of the day, and the result was, that he lost nearly every patient. Fortunately for his patients, one child fell under his observation which got mode of treatment would be less disputed, well without any treatment; and a second case recovered through the administration of wine. With these examples before him, Robarts, that if the antiphlogistic treatment he was induced to adopt more simple reme- was pushed far in children, failure would dies; and since then, his mode of treating generally result, the lungs in children not bronchitis in young children had been albaying the power to withstand powerful together as successful as it was before remedies. Calomel also had failed to be mesuccessful. His remedies were of the with him so decided a specific as many mild kind, but the greatest benefit he practitioners professed to find it. When had derived was from the vin. sem. colch., the condition of the lungs arose from a concombined with, or followed by, purratives, gested state of the circulation, accompanied. The effect of colchicum in hum hat after with a quickness of pulse (query slowness?) ing children was very remarkable. If given and a difficulty of breathing, stimuli would followed in a few days, and the cough, fre-quently so troublesome, was arrested by it that advised by Mr. Robarts, and would also mooner than by any other remedy. In old give opium and calomel, and he would followed by purgatives; and as in them it the chest.

was a severe discase, he would recommend a combination of the two. The advantage jopinions on the treatment, not a whit less of purgatives was made known to him contradictory as regarded the principles and to blisters, and was surprised that practi- disposed to give to it. tioners had so great a predilection for them in this disease; and opium he looked upon, injurious. He had also found expectorants journed. prejudicial, for the expectoration was profuse in the first few days of the attack, but as the inflammation progressed, the secretion ceased, and it was vain to attempt to reproduce it by expectorants.

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Dr. Chowne begged to remark, with! reference to the interesting paper which p read, that Mr. Robarts must have Culien, when he implied that

cthoscope, the disease would have remain- | done, Cullen himself saying, that writers l undistinguished even up to this time. In called the disease by different names. Lacunec preferred the term of catarrh to that of bronchitis; and to prevent it from being missoplied to designate a simple cold, he divided it into active and passive. Dr. Dun-can also had described the disease, and admitted that consumption might supervene thereon.

Mr. Jones believed that the first author who had used the term "bronchitis" was Franks.

A VISITOR differed in toto from Mr. Robarts, for, in his practice, he had found the utmost service from calomel, ipecacuanha, and tartarized antimony, and leeches, in bronchitis; few cases he thought admitted of the warm-bath, except at the commence-

ment of an attack.

Mr. HEADLAND believed that the proper if we understood what was meant by the term "inflammation." He agreed with Mr. when the child was apparently dying, relief be found beneficial. In old people, he would people he employed bleeding pretty freely, strongly recommend mustard poultices to

through the mistake of an errand-hov, who the remedies, and we therefore refrain from carried some powerful aperient medicine, recording anything farther on the subject which was prepared for another patient, to on this occasion, exceeding so far as to say one who was suffering severely from bron-that bronchitis was a greenly considered, by chitis, and on whom it operated copiously, all the speakers after Mr. Robarts, as deand effected a complete cure. He objected manding more care than nature herself was

Mr. ROBARTS briefly replied, urging reasons for still retaining the opinions expressed if not as a fatal remedy, certainly as always in his paper.-The meeting was then ad-

> Monday, November 23, 1835. Dr. WHITING, PRESIDENT.

RINGWORM. - DRATH FROM MORISON'S PILLS .- ARTIFICIAL PRATURES.

The time was very much occupied this evening in discussing the subject of ringworm, which was incidentally brought decidedly spuke of ca forward by Dr. LEONARD STEWART, who has by accident found three or four obsti-Robarts had nate cases of this disease yield to the appli-

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drachm of the tincture to a pint of water) after various other remedies had been uselessly tried for some months. No constitu-tional treatment was required. Dr. Stewart asks, Is it an effectual remedy, or accidental? Very little notice was taken of the remedy by the members, who admitted that the opium had not over-acted its part, for some cases got well without any treatment, others certainly from merely being sent into the country: and others, again, from being treated by leeches, and with evaporating lotions.

Mr. CLIPTON strongly recommended a wash composed of 5ss of the strong sulphuric acid, with 3i of water, which he (Mr. C.) believed, after an experience of twentythree years, possessed advantages over all other remedies. The nitrate of silver would insulate the disease, and destroy its contagiousness. He regarded every species of the disease (except porrigo favosa) as purely local.

convinced him that ringworm arose from a deprayed condition of the fluids of the body, ral magnetism for the cure of various nerv-which being corrected, local treatment might then be used with advantage. He named tion during the greater part of the evening, and was amounted. Mr. HEADLAND said, that experience had

J.) was sent for he was from home, and on from an opinion that the curse effected by returning in less than three hours after. It were not lasting, the reason of which was returning in less than three hours after, it were not tastnin, the reason of which was wards, he found a second message stating that she was dead. On Friday last, the lady matically, and only by way of experiment, purchased two boxes of "Morison's mild. To accomplish cares, powerful instruments pills," of which pills she took eight, ten, and fifteen a day, without effect. A stronger quality were then had recourse to, and the in them frequently saided. Of the instructional transfer of the complexed three seconds of the instruction of the first produced three means and the ments complexed three means are made as the second of the instruction. result was fatal. The symptoms produced ments employed three were named; first, were, violent hypercatharsis, inflammation the horse-shoe magnet; second, the magnetic of the howels, coma, fever, and death, staff; third, the magnetic plates. The curaof the bowels, coma, fever, and death.

of the Society, of a tolerable appearance, tion to its power of attraction, and that is who wears a "false nose," a "false palate," and "false spectacles," who before the poor fellows ingenuity had suggested these constitutions of five simple horse-shoe magnetic cures. The five-feld horse-shoe magnetic cures. trivances, was said to have been a most deplorable-looking object. The nose was carved from box-wood, and fixed with firm-

cation of a weak solution of opium" (one adaptation of the artificial one; in the im mense cavity occasioned by the entir destruction of the nose, he places a picc. of sponge, which absorbs the moisture, ar . considerably assists articulation, which (when his " artificials" are arranged, whi h is almost momentarily accomplished); is distinct and loud, but without them utterance appeared nearly inaudible. e lis made-up appearance seldom is detected. .

After the adjournment, most of the gentlemen present added their names to the address of condolence to be presented to Mr. Kingdon.

WESTMINSTER MEDICAL SOCIETY.

Saturday, Nov. 14, 1835.

Mr. RICHARD QUAIN in the Chair.

MINERAL MAGNETISM.

Dr. Schmidt (of Berlin) was announced the juice of lemons as a remedy, in doses of and was adjourned finally to another meethalf an ounce, or more, taken internally, ing. In introducing his subject the author half an ounce, or more, taken internally. The effects of the remedy on the altered premised that mineral magnetism was totally fluids, in conjunction with the local disease, distinct from animal magnetism, and that were commented on. Some remarks were offered on sea-scurvy, but we have not space for further details. Dr. Johnson informed the Society that a all authors who had advanced opinions on lady whom he had visited, had that day died the subject. In accounting for the magnet from taking Morison's pills. When he (Dr.) having fallen into disuse, he said it arose Mr. Curtis presented a man to the notice tive power of the first is in direct propercarved from box-woos, and fixed with firmness into the frame of the spectacles, the use
of which latter would not otherwise be required; a thin fold of cotton forms the
artificial plate, but a small portion of the
natural palate remains, and much assists the
net might not be exerting its influence
needle at the spread of the reading to the red to the remains. power of attraction that 5 x b=25, instead of

The power of the

[•] The fluct. opii, sometimes used pure, at other times diluted, is an old and occasionally an efficacious remedy in some conditions of porrigo.—Rep.

0 to 120 lbs. Larger magnets are only no-funtil he proved to the contrary, mineral red to transmit the magnetic fluid to inmary in extreme cases, or where it is defor organs, as in cases of deafness, for en magnets of from 200 to 500 lbs. power attraction must be employed; of which er he (Dr. S.) has constructed some. magnetic staffs are only applicable in cases of toothache. The magnetic plates are used where the horse-shoe magnet cannot be applied; as when magnets, are required to be fitted to any part of the body. For the treatment of diseases with either kind, either powerful instruments were used from time to time, or the contimual influence of magnetism was employed, by the patient wearing small magnets for some time on the part affected. The former in a certain order, with one or two poles, and with one or two instruments, always followhead downwards. For the toothache, he for the cure of diseases, could now be rea-(Dr. S.) usually fixes the north pole first on dily obviated. the painful tooth, and it not relieved, then applies the south. If obstinate, he touches the gams with either of the poles, or passes them across the cheek, where the pain is gute. The magnet should be first The general magnetic treatment the topical, especially if

magnetism, Dr. Schmidt said, was always declared to have no influence on healthy parts. Secondly, On the sick, magnetism is either soothing or exciting. Dr. Becker says, "Very often the patient considers that he has no sensation at all from it, but generally in the course of time, he experiences an effect from it." The sensations are, with some slight modifications, the same in all cases, viz., cold, warruth, increased sensibility, and pulsation, and numbness and insensibility in the part affected. These sensations, except the last, increase gradually, and then become weaker, until at last they disappear entirely. Dr. Schmidt concluded his paper, by saying that the effects of magnetism appear very often instantaneously. is either topical or general, and employed That they are not local, and that the diseases in which magnetism exerts a curative power, are those in which the sensibility or mobiing the course of the nerves in passing them. lity of the nerves is heightened, or where According to the theory hitherto followed, the nerves are over-excited, as in tieit is supposed that the "friendly" poles as douloureux, headache, &c.; in spasms of the they are called, ought to be placed opposite stomach, pulpitation of the heart, hoop-to each other, in order to lead a magnetic ing-cough, chilepsy, and convulsions; or stream through any part of the body. The where in the nervous system there is a want revorse he (Dr. S.) would prove to be the of action. Also, in some diseases not fact. (This was demonstrated with a sheet purely nervous; as in rheumatism, gont, of cartridge-paper placed between the mag- suppressed menstruation. During the catanets and some from filings, and with a bar of menia, or during pregnancy, it must not be soft iron placed between the magnets.) For used. Lastly, The doctor said that it was the application of magnetism, the patient his conviction, that magnetism deserves a may be placed in any position. If the eyes preference over all other remedies, in the are to be operated on the magnet is fixed for diseases above enumerated. At the end of some minutes on the eye itself, and then his Essay, Dr. SCHMIDT read an extract from passed several times across the upper and Hufeland's Journal, for September last, lower edges of the cyclids, commencing at speaking in commendatory terms of the the corner of the eye; and then several science of magnetism. Dr. Schmidt then times from the forehead downwards, in such showed that the power of a magnet might a manner that both eyes are touched at the be given to iron, or destroyed in a few sesame time. Sometimes the desired effect is conds, a fact which was first made known not produced until the poles have been by Dr. S. The process of destruction conchanged several times. For deafness the sisted in passing down the poles of one patient is scated between two magnets, so magnet, against the like poles of another that the poles exactly fit in the plates of two magnet, commencing at the curve of the insmall instruments, which are introduced strument. To reproduce the power, the into the organ. These instruments are made poles were reverse l in the passing motion, with an oval disc, one inch long, and half an commencing also at the curve. Dr. Schmidt inch bread, of soft iran, in the centre of attached considerable importance to this which is fixed a black pin, one inch long, experiment for he says that when the power and one line in thickness. The operation of the magnets becomes deteriorated, it is may last from five to fifteen minutes. The easily restored; and failure, which must fremagnet is then placed over both sides of the quently before have attended its application

Saturday, November 21st, 1835

Dr. Addison, President.

MINERAL MAGNETISM.

The subject of mineral magnetism was tast division of his sub- again introduced this evening, with much the effects of mag- amusement, though not with much profit, the unhealthy. and the discussion was champly my, that marion from some of the and the discussion was closed with an intiturn which it had taken was not consonant simple results of magnetism by induction with the objects of a medical society. Dr. Mr. Bird, however, was himself sharply hit c SCHEIDT, of whose talents it was impossible the knuckles by Mr. Everitt, who sudden to avoid forming a favourable estimate, and interfered, " in order to save the time of the who addressed his audience in the English Society, to remind the young gentleman the language with a corrections which many those who were better acquainted with speakers of our own nation might be glad, subject did not admit the truth of the p to reach,-recommenced the subject by re- tions on which Mr. Bird was basing the peating some experiments, concluding, how- whole of his objections." Mr. Bird, in act, ever, rather abruptly, and leading the dis- was proceeding to prove that the relative north poles of two magnets ta space intersouth poles, and that therefore in employing horse-shoe magnets on a limb, it was erroneous to oppose, on each side of the limb, a north pole to a south, and a south pole to a north, as the remedial process had always hitherto been performed, and always, consequently, with less success than by his (Dr. S.'s) mode. Testing this statement by experiment, the result seemed to bear witness to the correctness of the allegation.

The experiments called on his legs Mr. Bian, who gave some designation to them which Dr. Schmidt did not consider very courteous. Considerable disputation resulted, for Mr. Bird denied the correctness of almost every proposition of Dr. Schmidt, and then, between various parties, began a series of not very obvious, or very conclusive, or very-well-explained experiments with magnets and iron filings, accompanied by diagrams on a black board, all, too, so purely theoretical, that a moral, only,which there is no need to explain -could be drawn from them. Yet the exhibition was tolerably entertaining, and might, had the philosophers been better agreed as to first principles, been useful to a majority of the audience, of whom Dr. Johnson afforded a good specimen, when, with rather unhappy look, he remonstrated, at the close of two hours, on the time of medical men being occupied so long on the mysteries of "north poles" and "south poles," magnotism by direct procedure, and magnetism by induction. "Let us know," he prayed, what diseases magnetism will cure. We care not what influence it exerts over mariners' compasses, or bunches of keys, or steel

Mr. Bird declared, as we have said, that Dr. Schmidt's proceedings were all " flimsy, and pronounced the chief results to be the

cussion into a direction which lost for mag- quantity of the magnetic fluid at the posinetism its chief claim on the attention of tive end of a bar of soft iron, would be shown the Society. One experiment was designed by the power of attraction exerted by it to prove the discovery of Dr. Schmidt, that over particles of iron filings represented more magnetic power exists between the thus, $\times 3-2=1$; or, that in the horse-shoe magnet, at its north or positive extremity, vening between them) than between the the magnetic influence would be represented by 3; at its angle or intermediate space by 1; and at the south, or negative extremity, by 0. This problematic experiment Mr. Everitt sought to show was in direct opposition to the "indisputable fact," that if a bar of iron were divided into any number of parts, no piece or division of it would contain more magnetic fluid than any other. provided the size of each division or compartment was exactly of the same size as each of the others, and if the division be carried down ever so low, the fact would, he contended, still be obvious.

Mr. Bian met this charge by declaring, as he did on each other occasion on which an experiment or argument was used against him, that he regarded it as a beautiful example of the theory he himself wished to advance; but having stated the theory and the objection, we must be content, from want of space, without giving further details on this point. Mr. Bird apologized for presenting himself to notice, and stated his object simply to be to defend the reputation of several great men whose views were opposed by the theory of Dr. Schmidt.

A degree of interest was here given to the disputation, by the reply of Dr. Ritchie to a call from several members for his opinion on the points advanced, but we are compelled simply to say that that gentleman with much clearness developed the bestaccredited views on some points in magnetism, commenting briefly on the theories expressed by previous speakers, which, however ingenious, he did not consider correct in many respects. Circumstances, however, which we cannot stay to explain, prevented the impeachment of Dr. Schmidt's views from being sustained. Indeed, the time and apparatus did not admit of experiments in any respect conclusive upon any important point under debate. At the next meeting the medical division alone of magneti is to be emvassed, when the most probably be concluded. here observe that Dr. His was not of opinion could be advanta

diseases, though

[.] Dr. Schmidt also showed a method of obtaining • Dr. Schmidt also showed a method of obtaining the magnetic spark by means of a very simple appa-kates, constructed as follows. —A price of soft irro, sound which a copper wire is twisted, the extremi-ties being amaleamated with quickaliver, is placed over the poles of a magnet. On one is fixed a small copper plate, and the connection being then forcibly. broken, the magnetic spark is vividly produced.

ation of the galvanic battery. In justice to jof the watery extract of bark, which Dr. r. Schmidt, we may state that he appears Stomon (when alluding to the properties be perfectly candid and open in all his planations relative to the "mysteries" of neral magnetism as a remedial agent in ease.

MEDICO-BOTANICAL SOCIETY.

Tuesday, Nov. 21, 1835.

EARL STANHOVE, President, in the Choir.

Some beautiful specimens of the acacia. catechu, manchean gambeer; specimens of the greater and lesser cardamonis, and of the grains of paradise, this evening were exhibited as presents from Professor Martius, with a view of obtaining, through the medium of the Society, correct information as to their proper classification and derivation. Mr. Hiff and Mr. Battley also presented specimens, with a view to ascertain whence they were procured.

Dr. Sigmonn drew attention to a new sort of catechu, lately introduced into this country, which he said was superior to any hitherto imported, from its presenting a much larger quantity of tannin than the other species of catechu. The new species had been introduced by the cotton manufacturers of Manchester, who have found it yield a valuable dye. Dr. Sigmond then made some remarks on the different varieties of cardamoins. The medicine is brought from Singapoor, but as that is a free port, it is difficult to ascertain its original locality. The other variety (samples of which, parncularly fine, were on the table, is brought rom Java and Ceylon. Professor Martius seems to think that the grains of paradise tre in fraternity with the larger cardamons; out Dr. Sigmond said, that whoever tastes the paradise grains, will, from its peculiar flavour, readily perceive the difference.

Mr. Lury said it was impossible to arrive at a proper solution of Professor Martius's questions, until the different importers had seen consulted.

Dr. RYAN also made some observations on the catechu and cardamoms.

A paper was then next read on the different backs of Guiana, forwarded to Dr. HANCOCK, who transmitted the paper to the society. A splendid branch from the castoril tree (ricinus communis), reared in the Society's gardens, the property of Mr. Gibbs, was presented, covered with seeds, and albough grown in this country, it was as perone of those sent from the East or

of different drugs) said ought to supersede the sulphate of quinine, for it contained "nature's own acid," and the gallic acid, combined with the alkaloid, without having to pass through the numerous manipulations of the chemist, which rather obtained educts than products. The Society was then adjourned.

ERRATA.-In reports of Medical Societies last week, at page 313, line 8, for cancer read as exostosis.-Line 33, erase the words between parentheses.-In note, at page 316, line 6, for combined read uncom-

.In Inquiry, Physiological and Pathological. into the Procimate Cause of Cholera. By PROTHEROE SMITH, M.R.C.S., Sen. Surg. to the Farringdon Dispensary. London: Baillicre, 1835, pp. 39.

To know the first tissue in which a disease commences, is not to know the "proximate cause of that disease;" nor does a knowledge of the first step which a disease takes, imply a knowledge of its "origin." To inquire into "the proximate cause of cholers," is, in reality, to carry research up to the identical cause of the first derangement of the earliest tissue affected. Over the cause of cholera we agree with the author that " a cloud of mystery hangs;" but from around the chief features of the disease itself the mist we think is now dispelled, and amongst those who have helped to clear away the vapours, we must rank Mr. Smith. The modes of treatment which are urged to cure the discase are as various as they seem to be, first, because so many medicines produce the same ultimate effects on the animal economy; and, secondly, because the profession do not choose to agree on the therapeutic details which their therapeutic doctrines might teach them. That the view we take of the "cause" of the disease is held by Mr. Smith himself, the following sentence demonstrates :-

" Mental disquietude, or atmospheric influence, often exists as an exciting cause of diseased action, producing effects on the sensorium similar to those caused by external bodily injuries, and often inducing more suddenly the results above enumerated, as . The capsules were exceed- is instanced by imbecility or death occasionservered with rough spines, cd by fright or grief, and by epidemic disorders arising from miasurata and other like math, pure and im sources. Thus, even when the exciting cause disease not cognisable to the senses, it often produces sequels more vismit than the results of extensive corporcal Injury."-p. 10.

He nuts saids the cause of the discuse in order to discuse the conditions of body wader which its phonomena occur.

" I proceed to the inquiry of those conditions under which occur the various plicnomens constituting the disease under consideration. Of the ultimate cause, or first principle, from which cholera results, I shall not attempt to offer any other solution than is their least valuable commodity, and shall in the hears to propel is through the usual proceed to treat of the proximate or hume in the hears to propel is through the usual channels, supposing they were of sufficient diate cause from which the evidences or eather to admit this these need duid. The proceed. -p. 11.

prefixed to the word "cause," in medical the renal functions, and consequent contracdiscussions, in a manner which questions in the exact sciences will not allow. But the exact sciences will not allow. But the exact sciences will not allow. error is great, and we constantly find mis- becomes violently and involuntarily active morbid change produced in the body, even case. The continuance of these morbid mate, exciting, ultimate, or immediate.

conclusive manner. proceeds to say,-

made at the brain to resist the assailant, that we shall withhold extracts from this and an inordinate action is established in part of the pamphlet." Suffice it to say that tion is greatly increased to supply the

maining for the entensive alvice discharge white sometimes, or preliminary fews, in which hold floor letting is the only flooring freedy; by these symptoms precede this complete a zure by so short an interval, that the s cation of means is sometime se proclud some have even doubted their existency. increased exertion continued in the sorium, would be alone sufficient to duce collapser, from the inertia following unusual exertion of any function; but this sequela is accelerated also by a rapid loss from the very fluid on which nervous energy depends. The immense defluxion from the that it depends, and is consequent, on the intestines role the blood of its saline will of the Great Author of Nature. ** ** I and resource routines and role is third. therefore leave the subject to those inge-tenacions, and unsute I to circulation, ne-nious speculators in mysteries whose time lessarily requiring an increase of power and scrous particles, and renders it thick, unte cause from which the evidences of eather to admit this the cented duid. The symptoms of the epidemic cholera directly result is went of pulsation in the extremi-proceed.—p. 11. proceed.—p. 11.

The terms "proximate," "ultimate," circulation, and, consequently, imperfect
"first," "exciting," and "immediate," are decarbonization of the blood, suppression of chief to arise from the misapplication of and irregular, which accounts for the pecuthese adjectives in medical writings. Any liar characteristic of this stage of the disthe very first and minutest of a chain, is the disease itself, or a part of the disease, and acquent on paralysis, from vascular engargenot the cause of the disease, either proxi- ment, or effusion into the cavities or substance of the brain, which, from the heart Having stated our own view of the title, being gorged with blood too dense for distant we proceed to give some account of the guineous effusion, or apoplexy, closing the author's object in the contents. Mr. Smith scene. When the patient recovers from divides the disease into the usual three this state, the third stage results, usually stages, which he discusses in a plain and presenting all the concomitants of typhus, a The " preliminary disease too well known to need description.

evidently indicate a Thus we have successive resulting states. symptoms," he says, " evidently indicate a which have their origin in derangement of disturbance of the prime vie, and the pecu-the prime vie. In support of these views, liar action of the exciting cause is clearly I will cite a few post-mortem examinations, that of morbid impression on the follicular which, I think, will substantiate my opiapparatus of the intestines." Taking the | nions, inasmuch as they all evince great reliberty ourselves of condensing his views, he rebral disturbance of the brain."-p. 13-16.

We have already so many autopsies of "Conscious of the attack, an effort is cholera patients on record in our Journal,

These are the very gentlemen whom crackled on being straightened, whecholers demands. With more time there circumstance was thought by M. would be fewer mysteries. Which, indeed, fraund a peculiar characteristic are now the "systeries" in cholera, if the real censes—proximate, exciting, or what cases, but think the you will—be not?—Eb.

With one exception: - In the last case recorded the author says, "The angers crackled on being straightened, which show the frequency

hose "post-morteus" which the anthon the has had excellent apportunities of abote-book, justify the views he has excased. Relative to his own plan of treatent the author mys,-

"The plan most in accordance with my s, has, in general, proved of most avail. Kennedy, in his valuable work on cholers, asserts, that his plan of remedying

this malady has proved more successful than any he has seen practiced, and the evidence of the mass of authors on this subject has

a similar tendency."- page 28.

The plan of Mr. Kennedy is well known The details of Mr. Smith's plan are fully given in his pariginist, which contains the result of much observation in a very small compass. Of his experience he says .- .

" I availed myself of an opportunity for extensively observing the morbid appearances of this disease in the autumn of 1632. Through the introduction of Mr. Kiernan, I became acquainted with M Halma Grand, who was deputed by the faculty of Paris to investigate the nature of cholera in London, previous to its appearance in France. I assisted this gentleman in his post-morten, examinations, and collegted accounts of a large number of cases."

THE LANCET.

Loudon, Saturday, November 28, 1835.

Within a very few years the fact of the instrumin of England not having become an I niversity, under the sametion of an Act of Parliament, or the authority of same royal decree, up to close of the year 1835, will be considered one of the most extraordinary establishing an University in the metropolis, has ever been mosted by persons whose character could give weight to their sug-

his disease. It would be well, perhaps. erve, that in a case I examined, which hat or typh id stage of the disorin conjunction with other maive remollissement of

A. 5. 4. 4

wisions .. When the project was Cost antounced for founding the University which is now proceeding in its successful career in the northern part of London, the projectors were made the objects of contemptations ribaldry, by the members of that wealthy and influential party which had so long directed the destinies of the empire. Entirely destitute fof arguments which could be urged against the philanthropic scheme, the opponents of the measure resorted to every species of slander which malignancy could invent, in order to deter the subscribers from proceeding in the great national work in which they had cogneged. It was pretended, indeed, that the idea of founding an University in London, or, rather, of establishing colleges in London, which should confer on the metropolis itself the title of "an Univer-ity," had originated in a desire to offer an opposition to the national Universities of Oxford and Cambridge. The pretence was the offspring of falschood, bigotry, and folly. The founders of the University were stimulated by no such unworthy motive. On the contrary, there were to be recognised amongst them men of the most distinguished and exalted attainments,-who were indebted for their learning, and the multitudinous picasures which they had derived from the cultivation of their minds, to those splet-lid institutions which it was alleged to be their object to destroy. In the secure possession of a vast amount of real property. sustained and invigorated by a system of electing the roling authorities, so liberal in circumstances that can be related in con-line character that it is restricted only by the nection with the history of the literature of mamber of the Fellows belonging to the this country. It does not even appear that, Universities, what could such establishuntil a very recent period, the question of ments fear from competition? Nothing, But whatever benefit the members of those institutions can hope to create from the more wide diffusion of learning and knowledge, must arise from the stimulus of honourable rivalry amongst congregated masses of the literati of the empire, and, in reality, from the exercise of that just and useful invention alone.

The lounders of the University of Landon, I whiter circumstances of so favourable a formed a labour which was likely to be fol- at their meeting, which is to be held on Wedlowed by advantages of an immediate and needay next, will enter into any discussion not of a posthumous description. They or approve of any measure, which can lea hoped to outlive the successful commence- to an inference with the thinking portion ment of their labours, and were not so vain the community, that the interests of the U passed through a seren years' ordeal, pre- the future historians of the liter paratory, we trust, to running a splendid England, amongst those of the career of national usefulness.

in carrying their plans into execution, per- character, we do not expect the proprietors, or so foolish as to attempt to enter into a versity could be advanced, that its repulacontest with the ancient Universities of tion could be increased, or that the sphere Oxford and Cambridge, immoveably fixed of its usefulness could be enlarged, by obtainas were the latter, on solid masses of tren- ing from the Legislature or the Crown any sure, and renowned as they had become privileges of a strictly exclusive or local throughout the world, as the most cele- nature. The professors are too generally brated establishments of learning in civi-distinguished for their acquirements, and lized Europe. There was no desire to cir- they must be rendered too independent by cumscribe the sphere of advantages attach- their industry, to imagine that the instituing to a collegiate education, which had tion could derive any advantages from aids been created by those venerated seats of of so dubious a character. Nor must it be learning. On the contrary, the promoters forgotten that when the project of founding of the great academic enterprise in London this University was first opened to view, the sought to widen that sphere, to multiply sympathies of the public were woord in its the opportunities of learning, and to afford favour, by a reference to the principle of exto some thousands of the youthful inhabit- clusiveness which had so long shut out disants of England the means of acquiring, senters from collegiate honours in the Union cheap and accessible terms, a first-rate versities of Oxford and Cambridge. Let education in literature and the sciences, not, therefore, the new institution attempt The friends of Oxford and Cambridge, but the end of seven years to give trength therefore, had no legitimate ground of sus- 100 AM AM SE which it was pristance to picion or jealousy on that occasion, and it presumos. The principle of exclusiveness is quite certain that the gentlemen coard cannot exist, certainly it cannot flourish, in nected with the ancient universities, who the new metropolitan institution. Loudon are the most exalted from the extent of their litself, must, become, a regularly-mgamzed learning, and command the greatest share and asknowledged University in the British of respect for those qualities which most Empire, and the great establishment now distinguish at once the philosopher and the styled the University of London will, we are man, became, at an early period, the advo-sconvinced, throughout many succeeding cates of the new scheme, and ardently did ages, take the lead under the name of they desire that the efforts of its supporters in University College," or some other might be crowned with success. Without title, as the most liberal of these headenic having received the slightest assistance from establishments, by means of which the fame the Parliament or the Crown, the claims of of the University of the British capital will the University of London to distinction have the mainly mestained. It will constitute at taken a firm hold on public opinion, and, once the chief pillar and the brightest ornaunder difficulties which it may be considered i ment of the metropolitan universities, and are now surmounted, the institution has the names of its founders will be placed be factors of the human ras

Whatever may be the intentions of some the inters bacerned, it is not in the power of the ing the subject under investigation. It Mileters of the Crown to confer upon gen- may be very agreeable to the feelings of lemen who may be educated in that de- Mr. G. Buny to exhibit his deposition to the sartment of the University, any legal ad-clergyman at Faraham, and other respectantages in connection with the practice able friends in that town, but we shall not of medicine. Acts of Parliament present be satisfied until it is laid before the memusurmountable obstacles to the granting bers of the medical profession. When we of any such concessions. It would not be have obtained possession of these docuudicious, therefore, to press on the atten- ments, we shall devote a few pages to the sion of the executive government, questions discussion of the important subjects which of such a nature, because, although it may the inquiry involves. or desirable on the part of some individuals to restrict the view of such subjects within he walls of one institution, it is quite evilent that if the matter be once taken up. s must be carried out into a far wider range, and then the value of university distinctions nav go far towards being sacrificed by the numerse number which it would be found? accessory to confer. At present, the University, especially in its medical department, stands in a pre-eminently exalted situation, and under such circumstances we should leplore seeing it become the object of an ancertain and hazardous experiment.

enter of Mr. G. Benry, relative to the pro- one year,-from December 1833 to Decemceedings at an inquest held a few weeks her 1834, -- that the monstrons sum of since at Furnham. The contents of the 10,2371, 17s. 1d. was swallowed up in that letter indicate little that is favourable either [institution in "salaries" alone! to the judgment or the temper of the writer. The subject, however, has now assumed a somewhat serious aspect, and in the absence of Mr. Bun's deposition before the Coroner, we shall refusio from saying another word medical students who attended this school on the main question at issue.

est, as well as of the verdict of the the proprietors in convening the meeting jury. We trust that this announcement Wednesday next, we may take this op- will be satisfactory to every person who tunity of informing them that so far as is anxious to obtain the truth, the whole medical department of the University truth, and nothing but the truth, touch-

In giving insertion to the letter of Mr. TARBUTT (page 348), we regret that we cannot find space also for a copy of the petition of that gentleman, presented last session to the House of Commons. Mr. TARRETT will, of course, best consult the independence of his character, and the purity of his motives, by refraining from entering into any contest with his brother governors. It is his duty at once to refer the Committee of Almoners to the office of the charity Commissioners who are now sitting in Great George-street. Westminster. It is time that some inquiry was made into the offairs of Christ's Hosi pital, for it appears, from the official ac-At mace 350 we have given insertion to the counts of the hospital of the expenditure of

KING'S COLLEGE, STRAND.

In consequence of the small number of last year having been diminished less than With regard to that deposition, Mr. Bewy one half in the present session, several of the eminent professors of the establishment gourse, be glad to hear that we shall have been anxiously deliberating what course if a transcript of it, by moving, to pursue us regards the future, when Mr. of Parliament, for a to write to Dr. Hawkins, the celebrated ridence taken at professor of the practice of physic, explaining

to him the importance of his religious to the found that the necessity of appointing a man of still greater eminence to fill
his chair, as one of the principal means of in the setimation of society. I should the reviving the medical department of the do- be much less able to support the east caved institution. Hawking, with a pride cause I now uphold, by exercising which did him honour, rebutted the charge, power which I possess over many of and for answer returned to Mr. M. a copy most sulphened and elevated individual, of his awa letter, messaly changing the name both of church and state,—as infine the first matter of Mayo; where the sil admit I have on many occasions apon that teacher of anatomy, with an judiciously and successfully exercised, for equally-homomrable high moral feeling, sent supporting the dignity and reputation of tion of his professorship, which, as he anti- which we both have the honour to belong! cipated, was not accepted, so that the school . . The time I have spent here in reflec-

into the Strand.

INTERCEPTED LETTER.

that at my advanced period of life every throw the whole existing colleges, and build year gives my constitution a shake, and I up on their foundation one system to regus am sensible that my mind is now much late the medical profession as a great whole. longer in recovering its powers and its numerous earthly blessings, and the most and laws being violated and neglected, the earnest wish of my heart now is, to end my days in contentment, and to die in peace! with all men!

"This delightful abode affords me, I do assure you, every possible means of renovating my physical frame, and of elevating my drooping spirits; and though I confibest efforts to prescrve our venerable instiother of my friends, I am well aware, are surgery. Another dilemms, from will decidedly of opinion, that the ample fortune cannot extricate myself, is, that of I enjoy ought to make me careiess about ing with any degree of pla reserving any more feet. I am, however, pearance of res family convinced that if I were to show less subordinates, segerness in gesting patients, and to pay whose care

a letter to the Council, containing a resigna- that clevated branch of the profession to

continues to be embellished with two names tion, and in deliberating on public affairs, equally high in the page of medical fame! has not altered my opinion on one single On another occasion we shall publish the point. No man in his senses can doubt, letter.

Dr. WEBSTER has been used very ill at institutions is either trembling or absolutely this institution. We are authorized to state to tening; and I often reflect on the truth of that he has suddenly had notice to quit an observation of Pozzo as Bosco, that the chair. Dr. Panis having considered the British constitution is formed of such a it, after all, too important for his worldly flimsy mass of materials, that if an attempt views, to let slip the opportunity of getting be made to alter or repair any one part of the elifice, the whole must be pulled down and built anew."

" But however determined I am, as you know me to be, to stick to the last rafter of the wreck, I cannot conceal from myself the deplorable state of all our medi-"DRABDOCTOR MACHICHARI, - Youknow cal corporations; I will not even except that me sufficiently well, fully to comprehend of Pall Mall East, and I do not see the posthe salutary influence which a retreat from sibility of any system of legislation aftershe busy " haunts of man" to a sequestered (ing the condition of the medical profession, spot like this, must have produced, not only whilst the present system exists. It would on my enfective frame, but on my fatigued be infinitely more politic in the reformers, and harassed intellectual functions; I feel as Mr. Wanni area contemplates, to over-

"Nothing has appeared more incongruwonted vigour, - that there is a greater want out to many intelligent and virtuous men of elasticity about me-than when you first who have interested themselves in the pro-However, I mean not to complain, ceedings of the Parliamentary Committee, lam thankful to a munificent Providence for than the undeniable fact of nil our charters members of each of the institutions acting in all respects the very reverse of what their laws direct. There are to me insurmountable difficulties in all my conferences with my great political friends, who even taunt me with the fact admitted in the "Evidence," of a large portion of the income of dently trust that I shall gradually be re- the members of our venerable College, being stored to perfect health, yet it must, I fear, derived from the practice of midwifery, require some time to restore me to my profeasional labours, - and what, my dear friend, surgeons will not condescend even to be is my fondest wish, to be able to use my supposed to know anything about, whilst those very pures have the effrontery to contution! As to my private practice, you and fees that they practice physic as much as

ty is placed, both high and low, rich and remained at Windsor nearly a couple of or, should be considered the levery grade the preference of the effects of his millionth part of a grain till, possess as much knowledge both as pure shirthing and a pure surgeon put prerogative of our College to suppress quasi-action. This is so contrary to the usages of the other professions, that it is quite in the preference of th

we cannot act with more consistency, ho-one of its departments enfering from the nour, and benefit to our own interests, than changes of the times. We must all be con-by using every means to uphold all our an-tented to work on more moderate terms, cient privileges, taking care to humiliate all for by keeping up the prices. husiness has those to whom we grant licenses. It was, already gone nearly all together out of the indeed, gratifying to observe that the few hands of physicians. A few days before I Licentiates who signed the last appeal to left town. Turren told me that the topheard of.

friend Sir Romar Prett, about a 'valional' weigh out a dose for them.' change. They are all, I am personaled, to a have admitted into our College. that these opinions are correct; and no wonriginarale process of term-serving at Oxford and Cambridge, and after all be obliged to go to some Scotch university, as I did, to learn their profession. Nothing but an iuto submit to such measures; and, after having done so, who is the man amongst us to sacrifics the privileges thus acquired, and become a leveller / It is just an impossible for a camel to go through the eye of a needle, as for a Fellow to place himself ou an equality with a Licentiate!

"Matters are going on at Windsor much as I expected. They never send for me now-a-days, but I think it right to pay them a visit on my way to town when I go to saich patients as want me. The Queen then more is much loss red since gening the homeopathic

of his same provestions, sum; it is quite in-definished. In every other department of little going on in the way of greation at this. If the pair, rise in the estimation of society in acases of the year. But indeed I am well projection to the extent of their knowledge, awars, of the harrist shanges that have Be all these things as they may, and already taken place, and which, they projection as a charterest hody is evident, and Parliament, were so low and disceputable a anotheraries had also great cause of comsquad, - a parcel of Scotch Dubs, some of plaint. In the good old times, said he, whose names I den't think I ever betore when I sent in an account of 507, 19s., I 'should be paid by a check for 100%, but "It will be time enough, by-and-by, to 'since the Reform Bill has passed, in place arrange what kind of reform it may be wise; of the 100l. I receive only 50l., the 19s. and politic to bring before the College, how being actually deducted! Most families, ever little, if any be intended. We must too, keep a medicine chest, and they some-keep constantly talking, like my extermed times have the impudence to ask me to reform,' and ward off the evil hour as long instantur! The apothecary also complains as we can; and I do aware you, my dear sailly of the 'physician accoucheurs,' as triend, that I teel it a great consolation, to they designate themselves, certainly a cuhear that there is not one Fellow who in rious species of physicians,—a kind of nonhis heart desires anything like a radical descript animal, which we ought never to man, evisionals at bottom, and only make hermaphrodites do everything; they put use of the fifthy slang of liberation, that they the ladies to bed, - inoculate the children, may pull me down, and mount up their own scarify their gums, draw their teeth, give dear selves on the ladder of power. You them elysters,—cure the husband of gonor-will, I am sure, do me the justice to admit rhees,—bleed,—and, in short, do things that even the lowest of the " subordinates" will der that it should be so, if you will but for not do. The chemist is no less hurtful to a moment consider what could have ever the legitimate and pure physician. These induced them to be at the expense of the vagabonds take care not only to sell drugs, but to prescribe, which is most infamous, and must be put a stop to. The whole profession, indeed, seems to me to be in a state of revolution, so that I do not know well ordinate love of grade, or whatever you what is to be done, though, at the same time, choose to call it, could have induced them placed as I am at the head of the profession, I am compelled, by every moral feeling, to support that system of medical government which has worked so well for me.

" The weather here has been delightful. and I employ myself basily in making improvements on my beautiful domain, and in the society of my neighbours. There is a set of sporting men about here, for whose conversations I have generally no relish; but there are also some enlightened members of the catablished church, and a few well-educated squires, whose society I like. I amuse them by repeating the more imposing passages of my orations. There is very little female society within my reach; these I amuse in other ways. Old Lady an douber has, I am these I amuse in other ways. Old Lady

not understand the classics, I entertain her levery information about what is going on if with all my antiquities, and an occasional the profession, and believe me, bit of court scandal!

"I ride about a good deal, on an old pony, who is both blind and brokenwinded, and neither shys nor gallops off with me, but fatigues me sufficiently to give me a good appetite. My groom is very amusing in the account he gives me of the wonderful effects of all his nostrums, but not a 'subscription' (which is his name for a prescription) will he reveal to me. One day I said to him, 'What is that stuff, John, you are rubbing the mare's leg with? To which his only raply was, 'It is some things that I mixes together.' There is no doubt that the mystery which these grooms make about their stuffs, as they call them, and their humoral pathology, suits the minds of most people much better than one of my profound classical disquisitions. Well do I recollect my beloved friend and ever-to-belamented sovereign, George the Fourth, mimicking the manner and strange sayings of a royal groom who used to afford his majesty the greatest amusement. GEORGE was fond of a joke, and was so perfect a mimic, that had he been compelled, I have no doubt that his appearance on the stage would have been as brilliant as, on the throne, he was magnificent. Nobody with whom his majesty was ever acquainted, escaped his powers of imitation, and I perfectly recollect my quondam friend WARD-ROP telling me-which he did in the most delicate manner-how the King could, with the utmost accuracy, imitate my voice, my mode of expressing myself, and, above all, how fortunate he was in mimicking what I had always understood to be my forte, -my manner of coming into a sick room, and expressing, by my countenance and gestures, the utmost anxiety for the patient, and the deep interest I seemed to take in the minutest details of the case.

"I continue to take much pleasure in attending to my farm-yard, and although the markets are very low, I do not think the farm will be a losing concern to me this season. My fine beef has brought me from 3s. 6d. to 4s. per stone (sinking the offal). Mutton brings from 3s. to 3s. 6d. I am celebrated for my pork. Nothing, in fact, agrees better with my own stomach, and I have been feeding my domestics so much upon that food lately, that when I ordered my old-fashioned confidential bailiff, the other day, to slay a famous pig of the Chinese breed, he jocosely observed 'Law! yer honour, we have hin eating such a lot o'pork lately, that I'm now afeard to look a pig in the face.

"All these little things amuse me; they excite and occupy my mind, and keep away the blue devils of London. Write to me scon, and let the letter be long, and put in it pendent, but care

"Yours, very faithfully, "H. H.

"Leicestershire, Oct , 1835."

"P.S. Let me have a copy of WARDRO; 8 book on Blood-letting, whenever it appea s. I do not expect him to send one, not hav, ig given him a copy of my Orations, whis. I learn, by a side-wind, he was annoyes at. Let me also have a copy interleaved, for notes and observations of my own, as there is no subject in which I have ever been more interested than that of bleeding my patients.

CHRIST'S HOSPITAL.

To the Editor of THE LANCET.

LETTER FROM THE CHAIRMAN OF THE LATE COMMITTEE OF INQUIRY.

Sir,-You have taken a highly commendable interest in the affairs of Christ's Hospital, and have, as usual, been successful in aiding the correction of some of the gross abuses which prevail there. I thank you sincerely, in behalf of the children and their natural relations and parents for your exertions; and I call on you again to exercise your powerful pen, in reminding their parents' deputed and solemnly-charged guardians, to look first to their charge, and secondly to the manner in which they have acted under it. I have visited the charitable institutions of France, Spain, Germany, Switzerland, and Italy, and the information I there obtained has been improved by subsequent inquiries into our charities at home. firmly impressing me with the conviction that an impartial examination into the management of Christ's Hospital must be productive of prospective and immediate good. of the most extensive kind, to the objects of the founder, at once at Hertford and in London.

The medical question, which has so many times occupied your attention, has, at length, been disposed of, in a manner which does not, at the present moment, admit of being re-discussed; and I am sorry to say, that other matters, as regards the health and education of the children, seem to be relapsing into their former state. The unnatural practice of shearing the boys' heads has been revived, and the ringworm still lives and flourishes.

The Committee of Almoners appear to think that they are for ever to exercise their injurious influence over the health and fasture characters of the children. pectation, however, is, I fully .! vain one. They will ac longer find it available

y of "Pray support your committee"! Greibes governors, I am sorry to say, do pport that committee still, and will conti ue to do so. The ledgers of the hospital not be looked at with so much anxiety by them as their own. Still if they would but on'c, only once, take the trouble to inquire, the would, perchance, find that besides the inc. ae derived from the interest and possession of Treasurer's balances, and the expenses of residence (the Treasurer's especial perquisites), the salaries of clerks and servants amount in one year to more than one fourth of the gross income of the hospital! Would any of the numerous mercantile governors think that such a sum as 10,000% could be properly, or with safety to themselves, given, in the mere shape of salaries, to clerks and domestic servants, in their own establishment, out of an income of 40,000% a year? The fact I have stated should at least lead them, by analogy, to suspect that their unbounded confidence in the Committee may have been misplaced. Why, sir, the Committee of Almoners of Christ's Hospital have never, singly, turn by turn, or as diligent superintendents, gone through the wards and efficiently investigated the conduct of the nurses and other servants. And these gentlemen, too, are auditors of their own accounts. Meetings of Committees of Almoners are held, and that is all, and eight hundred children are committed to the care of servants!

With this brief summary of facts I beg to direct your attention to the circumstance, that a member of the Court of Governors has given notice that on Friday next he will bring under notice my petition, as that of a Governor of the Institution, to the House of Commons, on the subject of the abuses in Christ's Huspital. What that Governor expeets to accomplish on the occasion, I know not. He may desire to intimidate, but he will not succeed in his object; or he may find vent for feeling of anger at the exposures made in that petition; but be his object what it may, it is my intention to meet the case he may present, only with the petition to the House of Commons, replying no further than by the contents of that document. petition, you may remember, was presented by yourself from me, as Chairman of a Committee of Governors appointed to inquire into the due and efficient discharge of the duties of certain officers of the establishment, and praying that Parliament would inquire into the truth of the allegations urged therein; and lest the honourable Governor who is to bring forward the motion in suckion, should have come unprovided with of the petition, I beg, through the of jour pages, to hand him one. I park of dierespect or per-

governor, however

me in opinion,

same from others.

This noble institution, with its ample funds, would afford, under different and better management, a far more extended sphere of usefulness than it does. The conviction of this has prompted me hitherto in all I have said and done, and it will continue to do so until a correct system of management is adopted within its walls. With my brother Governors I desire not war, but peace, in the distribution of the bounty of the benevolent founder, and in the councils of the Almoners; but where 400 gentlemen, with a charge so soiemn as that to which they subscribe, consign their duties to the small body who meet under the designation of a (neglectful) "Committee," then it appears to me that peace on my part, or on the part of any of the Governors, is neither honest to the memory of the founder, nor to society at large. I am, Sir,

Very obediently yours,
WILLIAM BRACKSTONE TARBUTT,
Governor of Unrist's Hospital.
London, Nov. 25, 1835.

CHIMNEY-SWEEPER'S CANCER.

To the Editor of THE LANCET.

Sin,-You will oblige me by correcting an error into which your reporter has fallen, in publishing some observations which I made at the Medical Society of London, last week upon a case of Chimney-Sweeper's Cancer. I did not say that "the exostosis on the tibia of the patient well illustrated the proposition laid down by Mr. Abernethy." On the contrary I thought that circumstance accidental (probably congenital), and having no connection with the cancer on the scrotum, which I believe to be a local disease, brought on by the application of an irritant (soot) to that particular What I did say was, that I thought part. this case illustrated the observation of Mr. Abernethy (that cancer will invade every structure of the body), as it began in the skin of the scrotum, extended thence to the cellular tissue and glands of the groin, to the muscles, the periosteum, and even to the bone, the left pubic bone, which came in contact with the disease, being nearly destroyed.

But, Sir, my question to the Society is of some importance in the treatment of this disease, and with your permission I will now repeat it, to be answered by any of your correspondents; it is this: Is Chimney-Sweeper's Cancer a constitutional or a local disease? The case which I related would seem to favour the latter opinion, as no disease was found in any other organ of the body. I am, Sir, your obedient servant,

R. L. Hoopes, London Road, Southwark, 24th November, 1835,

DELIRIUM WITH TREMBLING. To the Beiter of THE LANCET.

Srn,-I was rather surprised at seeing a letter from Dr. Copland on Delirium cum Tremore in THE LANCET of last week, in which he claims the merit of having been "the first who distinguished two species of the disease;" and I was still more surprised at Dr. Copland saying, I am sure inadvertently, "I cannot find that I have made any reference to Dr. Elliotson's lecture on the subject." If Dr. Copland will again peruse the article in his Dictionary, he will find that he has referred, among his authorities, to Dr. Elliotson's very lecture mentioned in your foot-note. In the same lecture, and also in a clinical lecture published in THE LANCET for Nov. 13, 1830, a still earlier period, it will be seen that Dr. Elliotson not only had distinguished two great varieties of the disease, the one (the more frequent) not inflammatory, but requiring "to be treated with opium in full and repeated doses, backed by good nourishment, and sometimes to be combined with stimulants; the other decidedly inflammatory, and not to be cared without "bleeding and starvation," in fact, "requiring to be treated as you would treat phrenitis;" but he men-tions also a third variety, "where it is perfectly right to employ moderate antiphloall these varieties of the disease, and also the incorrectness of the name delirium fremens, which he said ought to be changed to delirium cum tremore, from the time he commenced lecturing at St. Thomas's Hospital, in 1825; and he was in the habit of mentioning a case, in illustration of the inflammatory type, which he saw many years before that time, in the person of a young county member, whose acquaintance he had made at Cambridge. Of course, I do not mean to imply that Dr. Copland did not also correspondent, relating to me : and as, it observe the varieties, because I know him to be a most honourable man; but it is evident that he was not the first to distinguish could condescend to reply to the author of them, any more than the first to suggest the such "facts" in any other mode than that alteration of the name.

I enclose my name and address, and beg to subscribe myself.

AN OLD PUPIL OF ST. THOMAN'S. London, Nov. 23, 1835.

. Itappears to us to be better to retain the term "delirium-tremens," in the present state of medical nonsenclature; first, because it is already in use; secondly, because it is more suphonous than the triple-worded as medical attendant and witness term; and, thirdly, because it is quite in thun from the estimate I enter accordance with the general analogy of own sense of Justice t doctrinal language. Delirium is the result must excuse me of a morbid condition of part of the human this "sense" of economy, and the adjective memory is ap- fee

pended (the Whole really making but out distinctive word, with a Applier in the court to denote a modification of that condition The two learned teachers may be justiful according to their own views of the dise in each adopting that particular physics (Latin or English) which best expresses their notion of the actual condition of the patient affected; but to say, as we presume they would, in advocating a change of terms that delirium does not tremble, is to detect a meaning in the old term which factording to circumstances) it scarcely even suggests As well might we say of inflammatory ferei or necessar palpitation, that those terms must be abolished, - the latter, for instance, because the polpitation is not nerv ous,—in order to say "pulpitation with nervousness," "fever with inflammation." We could cite a dozen such instances, but by thus changing terms we should convert them from names into sentences, which is no " the thing desired."

INQUEST AT FARNHAM. LETTER PROM MR. G. BURY.

To the Editor of THE LAXCET.

Sin.-I appeal to "your own sense o gistic treatment, and to give opinm also." justice and propriety," so loudly proclaime. Nay, Dr. Elliotson invariably pointed out in one of your editorial articles of Saturday November 14, to insert in an early number of your journal the paper sent herewith which has been called forth by the extraordinary mis-statements , to use the mildes term) contained in a letter to you from this town, purporting to bear an account of ar inquest lately held here, dated October 26th and printed on the above day. In the accompanying document I think you will fine most complete contradictions of all the socalled "facts" furnished to you by your my opinion, no man who considers himselrespectable, or would wish to be thought so adopted by me, or to notice any of his statements touching other points of the case, I shall crave your permission to pass on to the remarks made by you, or, more fairly speaking, by the writer of the leading article alluded to.

I take the liberty of addressing you, Sir, as being the editor of a public journal, and as having offered observations therein on a case in which I have been concerned.

spondent into your williams, in which a died justs is said to have delivered evi-ance of the remarkable nature therein at citied, without having made prior inquery at to its correctness, either of the cas in question, or some other party. You may object that you have been misled ar correspondent, in whom you placed ence, and whom you believed to be trustworthy. Be it so. But were you sufficiently acquainted with his character to warrant your accepting any statements he might choose to transmit to you? Or were you sufficiently acquainted with the relative station, in society and character, of your correspondent and the other medical men here, if, indeed, your new advocate for the necessity of medical coronerships can be called a resident practitioner, to justify you in publishing the like observations from one against the other? I know you were not. You could not have had such know-

mit me to ask you, on what are formed the opinions thus freely given? I have always understood, in my own simple judgment, that it is requisite and essential to be enabled to form an opinion before one can be have no doubt it made a powerful impressi given. But you heritate not in pronouncing yours without even having seen the evidence, or having been present at the inquest, -- an opinion that can be grounded only on the contents of the letter of your correspondent, from which per se (even if it were correct), every person competent to judge must admit your conclusions have been drawn too hastily, and from insufficient data. Your authority with regard to what was found in the stowach, as to how long it might have been in that organ, and how far it operated in being the cause of death, is, questionless, of great value; but, for my autestionless, or great value; one, or or or own part, I consider that of Dr. Christisson at least equal as a toxicologist, and if you will take the trouble to refer to the last edition of his excellent Treatise on Poissons, you will discover in pages 799 and 801, matter will discover in pages 799 and 801, matter on the poissons of the control of the edition of the edition of the control of the edition of th quite at variance with what you have ven-tured to assert so "certainly" and "assur-

Again, if "Mr. Pos(r) tello is entirely exonerated from blame," as you have avowed bim to be, how can it be "an act of malimenuelty to make him the object of susor reproach?" Or how is it possible an object of suspicion ?" a your paper, by school or reproached,

B jury

I doly you to bring proof of, or even to show malice or cruelty towards him emanating from any quarter. I remain, Sir,

Your obedient servant,

Farnham, Nov. 23, 1835. G. BURY.

Extract from the Printed Document alluded to in the first paragraph of the above

So soon as I read what alluded to me therein (in THE LANCET of Nov. 14th), I wrote to Mr. Woods, the Coroner, requestingincompatible with his official situation to reply to them. His absence from home prevented my receiving the following letter at an earlier date, together with a copy of my deposition taken at the inquisition over which he presided :-

"My dear Nt.—Having seen the garded case in The Lanvis, I must really family you with a copy of gear 4-position for gene own pricate information, assured that you will not give it publication. It ledge. Therefore, may I not well ask, where are your "justice and propriety," "in publishing the letter to be found at page 256?"

With respect to your "stating that Mr. Postfuelo accept the stating that Mr. Postfuelo does not appear to have incurred the slightest degree of culpability," and "there is not a tittle of crifeture in proof, that the child was poisoued," will you persist the child, from whom alone I received this information, that the child was poisoued," will you persist the child, from whom alone I received this information, that the child me whole of the statement is calculated to indicating public. He told me be released the streams. in positic. He told me be glessed the circumstance from the parents of the child. As your evidence is now before you, you will think it apperliance for me to answer the specific questions you have past. The vedict certainly was not wholly founded an your evidence, but as connected with other depositions, i

" Yours very truly, "HENRY WOODS.

" To George Bury, Esq."

Having received authority from the son of Mr. Woods, to submit the copy of my deposition, which I am not at liberty to publish generally, to the inspection of two or three respectable inhabitants. I have done so, and, in conformity with the recommendation of a disinterested person, placed it before the two gentlemen, whose names are apprended to the document which follows, the former of whom was selected as being one of the clergymen of the place:

That his evidence proves that the child could not suchious at the time he naw her.

"R. Sangar.

JAS. STEVENS.

" Farnbam, 21st November, 1834."

(The following are subjoined as the replies of Mr. Bury to the various statements of Mr. Rogers.-En. L.)

Declaration of Mr. Arthur William Woods. "I hereby declare that I was precent at the inquest at Earnham, held on the 17th of October Lat, and that? heard my father, the Coroney, ask Mr. Bury saverad times during the examination, whether he applied signer that may volution was the course of the death of the child, and Mr. Bury as often repfled this be could not swear to it, or in other words that is cuild not presonance such an opinion.

"ARREVA W. WOODS-

" Nov. 21st, 1838."

No charge was delivered. The Jury repuested the Coroner to withdraw before all the witnesses in attendance were examined. and in a few minutes returned their verdict, agreed on unanimously.

"The verdict certainly was not wholly founded on your evidence, but as connected with elker depositions, I have no doubt it made a powerful impression."—Mr. Woods's Letter,
"To any nothing of that part of the publication, which is so greatly untrue, viz. that J had stated a fact to Mr. Rogers of your having administered powders to the child."—Jobd.

The truth is, that I sent medicines to be given, if the child should alter for the better in the course of the night, from the effects of a blister which I applied. I told the Coroner and Jury I considered the recovery of the child hopeless, from the first moment I saw her, and when about to communicate what remedies were used, I was stopped by the Coroner, who remarked, "You did all you thought proper to be done," to which I assented, and he then proceeded with other parts of my evidence.

Declaration of Mr. Hewitt, Guardian of the Parish.

"I hereby affirm that I accompanied Mr. Bury at each of his visits to Mr. Portello's shop, previously to the inquest on Catherine Robison, and that on to the inquest on Catherine Robison, and that on neither occasion was he shown by Mr. Portello, or any other person, a bottle containing jalap in pow-der, or the situation of such bottle, or any such pre-paration, in the shop; and I also affirm that that substance was not even hanned to Mr. Bary.

" Nov. 18, 1835."

Declaration of Michael and Ann Robison, the Parents of the Child.

"We declare that we never stated to any one, or at any time, 'that the child became sick, yeary sick, year the medicine given by Mr. Bary, and that it was much convulsed after taking it."—We do

Assistant Overseer, 1835."

that it was much convuned after taking n. - we no also kereby aftest that the child had no nomiting, after Mr. Bury first saw her. MICHARL ROBISON.

The mark of ANN ROBISON.

Witness,

FARDENICK TRIMMER, statements.

An idea eniter in the minds of some the inhabitants of this town, that ny ev dence before the coroner and jary was a tended to criminate Mr. Portello, and I elieve he himself has imputed the design of doing so to me. To those who know m , I trust it is quite unnecessary to disclaim I aving had any such motive; but if others entertain doubts upon the point, the foll ring brief statement must remove them from every candid mind,

It was well known (and made known to

Mr. Portello also from my own lights the parish officers, to the coroner, and several others, that my suspicions of guilt, up to the hour of the inquest, fell upon another party, whom I will not name, since such suspicions have subsequently proved ground less. His name, as above attested by the Rev. R. Sankey, and James Stevens, Esq. was not mentioned to me, but the individua evidence touching him, came from other testimony than mine. The circumstance l am now going to relate, will indeed show that I really had friendly feelings towards him. Late in the evening before the day of the inquest, Mr. P. requested me to walk with him to the house where the child was lying, a distance of nearly a mile, and said

he would feel much obliged by my accompanying him, for he had some questions to put to the parents which no other person than a medical man could appreciate. I readily and instantly complied with his request. Mr. D'Esterre, my brother in law Mr. Hewitt, and Newell, the high constable, who were in his shop at the time he asked the favour of me, went with us. 1 confess I heard him put no other question to the parents of the child than this, " Why

In conclusion, I here repeat that my sole motive in publishing these observations and contradictions, is to vindicate myself from the charges involved in the foregoing mis-

did you not send for Mr. Bury sooner?"

G. Bury.

Farnham, 21st November, 1835.

COURSE OF LECTURES ON DISEASES OF THE BRAIN AND NERVOUS SYSTEM, BY M. ANDRAL.

In the next Number of THE LANCET will be published the first of a series o Lectures now in the course of delivery at Paris, by the celebrated M. ANDRAL, on the Diseases of the Brain and Nervous System, reported expressly for insertion in Tax LANCET, and published with the express permission and approbation of that re-out pathologist. We content ourselves by merely making this announcement, as the importance of the subjects to be treated in the lectures, and the celebrity. (who has devoted an immense portion of time exclusively to the by which they will be illustrated), recommend them to the a fession without a word of comment on our part.

4

THE LANCE

LONDON, SATURDAY, DECEMBER 5, 1835.

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL,

Aysician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Médicine, in the Faculté de Medecine of Paris.

LECTURE I.

PRINCIPLES OF INVESTIGATION.

GENTLEMEN,-In the course which I am about to deliver this session, I propose to draw your attention specifically to diseases of the brain and its appendages; in a word, to affections of what is called "the nervous system."-those diseases which affect the organs of relation, commencing with the nervous system as the chief agent by which the various acts or functions of relation are produced and regulated.

Before we enter immediately upon the study of this most interesting class of diseases, permit me to present to you a few preliminary considerations on the difficulties by which the physician is surrounded in his pursuit of knowledge in this particular branch of medicine. The study of diseases not only on account of the obstacles which impede the advancement of medicine in

thological anatomy; but I know of no single work which may be said to afford any thing like a complete view of the question, which embraces all the facts that bear upon it, and at the same time does not leave untouched a great number of the most important and interesting points on which correct principles are to be founded. But the subject, difficult and arduous as it is, from its own nature, is rendered still more difficult from the various opinions and theories which prevail amongst the best physicians on almost every single question connected with the physiology and pathology of the brain and nervous system. It is not now the time to touch upon the disputes to which these have given birth, but you will have occasion to observe, during the present course, how very difficult it is to arrive at any thing like the truth, or syen to obtain a fixed idea on any point, amidst the multitude of conflicting opinions, and the host of contradictory facts, which we shall find stated and vouched for upon the most respectable authorities. Yet all these we must examine and discuss, with the hope of obtaining some determinate prin-ciples, carefully sifting opinions, and weighing and comparing the facts on which they have been founded. I do not mean to affirm that medicine, as a science, is exact or complete. No; I certainly would not venture to assert that. There are many points in the science upon which we are as yet by no means sure; but uncertain as our knowledge may be with regard to the causes and nature of several diseases, it is infinitely less sure, of the nervous system is peculiarly difficult, far less firmly based upon rational grounds, or supported by positive data, when the diseases of the nervous system become the obgeneral, but from various circumstances ject of our inquiry. In the study of any connected more intimately the system disease, or in the investigation of the disease itself. In the first place, the desire to of any particular part of the body, or any collect materials for the ground-work of any system, there are three or four circumcollect materials for the ground-work of any system, there are three or four circum-general views upon this subject, we find stances to which the attention of the phy-rurselves compelled to axamine a vast variety sickan is almost exclusively directed; and if works, and to spend an immense portion which he always endeavours to determine, the in the collection of facts, which are though he may not expect that his efforts through agreet number of authors, will always be crowned with nucesis. His three times, and published first object is to ascertain the causes which a state deal has been have determined the disease; his second is to h latter years, observe the external or internal symptoms littles of the which reveal its existence: his third is to

which the disease produces in the different of general troubles Hence, in diseases on the causes, the symptoms, and the pathology of the disease, he endeavours to fix upon a rational treatment. This is the manner in which we should proceed, were we to investigate diseases of the chest, of the abdomen, or of the circulating or any other system; but in diseases of the nervous system, we unfortunately find that the study of the causes, the symptoms, and the treatment, is surrounded with difficulties of a peculiar nature, which we do not find in any other class of disease. We shall now lay before you an account in detail of some of those difficulties, - not with a view to discourage you in the pursuit of professional knowledge, but in order to render your progress more easy, by pointing out at once some of the principal obstacles with which you will have to grapple, and prepare you to surmount or remove them.

If we begin by investigating the causes which determine the symptoms of other diseases, we have to consider first, the action of external agents; secondly, the reaction occasioned by the operation of several of those agents; and thirdly, the process or in-fluence which is called "sympathy." — a trouble produced in the functions, and often in the structure, of one part of the body, or of the economy in general, by derangement in the function or structure of another part.

Applying this division to the nervous system, we find that the latter is not influenced by the external world, or at least, is but little subjected to those changes which external agents incessantly tend to produce in other symptoms. The respiratory apparatus is constantly and of necessity exposed to the action of the atmospheric air, and to the various impressions, of a thousand sorts, which are apt to be conveyed through that medium. The intestinal canal is also daily exposed to the action of the various alimentary and other substances which are applied to its surfaces. But the central neryour system is, by a peculiar provision, withdrawn from the influence of most agents of this kind. It is, however, subject, in the the highest degree, to effects of the third species of causes to which we have alluded. Indeed, an attentive observer of the phenomena which take place during disease, must be convinced that we can have no organ slightly deranged, no function troubled, even in an insignificant manner, without a corresponding change being produced in the nervous system. No matter whether the primary change takes place in a fluid or in a solid of the body, in an organ essential to existence, or in an apparatus of secondary importance. The central nervous system, or that force which presides over life, partakes more or less of the disturbance. Its ordimary phenomens are then no longer manifested, and the economy evinces symptoms ligious persua

tissues; and, fuelly, by carefully meditating the nervous system is affected in a variet on the causes, the symptoms, and the padifficulty in pursuing the study of those d eases which are peculiar to it. Take, example, my disease, examine its symptoms, separate those which depend immediality upon the organic change from those nected with a lesion of innervation select a number of diseases indiscriminately, and see how many of the most important among them frequently depend upon the latter. In gastritis, in hepatitis, in inflammation of the lungs or the abdominal viscera, how many symptoms have we which can be referred to the mere inflammation of the part,-to the simple physiological change which occurs in the condition of its vessels? Examine the symptoms with care, and you will find that the greater part of them depend upon the trouble occasioned by the local disease, in altering or perverting the vital force,-that they are, in a word, socondary affections of the nervous system, which commands and directs all the other systems of the economy, -- which stamps its peculiar physiognomy on the primary disease, determines its character and gravity, regulates its march, produces its complications, and, finally, directs the therapeutic indications which we are to follow. In almost all the other organs of the body, we can find the cause of the malady in the structure of the organ. Pathological anatomy, cultivated as it has latterly been with ardour and perseverance, has laid open to us the changes which take place in the organic structure of the different apparatuses during the course of most diseases by which they are affected; but in the acryous system pathology furnishes little or no aid of this kind, and we are compelled to look for a number of causes of its diseases which are totally unconnected with physical modifications. Hence arises a principal difficulty in the study of nervous diseases of the system, which assome a variety of characters and types, under the influences of causes which, having no sensible effect that is appreciable to the senses, often escape our observation, or involve us in an obscurity which it is too often impossible to dissipate. Though our knowledge of nervous diseases may still be very imperfect, we are sufficiently advanced to affirm that the vary considerably, according to the different stages and periods of life; that they are modified by climate, and even by atmospheric changes; that the tendency to several nervous affections is augmented or influenced by the education and profession of the individual, and by numerous other moral agents, as must be familiar, every physician who has practised madis successively in the country populous capitals, like cording to the form

state, extending to the degree of civilization, and the spore or less extensive partition of enjoyments which operate with immediate influence on the moral man, we find that iseases of the nervous system become at me time intense, at another feeble, are conied to particular classes, or are diffused ough vast masses of the population. Discases which at one time were obstinate of treatment and frequent in recurrence, become at another time mild and rare. Affections with which we are now familiar, were seldom observed in earlier and more simple ages; while many nervous diseases have altogether disappeared and become extinct, from the different relations of man in civilized life.

This uncertainty in the form and character of disease, more peculiar to nervous disorders than to any others, from some of the causes we have just pointed out, must render it difficult to appreciate a great number of circumstances connected with them; but this is not all: even when we would determine the existence of any nervous disease, seek its place in the nosological scale, in a word, give a name and seat to the disorder before our eyes, we find ourselves surrounded | we have something more than a plus or a by a number of peculiar difficulties which minus; we have a condition that cannot be re-frequently frustrate our best-directed and ferred to exaltation or diminution of the vital most assiduous efforts. Some, perhaps the force; we have a change of quality in that principal, of these obstacles, gentlemen, force, an aberration, a perversion or depriarise from the absolute insufficiency of our vation whose influence is perceptible in al-means of investigating diseases of the brain most every affection, and whose existence and nervous system. Disease of an organ we cannot neglect without exposing ouris betrayed by a change in its physiological selves to all the errors of the Brunonian functions. The change of structure or of doctrine. The existence of this state of physical conditions in many of the chief or- ataxia in various disorders may be directly game apparatuses, makes itself known to our proved, in others it may be inferred from senses, and hence arises the admirable pre- analogy; thus in delirium, in several forms series, and merce arrives the nominator preinterpolation of diagnosis at which we have latterly of convulsions, &c., we have evidently an
been enabled to arrive in diseases of the
clust and abdomen. By the aid of auscultation and percussion, or, in other words, by
When delirium exists in the course of fever,
bringing our senses to bear immediately or of inflammation of the brain, I say there
upon the injured part, we can fix with wonis an aberration of the intellect, a deprivaderiful accuracy, not only the seat, but even ition of the vital force in that part of the the precise nature, of various disorders economy, and I can prove this from the very which occur in those two great cavities; but unture of the disordered function, but I can-the peculiar nature of the functions of the not admit that there is an excitement, or an brain and nervous system, the difficulty his elevation of a normal condition. service of results, and thus the brain or its appendages. lecases, difficult as they

A second obstacle which presents itself to us in our examination of diseases of the brain and nerves, arises from the absurd manner in which theory has been mixed up with observation. The number of facts collected is considerable, but their value has been much diminished, and their appreciation often rendered obscure, if not impracticable, from the unhappy tendency which too many writers have, to build up supposi-tions without any foundation, which they bring forward at every instant, and to which the true facts are frequently compelled to yield, or they are distorted into an apparent reconciliation. Thus for many years the study of diseases in general, and of the nervous system more particularly, has been retarded by a wish to explain all that we witness in the course of disease, by ascribing it to an augmentation or a diminution of normal excitement. No doubt in many disorders which have an hyperdynamie, or an adynamie, we find the vital force elevated beyond the normal type, or depressed below its natural standard; but in a great number of diseases we have a third state, which we cannot neglect without falling into numerous errors;

therto experienced of establishing any con-nection between the function of the organ which we meet in studying diseases of the and its structure, the absolute impossibility i nervous system, arises from the quew matance of applying our senses with any advantage that various organic changes in the brain, a to an appreciation of the normal or abnormal great diversity of lexions, may give rise to physiological conditions, - these and several nearly identical symptoms, and in the actual other causes compel us, in diseases of the state of the science we are compelled to use nervous system, to abandon the aid of our the utmost reserve whenever we would atmag, and have recourse to simple induc-tempt to explain, by the nature of the losisms. But this latter guide is uncertain: it found in the dead body, the functional de-publication to different investigators, an im-

You need not go deeply into the history of secomes still cerebral disease to be convinced of this ency of our truth. Let us take, for example, two individuals who are laboured and individuals who are laboured. examination of the dead body cannot explain | suit to trace after death the physical the various phenomena we observe during that may have be the cause of abcommisses of the nervous system; and if we paintent of the original males. In labor place to axclasive a reliance upon pathological researches, we shall become involved the elements which compose the brain vary in contradictions, from which escape is very from one period of life to another. Thus it difficult.

vancement of the science in discases of the and the brain itself presents an augment-brain, we may perhaps find it in the cir-tion of volume from birth up to the age cumstance that a great number of func- puberty. In the adult, again, the quantity tional disorders may really exist without of phosphorus which enters as a compo any change of structure sufficiently pro- nent into the chemical composition of the nounced to be observed by our senses after brain, is greater than in the child or in the death. This, I say, may possibly be the old person. The quantity of phosphoricase; the lesion of innervation may be sufmatter, inconsiderable in the child, acquire ficient alone to produce various troubles in its maximum in the adult, and again dini the economy, without heing accompanied mishes in old age. During the latter period by any organic derangement of tissue; how- of life the brain shows evident signs of ever, we should be inclined to suppose the diminished nutrition; its several diameter contrary from analogy. These lesions very are reduced by some lines, and its specific probably do exist, although they have gravity is from one-twentieth to one afteentl hitherto escaped all our researches. We less than in the adult. covery is now almost unlooked-for.

indebted, to pathological anatomy for some proven that at a future time we may be in of the most important discoveries in medi-condition to give a satisfactory reason for cine which have been made in modern several phenomena which are now involved times; but it is unfortunately an effect of in total obscurity. The ideas which I have the ardour with which one branch of the just thrown out upon this point, are mer science is pursued, that many other con-suppositions, that may be confirmed or over siderations, of minor importance indeed, but thrown by subsequent observations; it is a still necessary to the full knowledge of dis-such that I would wish you to receive them ease, have been comparatively neglected, and not as facts that obtain the value of de-Thus, perhaps, we have not paid sufficient monstrations.

attention to the relative development of the several parts which, taken together, constitute the example of the nervous system. nervous system in a therapeutic point of the nervous system. Almost exclusively devoted to the research; view. Here also you will find yourselve of changes in the texture of organs, we beset by many unexpected difficulties. It have neglected to inquire in what manner various abnormal conditions of the nervou an irregular development of certain portions system, the patient shows marks of excite of the brain may be a cause of trouble to ment, the energy of the nervous force ap the functional actions of the whole organ, pears elevated, and the symptoms seem to We have many reasons for believing that indicate such means as usually operate: loss of equilibrium in the normal growth of diminution of the vital power; but in these less different portions of the cerebral mass, cases, if you employ blood letting to any ox nay become the cause of deranged equilibrium of its functions, just as well as if the ble you aggrayate it, and the indications of hange were operated in the structure of treatment upon which you had reliance it he part. I merely throw out this idea as disorders of the other systems, here leave a matter for your reflection; the time for dis- you in fault. This is particularly seen in musing the question has not yet come many of that class of diseases called "neu Again, there are certain changes of nutri-ion, certain phenomena connected with the crasperate the symptoms of exaltation which themical composition of the brain, which seemed to indicate them, and whore week nay not be without influence on its func- compelled to have recourse to entire ional manifestations, and therefore deserve posice system of treatment, our attention while examining the history intense inflammations of the if disease in an organ where it is so diffi- where the only he

the infant and child the quantity of aqueou If we look for the cause of this slow ad- matter predominates over the albuminous

have, therefore, the greater need to increase. These are questions which as yet have our diligence, multiply our observations, only been touched upon as connected with and examine with most minute attention the diseases of the brain, but they deserve on slightest change not only in the arrange- serious attention. In the absence of anament and texture of the nervous system, tomical lesions, it is not altogether irra but also in its composition, and at the end tional to conclude, that perhaps some dis-weshall perhaps arrive at truths whose dis-cases of the nervous system may be ex plained by chemical changes in the substance We are indebted, as I said before, highly and complication of the brain; but this only

resides to copious and meated bleeding, them in the actual state of the science, this little measure is bended with de- Cultivate then, I say again, minute anatomy, odly injurious effects; the excitement, inread of being calmed by the loss of blood, pidly increases, and is soon followed by a fatal exhaustion of the vital power.

In many other diseases, also, some peculiar nervous state exists, which will not t of mood-letting. In chlorosis, for mile, we have signs of a nervous exaltation; but these are dissipated under the use of quinine, of cold effusions, of strengthening diet, exercise, &c., which bring back the harmony between the functions of the sanguineous cinissions would, on the contrary, only tend to keep up the disorder. Another difficulty in the appreciation of the effects of remedial agents in disorders of the nervous system, is the immense and varied power enjoyed by the imagination over almost all our functions; the force of a vivid imagination, the power of energetic belief, the influence of religious or superstitious impressions, are capable of producing and curing diseases, not only such as depend upon derangements of the nervous system, but others which have taken much more profound root in the economy. Of this, history affords us proof every day, without ascending to a period of remote antiquity, or the miracles of the royal touch. How easily can we explain by the imagination, many of the cures obtained from the magnetisms of MESMER, down to the infinitisms of homoropathy! It is the influence of this same imagination which constitutes the force of the charlatan, working a cure by invisible means, which is attributed to the nullities he administers: in a word, the influence of the imagination on the normal by a greater or less less of the motile power; and abnormal conditions of the human body, forms one of the most curious parts of the in the posterior columns, and here sensation history of man.

There are, perhaps, few professions which require a greater combination of varied and extensive knowledge, than that of the physician; and if this be true for the study of disease in general, we feel a still greater necessity, when entering on the investigation of nervous diseases, of preparing and clearing our way by a previous study of the other accessory sciences. Above all things, gentlemen, your efforts should be directed to the acquisition of anatomical knowledge; which you are contented in the commencement of your education, but of minute and delicate anatomy, which alone can enable us to throw any light on the changes of or-

and believe me that if you would pretend to advance this obscure portion of medicine, you must, above all things, be a profound anatomist.

The knowledge to be derived from comparative anatomy and from experimental physiology is also not to be neglected. In some cases you will observe the movements of the lower extremities extensively lost, though the lesion in the spinal marrow is comparatively insignificant; in other cases the loss of motion and sensation is less perseveral parts of the nervous system, while feet, although the injury of the spinal marrow may be carried to such an extent as to cause its complete separation into two portions: it is difficult to understand how this can take place, but without attempting altogether to explain it, I may observe, that in some fishes I have seen the nerves completely separated from the spinal marrow, and yet sensation and motion have been conveyed from it to the distant parts of the body, through a fluid.

We can also derive considerable assistance towards the clearing up of certain obscure points in pathology, from physiological experiments; thus we have been able to understand and explain a great number of interesting points connected with paralysis of the face, only since the period that experi-ments have demonstrated the different functions attached to the fifth and seventh nerves, Again, consider the great light which experimental physiology has thrown on the pathology of the spinal marrow; in man we have frequent examples of an injury affecting only the anterior columns of the spinal marrow and the functional derangement is betrayed in other cases the lesion is situated chiefly is the function which suffers. How could we explain this difference without the beautiful discoveries of some modern physiologists, who have shown that the posterior columns of the spinal marrow preside over sensation, while its anterior portion is chiefly destined to regulate sensation!

The difficulty of tracing the morbid phenomeus presenting themselves during life, to certain organic lesions, may, in some cases, perhaps, depend upon our not searching for the lesion in the place where it really not of the rough imperfect anatomy with exists, and this often, in turn, depends upon a neglect of physiology. Thus, in many instances, a patient goes blind without any sensible alteration in the structure of the eye. After death we examine the optic anization that take place in the brain and nerves, their commissure, the thalami, in a You will find this minute research word every portion of the brain supposed to most precious aid in your investiga-bear any relation to the sense of vision; and the parts equally free from any we at an interpretation of appreciable levion. In another case the transcady possess, with source of hearing is deranged, or altogether explaination of lost. We examine the internal car, the fewJeat of the floor of the fearth ventricle, and every thing presents a normal appearance : are we therefore justified in concluding that the loss of sight and hearing in these cases did not depend upon change of structure in the nervous system? I do not think so, gentlemen; we have omitted in our investigations an casential element; experiments have demonstrated that the fifth pair of nerves is an accessory nerve to the functions of the different senses; nay, more, comparative anatomy teaches us that the branches of the fifth pair may themselves become nerves of sensation in certain animals who possess organs of sense that do not exist in man, or in other animals placed low in the scale of creation, this accessory nerve actually becomes a sensitive nerve, and supplies the organs of sight and hearing: hence it is by no means tinprobable that in many cases of blindness and desiness, the loss of those two functions may depend upon a lesion of the fifth pair of nerves, or some of its branches, and not upon an injury to the principal nerve distributed to the diseased organ.

Thus, gentlemen, you see how closely these different branches of knowledge are connected together; how pathology is sided by comparative anatomy and experimental often seen the most interesting and importphysiology, and how necessary it is to cultivate these latter branches of the science if we would hope to take a distinguished part in the advancement of the former.

I have thought these considerations upon the various difficulties that present themselves in the study of nervous diseases, of sufficient importance to lay them before you, gentlemen, in some detail. Let us now explain, briefly, the criler we propose to follow in the present course. We shall first describe the different lesions of the central nervous system, commencing with the most simple forms, and thence passing to the more complicated; we shall then take up lesions of the nerves; and, finally, terminate with a review of those disorders which are generally attributed to a lesion of the great sympathetic nerve. We have already seen, as regards the other principal systems of the economy, that discases may be distinguished into Lesions of Function, and Lesions of Structure. The same principle of division holds good with respect to the brain, and we shall soon have occasion to demonstrate how the influence of this organ extends to all parts of the economy, modifying disease in a peculiar manner, and stamping all with a characteristic mark.

Finally, with regard to the spirit in which we propose to conduct the present course, we may say that its chief object shall be a just appreciation of facts. Some of these facts are premature, and as such cannot be taken into account; others are demonstra-1

mohis, the strice in the bits, and upon those principally shall our arth ventricle, and every thing deductions be femaled; others, again, are mal appearance: are we there-merely probable, but are by no means to be neglected from that circumstance. We are not of opinion with those who say that fa probable fact is no fact at all, " an fait preisemblable est un fait non avenu," contrary, many of these pos-ess a very great value, and instead of turning from them neglect, we should endeavour to verifuland appreciate them. Lastly, some facts are false and inaccurate; but even here I would remark to you that many facts are supposed to be so, merely because they do not agree with our own theories, with the ideas we have been taught to adopt : you must, therefore, weigh each fact with care and impartiality before you decide on its rejection, for nothing is more fatal to the science than that absurd cynicism which believes nothing that it does not see. Our last care, gentlemen, shall be to notice some of the principal theories which prevail with regard to disorders of the nervous system. We cannot pretend to expose all; we shall, therefore, confine our attention to the most plausible. I am not one of those who run after hypotheses and theories, but as a teacher it is my duty to lay them before you, and thus keep para with the progress of the science, for we hav. ant discoveries, whose authors commenced by inventing hypotheses, and terminated by proving them.

ON THE

NATURE AND QUALITIES OF FLAME.

By W. REID CLANKY, M.D.,

Sunderland.

WHEN a simple body is burnt, the fiame is uniform throughout; but when compound bodies are burnt, the flame varies considerably, depending upon the nature of the combined gascous substances inflamed, and producing a variety in the intensity and colour of the light.

As a familiar example, I will commence by giving a correct account of the phenomens of the flame afforded by a candle, and by way of explanation, append a diagram of that flame, afterwards describing the experiments which led me to the constitution I have adopted, and the appearance

Surrounding ?

3

Arabic characters (3.2-3), we always find a clear bide flame which chars the wick from the moment it is lighted, and in forming a base for the light-giving flame, at this point, the two flames show a blue-white light at ir juncture.

inmediate ly surrounding the top of the wick we find w conical space (2), which forms a centre to the yellowwhite flame, and which is less transparent and less luminous than the yellowwhite fisme, immediately surrounding it.

Round the space (2) we observe the yellow-white or light-giving portion of the fiame, which is also conical (3.3.3), as all

heated gases are in ascending, by reason of the uniform pressure of the atmosphere.

Surrounding the last-mentioned lightgiving atmosphere (4.4.4) we find an atmosphere which is, generally speaking, invisible to the eye, except we use a large coarse candle in a very dark room. This atmosphere is diaphanous, and surrounds the light-giving flame at every point.

effect any change in its appearance. In the candies, oil-lamps, and gas-lights, atmosphere [4.4.4] which, as remarked above, is also invisible, we find that the wire instantly becomes yellow-white, from pabulum flammer, a portion of it is, during the probability of the control of the contro flame.

Immediately within this invisible flame augmentation of the light at the base of the we find (3.3.3) the light-giving flame, and flame. at this film, or atmosphere, of yellow-white flame, the wire becomes red-hot only. In the centre or the obscure part of the flame in the open air, it has, also, its invisible of the candle (2), we do not find that the flame, and over this there is an atmosphere brass wire is so much heated as to give it the tint of what is called "cherry-red." Indeed, I am of opinion that were it not for the conducting power of the wire itself, this obscure portion would not give to it any approciable augmentation of heat; for, assuredly, this opaque or central portion of the flame, is not in a state of combustion, as Expect to be able, very shortly, to demon-When we place before us a candle terription which has been burnt for and extinguished in the usual

ance of ignition is a clear blue flame, which I have discovered by experiments to be car-bonic oxide gas. This blue flame, as it continnes to burn, will augment in extent, and soon afterwards will show a white flame upon the top. This white flame will gradually augment until it become the lightgiving flame of the candle.

The base of blue flame gives out a powerful heat, which not only chars the wick, but also melts the tallow of the candle, and this melted tallow is pumped up, as it were, in the heated interstices of the wick in the manner of fluids in all capillary tubes. At the top of the ignited wick we may readily observe, without the aid of a lens, the inflammable gases springing up into the course or opaque part of the flame (2), which may be seen more readily after the wick has been snuffed. This liquid or melted tallow, being composed of carbon, hydrogen, and oxygen gases, is manufactured by the heat of the flame, and becomes an empyreumatic oil,-olefant gas, bi-hydruret of carbon, and carbonic oxide gases, suspending a consider-able portion of free carbon; and these substances, when in a state of combustion, we call "flame."

Carbonic oxide gas is formed whenever carbon is burnt without its receiving the Externally to this invisible flame we find needful quantity of oxygen gas to cause it another still (5.5.5), which is composed of to pass into carbonic acid gas. Carbonic nitrogen and carbonic acid gas, but as, of oxide gas is remarkably inflammable, and this atmosphere, and of all other parts of takes fire in the open air when it comes into the flame, it will be my duty to treat more contact with iron at a cherry-red heat. It at large, I will commence by stating, that is, therefore, in the first instance, burnt at when we hold a piece of fine brass wire the base of all flames into the composition across the flame of any description of candle of the gases of which it enters. as we may or oil-lamp, the atmosphere .5.5.5, does not observe in the familiar instances of lighted

the great heat afforded by this invisible combustion, attracted into the body of the blue or carbonic oxide flame, and there contributes, in a very beautiful manner, to the

> When carbonic oxide gas is burnt by itself containing carbonic acid gas. The invisible flame of carbonic oxide gas has exactly the same properties as the white or light-giving flame when it is burning in a cylinder of wire gauze, except that no water is formed in the combustion, as hydrogen gas is not present.

I now enter upon the subject of inquiry in respect to the nature of the opaque portion of the flame, marked 2 in the diagram.

Into a piece of wire gauze (vide diagram)
I inserted a brass tube four inches long, and so first appear- the eighth of an inch in caliber.



It will readily be understood that when I held the piece of wire gauze horizontally, so as to cut off and consequently extinguish the upper half of the flame, the centre or opaque part of inflammable gases not being ignited, would be conducted up the brass tube in the manner of a chimney. When this was neatly and steadily performed for a minute, I could readily ignite these gases as they spring from the centre of the flame, and I always observed that the flame at the top of the tube was re-markably brilliant. Upon conducting these gases into a tube of glass open at top and bottom, I was enabled to collect a sufficient quantity thereof for experiment, and I found that it consisted of the pabulum flamme, above mentioned,-that generally the olefiant gas was in excess, and hence the seconds. strength and beauty of the flame. In all found no oxygen gas in this opaque portion of the flame. Indeed, it could not be expected to be found there, because, as I have stated above, this portion of the flame is not in a state of ignition (which would not be the case did it contain oxygen), and because in the combustion in the body of the wick, which converts it into a state of charcoal, all the oxygen contained in the tallow, wax, or oil, is expended in this combustion.

We now come to the yellow-white or light-giving portion of the flame (3, 3, 3). This fiame surrounds the opaque or central portion of the flame, except at that part at which it comes into contact with the base of blue flame. This flame, as may now be readily understood, is composed of the substances above-mentioned contained in the centre or opaque portion of the flame. In a word, this is the only true light-giving portion of all flames, and has its depend-ence upon the invisible atmosphere (4. 4. 4) tubes, which project from a bulb, into the which surrounds it, and to which I must latter of which lime-water is poured (by a now advert.

Surrounding the light-giving fisme, and the base of blue flame, we always find an the tubes to any part outside the invisible flame. This favisible flame will, in flame, is such a me some degree, become visible when we cut a black card into the exact form and size of

the light-giving fame, and, in an otherwise dark room, completely edipes the light giving flame. In such case, though fiame be scarcely visible, we may observe that it is uniform throughout, and is abou the eighth of an inch in thickness. This invisible flame is of the greatest import ance, for without it we should have no As whatever.

From numerous experiments with the wire-gauge and brass-tube apparatus, I am satisfied that, at every point, highly heater free carbon is attracted from light-giving flame, and is burnt in the atmospherica air surrounding the flame on all sides, and which air is at all times moving in a curren over the flame, from below upward, so that as fast as the atmospherical air affords sufficient oxygen for feeding this invisible flame, it, viz. the heated surrounding atmosphere, is carried upwards, by reason of its expanded state, effected by the intense hear at all times given out by this invisible flame

This invisible flame instantly fuses fine brass wire, which the white or light-giving partion, in some instances, requires a considerable time to accomplish. I am wel assured that this invisible flame is perfect throughout, as I have examined it carefully with powerful lenses; and, also, that by the great heat which it gives out, the inflammable gases of every description are burnt, and that without it, flames of every description could not continue for three

When we blow upon any flame, with instances I found a considerable quantity of heated air, we drive away this invisible or free carbon suspended in these gases. I heat-giving flame, and if we continue to blow, we next drive off the white flame, and, lastly, the centre, or magazine of inflammable gases, and thus mechanically extinguish the flame, but not by the current of "cold air," as Davy and others after him supposed. Of this more hereafter.

Over the invisible flame we have another atmosphere (5, 5, 5, 5), of which I will now give some account. The smallest engraving represents a glass apparatus exactly of the same size as here represented.



small funnel), which is represented by dividing line. I hold the aperture of a nes through the He

remain steady, in the glass bulb. I suite of er, in other words, the light will be allow this burrent to be established for a few settled and then place the fore finger of the right fished upon the aperture of the suite fished upon the aperture of the suite fished upon the speriture of the sum of the same mentioned above, we shall find that the had been next to the flame. I now very cautiously agitate the lime-water contained in the bulb. In all instances I have uni-form found, that the lime held in solution in the lime-water became visible as a carbonate, by reason of its union with the carhonic-acid gas, conveyed by this glass apparatus from the atmosphera immediately surrounding the invisible flame. This at-mosphere of carbonic-acid gas I estimate at one-tenth of an inch in thickness.

As mentioned above, this atmosphere is carried upwards as fast as it is formed, for the reasons there given. Hence the necessity of the constant supply of oxygen gas which our atmosphere affords, and hence the brilliant combustion which takes place when mation or nonformation of this invisible

The invisible flame is destroyed when we the cooling power of the wire gauze. hold any incombustible substance against it, formed, and when we press the incombus- if trust, he entertained. tible substance forward at that place, the Having visited several very "fiery coal-yellow or light-giving flame is again de-stroyed, and so on until the light be totally hewing coals they seklow cast an eye to extinguished or destroyed. When we ar- their safety-lamps, and if they did the dense the flame, we shall find that a consider-observing the phenomenon of fire-damp able portion of free carbon will be precipitated upon the incombustible agent. When there is, in nineteen cases out of twenty, no we place an extinguisher upon any flame, augmentation of light when fire-damp hurra we will find that it does not come into in a Davy-lamp, as I have had reason frecontact with the flame, even though it quently to remark. Besides, if fire damp be extinguished, because a sufficient portion of oxygen gas is not allowed for the wire gauze becomes oxydated, and, falling formation of the invisible flame. These in pieces, cannot prevent the flame of firephenomena take place with flames of all de-damp from passing. Should an accident, scription into which carbon enters. I need such as any pitman's working-tool, unwitscarcely remark that the purer the atmo-apheric air, and the greater the portion of the Davy-lamp, during the prevalence of carbon which enters into the composition of fire-damp in a coal-mine, the flame of course the above named gases, the more powerful, would pass thereby into the atmosphere of cateris paribus, will be the combustion or ex- the mine; or should any part of the wire

as Sir H. Davy recommended to be cm- source of danger arises from the following ployed in his saiety lamp), to any flame in caux: When the five-damp is mixed with which carbon is burnt, we shall thereby prevent the formation of the invisible flame within mine, the flame in the Davy-lamp burns so the wire gause, and another invisible fiame steadily, and with such power, that should

hand upon the aperture of the tube which fame (no matter of what description it may

be) will pass the wire-gause barrier. Sir II. Davy, and, after him, many eminent chemists, supposed that the prevention of the passing of flame by the wire gauze which he employed in his safety-lamps, was effected by the "cooling power" of the wire gauze, but this is not the case, as my experiments in this paper testify.

We know, from what I have stated above. that if the invisible fame be prevented from being formed by the above-named agents, so that there may be a deficiency of oxygen gas in Davy's safety-lamp, combustion cannot be continued, and hence the comperative safety afforded by this lamp. But it is needful to assert and maintain that the forinflammable substances are burnt in oxygen flame accounts for all the phenomena which that distinguished philosopher referred to

The more this position is known, and, and, consequently, the yellow flame recedes indeed, I may say, the more that my expeat that point, or, rather, is destroyed. In-riments are tried by competent judges, the stantly afterwards a new invisible flame is greater assurance of their correctness will,

rive at the opaque or centre portion of atmosphere of coal dust would prevent their plasion of these gases.

When we hold a piece of wire-gauze web, of from 28 to 30, both warp and woof (such sion of the coal-mine would follow. Another will form mearer the centre of the light-giv- the pitman either madvertently, or through e. If we now follow the light-giving fath, the wire-gauze web, we shall mine, we know that the flame of fire-damp would in such case pars out from the wire-gause cage of the Davy-lamp. It will now appear presumptanes in me to assert that my newly-invented apparatus, being exceedingly simple and easily to be understood will obviate the dangers pointed out above, as I have certificates from several of the most respectable persons concerned in coal-mining, who spontaneously conferred these kindnesses upon me. Nor have I in any instance experienced the least opposition to my views, and the application of my discoveries, for preventing acci-Several eminent persons concerned in the management of coal-mines, and who have not yet tried my new safetylamps, have given me upon inspection their approval of them in the most satisfactory terms, and I have reason to expect that in addition to those first-rate coal-mines in which my safety-lamps have been tried, approved, and used effectually, managers of other coal-mines will, as may seem suitable to their convenience, adopt them. I may remark, en passant, that when the wire gauze in a Davy-lamp is more open in its nation of the phenomenon.

use in the coal-mines of the north of England, I considered it imperative upon me to add to the Davy in use the safety shield, so that the expense of new safety-lamps may be avoided. I am informed by all persons using my safety-lamps, that the wire which I employ for supporting the safety cylinders, stands to their satisfaction, when placed over the flame of the oil-lamp in the wire Sunderland, Nov. 5. 1835.

catastrophes which are so constantly occurjust been issued. We shall shortly examine tality of males under the some parts of the document, which ex-ends exceeds the mostality to 360 folio pages.

LAW OF MORTALITY

EACH COUNTY OF ENGLAND.

By T. R. Edmonds, Esq., B.A., of [finity College, Cambridge.

THE knowledge of the laws which regulate the collective vitality at different ages of the population in various districts of England, is evidently an object of the highest interest to physiologists. When those laws are established, and when the peculiar circumstances of each locality have been investigated, we may reasonably expect soon to arrive at a knowledge of some of the chief causes affecting the prolongation of hutexture than in the proportion of twenty- man life. Having minutely examined the cight to thirty, in both warp and woof, as great many of facts accumulated in the eight to satirty, in note warp and woof, as great mass of facts accumulated in the Davy himself proved, we shall find that the English Population Returns of the years 1821 invisible flame will, by such apartures of invisible flame will, by such apertures or and 1831, I can speak with confidence of the meshes, be permitted to be formed outside high value of the information which they the wire-gauze cylinder, which cylinder, in contain. The results from one hundred scthat case, cannot be considered a barrier to parate observations of males and females, that case, cannot be consistent with each other, and in har-power" is out of the question, and, as in all mony with previous observations, when other cases, does not afford the true expla-viewed in connection with the new theory of As I have not drawn up this paper for 605 and 614 of THE LANGET. There exist, the perusal of the learned readers of THE however, in different localities, considerable LANCET, in order to show the value of my variations in the mortality at different ages, new safety-lamp, but for the advancement and in the relative mortality of the two of science, I will conclude by remarking, sexes. The causes of these variations, whethat by the use of my new safety appa- ther dependent on atmospheric or other exratus, all the contingencies which are men-tioned above in respect to the Davy may on original peculiarities of individual con-be avoided; and as the Davy is in general stitution, is a subject well worthy to everstitution, is a subject well worthy to exercise the ingenuity of physiologists.

Before proceeding to the general investigation of the subject, it may be interesting to state a few of the principal results hercafter to be established. In comparing together different counties, the characteristics of each peculiar law of mortality are marked by the mortality in three principal divisions cage, but the moment fire-damp burns of age; namely, in the period under five within the cylinder of wire gauze, the piece years of age, in the period between fifteen of fine wire is fused, and the whole cage is and sixty, and in the period above sixty instantly surrounded by the safety cylinders. years of age. In all counties, out of a given number living above the age of sixty years, The printed Minutes of Evidence, and the same. In some counties the mortality be-Report of the Parliamentary Committee tween the ages of fifteen and sixty years is appointed to inquire into the lamentable nearly half as much greater than in many nearly half as much greater than in many other counties. In some counties, out of a ring in the Mines of Great Britain, with the given number born, nearly twice as many view of succertaining the means of preventing the recurrence of similar accidents, have other counties. In all counties age, in the propo

a the galdity of counties at ages greater from the total assumed by Mr. Rickman than sixty grace, the mortality of males selonly one-twentieth part.

Som exceeds that of females more than three It is certainly highly desirable that the per cent. In the majority of counties the mortality of males between the ages of fifteen and sixty years is less, in a small degree, than the mortality of females. The most remainable result presented by the population returns, is the fact that all the counties wherein the mortality of females between the ages of fifteen and sixty years is at a maximum, are found on or near the same straight line. A low mortality between the ages of fifteen and sixty years is the best index of a healthy population, because the individuals of this class are of much higher political value than the individuals under five years or above sixty years of age. As an index to the healthfulness of a locality, the law of female mortality is to be preferred to that of males, because the various occupations of the latter may exercise an important influence on the mortality. The line of greatest mortality of females between the ages of fifteen and sixty years, is a central one, running in a north-west direction The most from Brighton to Liverpool. healthy counties are those most distant from this line, with very few exceptions.

The materials on which the present obthe ages of the dying in all England and Wales during the eighteen years 1813-30, combined with one enumeration of the living, and their ages made in the middle of the year 1821. The only important defect in these materials is the omission of a considevable and uncertain number of deaths. The returns made show the number of deaths which have been entered in the parish registers only; and we are left with very little information respecting the numbers omitted through negligence, or omitted because buried in the grounds of dissenters, or in private burial-grounds. Mr. Rickman, who compiled the returns, estimates the deficiency in the deaths to be 8 per cent. less than the true number for the whole of England and Wales. The results which I am about to give for thirty-nine counties of England, are founded upon the assumption that the registered deaths are deficient ten per cent. from the truth. I have supposed that, out of every twenty deaths which have occurred, one is omitted through negligence, and another because the burial occurred out of the church grounds. In the counties of Middlesex, Surrey, Monmouth, and in Wales, have estimated the deficiency at 20 per ent. Mr. Rickman having expressed his that the deaths are more deficient in in other districts. The consegy for the whole of England smount to 121 per cent.

It is certainly highly desirable that the number representing the absolute annual mortality at all ages should be correctly ascertained. I believe it to have been ascertained within 5 per cent. of the truth. But even if it should prove defective to the amount of ten per cent., the value of the results hereafter stated will be very little affected thereby: for they would in that case equally well indicate the relative mortality at different ages of life, and in different localities, which is the only important question to physiologists. The materials supplied enable us to establish, beyond dispute, the relation subsisting between the mortality at one interval of age, and the mortality at every other interval of age. If the absolute mortality at any one age, or at all ages, in the aggregate be known, the absolute mortality at every interval of age is also known.

In order to obtain the law of mortality prevailing in each county of England during the eighteen years 1813-30, the facts requisite are, the total number of deaths occurring during that period, distributed in quinquennial or decennial gradations of age, together with the mean population who have been alive during this period also distributed servation is founded consist in a return of according to the same intervals of age. Dividing the number who have died in any interval by the mean number who have lived in that interval, we obtain the exact number who have died in eighteen years out of a given number constantly living in that interval. A series of numbers thus obtained for each consecutive interval of age would represent the true law of mortality of the population observed. Dividing the results by eighteen, we should have the law expressed for one year, in which form it is most easily compared with the results of other observations. If the results be also multiplied by 100, we should arrive at that form of expressing the fact which is adopted by the best authorities. For example, in the following table the mortality of females in England and Wales, during the eighteen years 1813-30, between the ages of fifty and sixty years, is stated to be 2.16, which is intended to represent the fact that this is the average number of deaths occurring annually for every 100 persons constantly living between the ages of fifty and sixty years. If the materials had been perfect, this number would have resulted from dividing the dying 132,918, by the living 352,160, and dividing the quotient by 18. The result of these operations however is 2.10, which differs from the number above stated, in consequence of necessary correction having been introduced for defects in the materials.

Having stated the nature of the materials it, the estimate of as they would be if they were complete, it is of deaths which remains to state the degree and manner Fire total, differs in which they are defective from the true

enumeration of seamen would be very little years, has not also been correctly assumed. diminished by the fact that the same sailors. The present observation would have been do not always continue in the same port; more complete, if the enumeration of the because their places are usually supplied by living, according to age, had been made at seamen of some other English port, or by the end of the year 1821, which is the midforeign seamen. After deducting the sailors dle of the period of observation. The time and soldiers on foreign stations, I have es- of enumeration appears to have been fixed timated the amount of that portion which on no settled principles, and it seems to have encountered risk of death in England and been a mere accident that the time chosen Wales at 160,000, so distributed that was so near the time at which the counter-100,000 are below thirty years of age, and tion ought to have been made, in order to 60,000 between the ages of thirty and sixty render the observed number and ages of years. The effect of this correction, is to deaths for eighteen years of the greatest reduce the apparent mortality of males at value. The return of births and deaths is all ages, from 2.23 to 2.17 per cent. per made up to the last day of December in each annum.

essential facts to be ascertained, is the mean the population living at any time, and the number who have been alive at each inter- births and deaths, the enumeration ought to val of age, during the period of observation, have been made at the beginning or end, or during the eighteen years 1813-30. The and not in the middle, of the year. In de-true mean population would certainly be in-fence of this acknowledged error, we are dicated by eighteen annual enumerations of told that the middle, of the year was chosen, the living at each interval of age. Four because the days were longer! If the enumerations of the living and their ages, lation had been enumerated at made at intervals of six years, would, how the year 1821, the number ever, have been supply sufficient, in the been about \$\frac{1}{2}\$ per continues of all qualified piersons, to determine number given in the true mean population. But in the pre-

standard. The most important defect, arie- sent case, we have only eas easily tion of ing from a considerable proportion of deaths the living, and this made made to the best not being entered in the parish registers, time, and yet there seems no reason to has been already alluded to. This defect doubt that it is nearly as valuable as eighteen concerns the absolute mortality only at each enumerations would have been. It appears age, for it may be presumed that these to be a fact founded upon experience, that in omitted deaths would have been distributed any extensive population, the increase or according to age, in the same manner as the decrease of the number living in size de-total of deaths whose ages are specified. If cennial interval of age, is so uniform total or deaths whose ages are specified. If cennial interval of age, is so uniform the defect at all ages be assumed to be 12½, throughout a period of eighteen years, that per cent. Two minor defects in the of the ninth year of the observation, is a materials consist in the want of specification of the ninth year of the observation, is a materials consist in the want of specification of an enemproportional-detween the number living of the ages of a small proportion of the nine years before, and the living nine years total number returned as living and as after. The proof of this first is contained dying. The ages of one-eighth of the living in the English population, and of one twenty-fifth part of the English population of the morthest contracted deaths have not here are significant. the registered deaths, have not been specified. tality in England and Wales during a period The correction necessary on these accounts of seven years, 1618-24. The results of the at each age, is the same as for the total at observation for seven years, agree exactly all ages. In addition to these unavoidable with the results of the observation for eigh-defects, the enumeration of the male sex is teem years, the mean population at the difdefective, by the entire omission of the ages ferent ages in each case, being assumed to of the military and maritime population, be the number ascertained to be living in and we have no information given respect; the middle of the year 1821, or in the mid-ing the total numbers of this large class, dle of the respective periods of seven and resident in, or attached to, each county, eighteen years. The absolute mortality dur-We are merely informed that the army, ing the seven years, was 2 per cent. less at navy, &c. belonging to Great Britain, con- every age than the absolute mortality during sisted of 300,000 men. This defect ought the period of eighteen years. The relative not to have existed, for it would have been mortality in the two cases is identical, as it easy to obtain the ages and number of the ought to be if the materials of the two obsoldiers and marines resident in England, servations were complete; and as there is and attaching them to the summaries of their no reason to suspect the mean population respective counties. There would probably for the period of seven years not to have have existed little difficulty in obtaining a been correctly assumed, there seems to be similar enumeration of the sailors belonging no room for doubting that the mean popular registered vessels. The utility of such an lation for the longer period of eighteen

year; and in order to have the means of in-In the present inquiry, one of the two stituting any accurate comparison between

relation connecting together for males, and 13.894 per cent. for females, number ought probably to be near 3.15. in order to obtain the true number of deaths.

tality of females at all ages, from | For large towns, I have assumed the necessary increase to be 20 per cent. for each sex; it having been always supposed that the mortality at different ages in large towns, the deficiency is considerably greater in is of a totally distinct character from that towns than in the country. If a lower deapplicable to the general population. The gree of disparity had been adopted, the relative mortality of the two sexes is also minimum mortality, or the mortality widdly different. In the country, the mort tween ten and fifteen years of age, would talify under the age of five years, is only have been less in large towas than in the ten times as great as the mortality between whole territory. The population returns the ages of ten and fifteen years; whilst in contain observations on six towns only, large towns, it is fifteen times as great. In which are of the largest size, and which the country, above the age of five years, the contain a large proportion of sailors and mortality of males exceeds by a very small soldiers, of which no enumeration has been mount the mortality of males exceeds by a very small soldiers, of which no enumeration has been amount the mortality of females; and be-imade. Having no materials for making a tween the ages of ten and fifty, the mortality is satisfactory estimate of the deficiency, I have of females even exceeds that of males. But made no correction of the apparent results; in large rowns at every interval of age, the so that the mortality of the male sex in the nortality of males considerably exceeds that six towns between the ages of fifteen and of females. For the whole of England and sixty years, is represented considerably wales, I have assumed that the registered higher than the fact. Instead of 3.39 for deaths are to be increased 13.947 were on: deaths are to be increased 13.947 per cent. the mortality of males at all ages, the true

TABLE, exhibiting the Materials from which the Law of Mortality of the aggregate Population of England and Wales has been deduced.

Hetween Ages.	L	iving on 28t	h May, 181	11.	Dying in 18 years, 1913-30.					
	In England	and Wales.	In Six La	irge Towns.	In England	and Wales.	In Six large Towns.			
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Pemales.		
0 - 5	791,579	774,689	24,716	24,330	736,039	622,903	36,449	31,744		
5-10	693,858	682,457	21,853	21,940	87,263	79,732	3,817	3,448		
1015	603,613	569,366	16,759	17,982	52,324	52,155	1,673	1.544		
15 - 20	509,586	535,569	12,424	17,752	63,405	71,535	2,033	2,089		
20-30	755,780	901,338	18,709	31.338	144,586	163,140	5,622	6,001		
3010	593,662	649,507	19.447	24,991	123,996	140.848	5,757	5,855		
40 ~ 50	482,329	500,977	16,220	18,219	129,675	*129,939	5,880	5,430		
5060	342,201	352,160	10,152	11,913	142,843	1.2,918	5,545	5,317		
6070	231,509	249,184	5,770	7.439	*182,207	179,251	5,991	6,223		
70-80	115,032	124,648	2,499	3,572	202,208	211.028	5,314	6,312		
8090	29,587	36,315	616	912	116,726	136,085		3,636		
90 - 100	2,253	3,280	44	86	14,486	21,304	300	597		
bove 100	60	129	5	4	637	1,263	20	48		
ger specified	5,151,032	5,379,619	149,214	180,508	1,996,395	1,942,101	+80,907	78,244		
iges omitted	683,114	765,090	2,961	4,389	75,199			_		
otal	5,834,166	6,144,709	152,175	184,897	2,071,594	2,022,366	77,954	74,883		
stimated }	160,000			_	288,930	281,000	15,591	34,977		

is a small arithmetical error, amounting to 200, in each of these numbers, as lickman.

> whose ages are specified are in excess, because of the deaths having been included.

Table, exhibiting the Average Annual Deaths for every Hundred Persons of Thirteen Gradations of Age, according to Nine distinct Observat

Between Ages.	Eugland & Wales 18 Years.		Engiand & Wales 7 Yrs., 1819-24.		Six Towns 18 Years.		Sweden, both Sexes.		Table of	Belgium bah
	M.	F.	M.	P.	M.	F.	21 Years, 1755-75.	20 Years, 1776-95.	Mortal- liy."	€ (hes, 29,
0- 5	5.35	4.60	5.29	4.56	9.21	8.06	9.41		6.73	6.58
5 - 10	.72	.67	.70	.65	1.09	.97	1.93	1 36	.99	.87
10- 15	.50	.52	.49	.53	.62	.53	.66	61	.65	.54
15- 20	.72	.76	.69	.76	1.02	.73	.76	.70	.75	.66
20 30	1.01	1.04	.96	1.01	1.88	1.18	.92	.89	.93	.91
30-40	1.14	1.24	1.09	1.21	1.85	1.45	1.22	1.16	1.25	1.00
40- 50	1.49	1.49	1.44	1.48	2.26	1.84	1.74	1.61	1.68	1.36
50- 60	2.34	2.16	2.26	2.08	3.41	2.76	2.64	2.39	2.40	2.17
60 - 70		4.12		4.02	6.48	5.17	4.81	4.93	4.83	3.85
70- 80			9.95	9.49	13.28	10.92	10.23	10.41	10.04	9.09
80 - 90			22.11	21.27	25.40	23.84	20.78	19.74	20.18	17.88
90-100			36.50	36.78	42.57	42.88	39.41	35.13	39.85	30.47
Above 100				58.61	24.97	74 12	-	_	70.00	-
All Age	2.17	2.07	2.12	2.03	3.39	2.68	2.89	2.68	_	2.27

The apparent mortality of males in all England and Wales, has been diminished by .09 between 20 and 30, and by .06 between 30 and 60 years of age, on account of the unenumerated maritime and military population. In the six large towns a greater correction is necessary, but none has been applied.

mortality deduced for females between the mate is founded upon a probable fact, and ages of fifteen and fifty years, may be leads to results in harmony with all other living, be understated to the amount of two correctly given, and the ages of the living only are understated, then the apparent mortality between thirty and forty will be correct; whilst the mortality between estimate of the number of births and deaths twenty and thirty will be lower, and the in his parish unentered in the register. A mortality between forty and fifty higher than the truth. Adopting the intermediate supposition that the ages of the dying are understated to only one half the amount deaths of which there exists an estimate mortality under the age of forty will be very nearly correct.

It has been already remarked, that the numbers representing the absolute mortality at each age in my present tables, are founded upon the assumption that the registered deaths are deficient twelve per cent. from the population. This proportion the truth, and that Mr. Rickman has esti- regarded as a valuable mated this deficiency at eight per cent. The supposition that the estimate of Mr. Rickman is not founded lation is due entire upon any fact, and leads to results contra- over deaths, the

It might be supposed probable that the idictory of facts which he admits. My estisubject to error from the disposition of stated facts. Mr. Rickman agrees with me females to understate their ages. The error in supposing that the increase of the Enis apparently of very small amount. If the glish population is entirely due to the excess ages of all the females, dying as well as of births over deaths, or that the immigration from Ireland compensates the emigrayears, the mortality at each of the three tion from England. Assuming this as a decennial intervals from twenty to fifty fact, the truth of my estimate and the error years will be five per cent. higher than the of Mr. Rickman's are easily demonstrable fact. But if the ages of the dying are by means of the proportion stated to exist between the unregistered births and deaths.

In the population inquiry, questions were addressed to each clergyman requiring an portion of the clergy made such an estimate. another portion offered no estimate. The absolute number of "unentered" births and that the ages of the living are, the female is evidently of very little value, because we are ignorant of the proportion of the total population from which this estimate was obtained. It may, however, fairly be presumed that the proportion of unentered births to unentered deaths would have been the same for the whole, as for this

tion is known. Mr. Rickman's estimated unentered births and deaths is 551,200, the deficiency in the deaths is, however, de-increase of the population to be accounted rived from the apparently groundless as for as stated above, sumption, that the total deficiency in the deaths was just double the number of which during the eighteen years will then be an attimate was returned. Because the 3,956,168, and the true number of deaths partial estimate amounted to four per cast. 2,227,956. The female population alive at the middle of the eighteen years, or at the made an estimate, the deficiency would end of the year 1821, was 6,198,200. Conhave been eight per cent. He then shows, sequently the average annual deaths of as a consequence of this assumed deficiency, females was 2.06 per cent., or one out of that the unentered births were to the un- 48%. The average annual births of females entered deaths in the proportion of four to was 3.55 per cent., or one out of 28. The one. He entirely disregards the fact elsewhere stated, that the mentered births were cent., and the deficiency in the deaths to
to the mentered deaths as two to one, which 12 per cent. According to Mr. Rickman, proportion would have indicated a defect of the deficiency in the births was 19 per cent., twenty per cent. in the deaths, as I have and in the deaths 8 per cent. According to shown in No. 614 of THE LANCET.

partial estimate of the different clergymen is that of 172 to 100: according to Mr. indicates that the number of uncutered Rickman the proportion is that of 175 to indicates that the number of unconversely births was just twice as great as the number of unconversely deaths. If London be The population returns of 1831 abound ber of unconversely between the unconversely with contradictory statements made by Mr. ber of unenered deaths. It formed better the proportion between the unit with controllectory statements made by Mr. entered births and deaths was that of three Rickman, founded upon the obviously false to one. This best proportion I have adopted hypothesis of the population having been as true for the wirds of the latest and wholes, "stationary," and that the annual births because it is applied by on a tanks of bad been equal to the annual deaths for a estimated deficiency in the deaths is founded, cal periodical he has recently bestowed a I have confined myself to the observations great deal of unnecessary pains on the on the female sex, because the increase of demonstration of his own errors. He appets for female southation is capable of being pears to claim praise for detecting errors more correctly determined than that of the which could never have been committed by male population.

The total number of registered births of ject discussed. He is greatly mistaken if females in England and Wales during the he supposes that any writer of repute has eighteen years 1813 30 was 3,129,368, and said a word to the effect that the "hypo-of deaths, 2,022,366, which yields an excess thesis of the population being stationary,"

estimate, amounted to 357,168 births and 170,930 deaths of both sexes. For London, the estimate was 40,498 births and 65,934 32 die out of 175 born, which represents a deaths. Consequently for all England and mortality of 184 instead of 32 per cent. Wales, excluding London, the partial estiI have considered it unnecessary to contente was 316,670 births and 104,996 struct a table rigorously representing at
annual intervals the law of mortality which on of three to one.

The state of the

entered highs and deal is a known quant three times this number, or 826,800, will tity and to absolute number of unentered represent the corresponding deficiency in births or the second when this proportion is the births. The difference between these

The true number of births of females my estimate the proportion existing be-For the whole of England and Wales the tween the total births and deaths of females

the total population, and because the esti- long period of time. Mr. Rickman does not mute for London is not much to be relied appear to have thought that there was any upon. The determination of the absolute absordity in supposing 175 to be equal to mortality at all ages being a question of 100. At a late hoar, and since the publicagreat public interest, it may be useful to tion of the returns, he has been made seneathly the chain of facts upon which my sible of his error. In the pages of a medione possessing any knowledge of the subof hirths over deaths of 1,107,002, instead was applicable to circumstances like those of 1,658,202, the true increase of the female of the English population. One specimen population in that time. There remains, of Mr. Rickman's conclusions will be suffitherefore, the number 551,200 to be accient to satisfy the reader as to their value. counted for by the excess of unentered Because out of 100 deaths of females in births over unentered deaths.

England and Wales at all ages 32 occur be-The total number of "unentered" ob-low the age of five years, he has stated as a tained from those parishes which made an fact that out of 100 born, 32 die before they complete their fifth year. The true statement is, according to his own showing, that

> occurred in England during the period of named that the true defi-lemales for all Eng-little value, because it would differ in an to 275,500, then insignificant degree from a theoretical table

which I published more than three years years. If the portlation had been sta-moreover, there is reason to believe though the provided in the provided proves the provest of these numbers and provest the provest of the provided provided provest of the provided upon general principles, will be a better indication of future facts, than a table exactly representing one fact out of a great series of facts. The mortality of the female population of England is represented as near the truth as can be desired for any useful purpose, by my table of "Mean Mortality, when the limiting age of the period of "infancy" is taken at seven years. In the published table I have fixed this limit at eight years, which is the true limit for the male population of England. To adapt this table to the female population no alteration has been made except at ages under eight years. The results of this altered table agree very nearly in three important points with the results of the English observations for females. According to the table and according to the fact, the mortality between the ages of five and ten years is 20 per cent. greater than the mortality between the ages of ten and fifteen years. According to the table, there die annually 4.47 out of every According to the fact, when the registered deaths are assumed to be deficient 124 per cent., the mortality of females under the age of five years was 4.60 per cent. According to the table, out of 100 born 19.5 die before they complete their fifth year of age. According to the fact when the registered births are assumed to be deficient 21 per cent., out of 100 born, 19 die before they complete their fifth year. The near coincidence of these results is satisfactory evidence of the general consistency of the materials, and of the conclusions deduced from them. It may be useful to state that the "expectation" or mean duration of life, at birth is 43.70 years according to the table of Mean Mortality, when the limit of "infancy" is fixed at seven years. If the English female population had been stationary, or if the annual births had been equal to the annual deaths for a long period of time, there riod." In every population, whatever may would have died annually at all ages during be the absolute mortality, the relative morthe eighteen years 1813-30, one out of every 43.70 living. But on account of the increase of population, the actual annual mortality In the Table of Mean Mortality I have fixed was only one out of 481.

On the supposition that the registered deaths are deficient 12‡ per cent., the mortality of the English population between the seventy and eighty years of age, agrees very nearly with that of the table of Mean Mor- mortality between forty and fifty years, in tality. According to this table, 204 living the proportion of three to two, as it is also between the ages of sixty and seventy are in the Table of Mean Mortality. Notwithreduced by deaths in ten years to 100 living standing this extensive coincidence, the pobetween the ages of seventy and eighty sition of this limit is not to be regarded at years. According to the fact stated in the having more permanency than the post returns of 1821, there were of both sexes of the inferior limit. 201 living between sixty and seventy for year in the position of the every 100 living between seventy and eighty volves a change of

coincidence of these numbers and prove that the absolute mortality at the interval has been truly stated, and is represented by the Table of Mean Mortality. If the absolute mortality is correctly stated at any one interval, it is correct at every interval of age, because the scale of relation connects together the mortality at different ages is indisputably established. That the population was stationary at the period in question, or that the living in 1821 between the ages of sixty and seventy proceeded from the same number of births as the living between seventy and eighty, appears to be highly probable. At least this was certainly the case in London, and there is no ground for supposing that the rest of England did not resemble London in this respect. Those living in 1821, between the ages of seventy and eighty years, were born in the 'ten vears 1741-50, and those living between the ages of sixty and seventy were born in the ten years 1751-60. Now, according to the London Bills of Mortality, during the ten 100 constantly living under the age of five years 1730-39, the number of haptisms amounted to 170 thousand. In the ten years 1740-49 they amounted to 146 thousand; in the ten years 1750-59 they were 148 thousand; and in the two following decennial intervals the haptisms amounted to 160 and 173 thousand respectively. It may hence be inferred as highly probable that the English population in 1821 was decreasing between the ages of eighty and ninety years, stationary between sixty and eighty, and increasing under the age of sixty years.

The new theory of mortality is founded upon the discovery of three numbers, respectively presiding over three well-marked periods of human life-before, during, and after, the existence of the procreative power. To construct a theoretical table, the absolute mortality at any one age must be known, together with the position of the inferior and superior limits of the " procreative petality at different ages is the same, when the position of these two limits is the same. the superior limit at the age of fifty-five years, which happens to be the true limit in each of the nine independent observations above stated. In all these observaages of sixty and seventy, and between tions, and in every county of England, the mortality between fifty and sixty is to the

371

MR. TAGERT'S CASE OF GANGRANA SENILLS.

tive mortality; the se variation in the and according to theory, as may be perposition of the inferior limit involves a ceived by any person without calculation. Under the age of one year, the theory is change cast per cent. in the resauce mor-tality. It constructing the Table of Mean Mortality, I ventured, in opposition to all direct evidence on the subject, to put back the inferior limit one year, and thus effected a diminution of 32 per cent in the rective mortality under the age of nine years. My prediction has been confirmed, and more than confirmed three years after its publication, by the present observation on the English population. According to all previous observations, the inferior limit, mortality, was at nine years-the mortality few weeks immediately succeeding birth. between five and ten years being always twice as great as the mortality between ten and fifteen years of age (as it is now in the large towns of Eugland), which agrees with theoretical tables wherein the inferior limit is fixed at nine years. In the table of "Mean Mortality," I assumed the inferior limit to be at the age of eight years, which is the limit now applicable to the total male population of England; the mortality between five and ten years being 50 per cent. greater than the mortality between ten and fifteen, according to fact and according to the table. But for the female population the limit is at the age of seven years, for the mortality between five and ten is only 20 per cent. greater than the mortality between ten and fifteen, according to fact and according to a table wherein the age of seven years is assumed as the limit. In Belgiam the position of this limit is now at the age of eight years and a quarter for both sexes. The grounds of my accomplished prediction were the following :- From the ages of the living under fifteen years, and from the rate of increase in the births, indicated by the population returns of 1821, I because convinced of the fact, that the mortality under the age of ten years was less in an extraordinary degree than had ever been supposed to exist. I knew also that the diminution in the mortality during infancy was amply sufficient to account for the reduced mortality in England at all ages. Knowing then that the mortality was considerably diminished under the age of ten years, and not diminished above that age, I accounted for it in the only way consistent with the new theory. The truth of this theory has now been confirmed by the highest order of human evidence, for it has enabled me to predict the precise manner in which a new and extraordinary diminution of the relative mortality in infancy has been effected.

In every county of England the proportion of deaths occurring at annual intervals tween the ages of one and six years, agrees

1

correctly applicable to the county of Cornwall only. In all other counties, the proportion of deaths under the age of one year is much greater than that indicated by the theory. Four years ago, in the preliminary observations to my "LIFE TABLES," I expressed an opinion that the theory would not represent the fact in all cases under the age of eight weeks. I believed then, as I believe now, that the high mortality under the age of one year will be found to consist or the mean age of attaining the minimum in an excessively high mortality during the

As the subject which I am discussing naturally divides itself into two parts at the point now attained, I shall here arrest my remarks until the publication of another Number of THE LANCET will admit them to appear.

46, Regent Square, Nov. 7, 1835.

CASE OF

GANGRÆNA SENILIS,

IN WHICH THE POST-MORTEM EXAMINA-TION DISCLOSED A

COAGULUM OF FIBRINE ADHERENT TO THE AORTA.

To the Editor of THE LANCET.

Sir. - If you consider the outlines of the following case worthy of being recorded in your truly independant journal, I shall feel obliged by its insertion. It is, in my opinion, calculated, in some degree, to illustrate the pathology of a disease which is too frequently fatal .- I am, Sir, your obedient servant,

W. TAGERT Surgeon to Mercer's Hospital, Dablin.

CASE. - Catherine Strahan, aged 66, of a delicate and feeble frame, was admitted a patient into Mercer's Hospital, on the 25th of September, 1835. She then suffered from distressing diarrhoa, and complained much of pain in the left leg and foot, accompanied by a constant sense of coldness. This coldness, and the pain of the extremity, with occasional diarrhoea, afflicted her about a month previous to her admission. The pain was so urgent as to interrupt her sleep. She attributed her sufferings to rheumatism, and kept the limb wrapped in flannel. She did not suffer from pains elsewhere, but her general health was broken. On admission. Lave stated to he the universal the leg and foot presented a natural appear-The deaths in any two ance, and she stated, that when suffering are always in the from cold, the limb assumed a livid hue to according to fact The diarrhora was relieved by the ordinar; treatment, but the pain and uncasiness of figure, which were thatly elevated, contain-the limb continued unabated, and became ing an earthy or takeous deposit. This daily more urgent. On the 1st of October, almost a week after her admission, a darkish livid bue was observable on the integuments of the left insten, which felt colder to the extended to the outer ankle, and, after two or three days, involved the entire foot. this period there was no sign of vesication about the toes. On examining the femoral artery in the groin, a slight thrill could be distinguished. Its pulsation was evidently weaker than was the pulsation in the opposite limb. The pain was now very severe, with nocturnal exacerbations. The extremity was wrapped in cotton, and oiled silk was placed outside this, and anodynes were administered to alleviate her sufferings. The lividity extended up the limb, day after day, and vesications soon formed on the leg and foot, from which there was scrous oozing. The gangrenous appearance now occupied the entire limb, almost to the knee, but evinced no disposition to extend higher, for about ten days previous to her death. may observe, however, that an isolated gangrenous spot appeared over the patella, and in three days afterwards the thermometer indicated the following temperature :-

Heat of the ward, 68°; Heat of the sound limb, 820; Heat of the gangrened limb, 74°. At this period no pulsation could be distinguished in the femoral artery at the groin.

It is unnecessary to give a minute detail of the daily treatment pursued. It will be sufficient to observe, that it consisted principally of the internal exhibition of the acctate of morphine, with a cautious administration of wine and stimulants, combined with tonics, the extreme debility and unceasing pain being the prominent indications. She sank gradually under her sufferings, which terminated in death on the 22ad of October, nearly one month from the period of her admission into the hospital. The diarrhoea had returned, and continued unchecked for a few days previous to her deccase, notwithstanding the use of the cretaceous mixture, with kino, opium, and other astringents.

Autopsy, ten hours after Death.

Nothing remarkable was discernible either in the thoracic or in the abdominal viscera. In order to examine the large arterial trunks, I had the aorta carefully removed, together with its continuation into the common iliacs, and also the entire of the main arterial trunk of the diseased extremity, with a portion of the internal and external iliacs of the opposite side. On slitting up the aorta, its coats appeared to be healthy in the thoracic region; the internal coat of the abdominal acrta presented a number of whitish spots, of an irregular makes the followings

atheromatous deposition was expensed to the any inflammatory appearance. The acrta at its bifurcation was occupied by a coagutouch than the opposite one. This lividity soon | ln n of fibrine, of a conical shape, three inches in length. The base of the cone was turned from the heart; its colour was a yellowish white, without a trace of red 3louring matter; it was firm in consistence, resisted strong pressure with the finger, and gave to the vessel a solid fleshy feel before it was slit open. It was intimately adherent by its base to the entire circumference of the artery, and could not be removed without tearing the bond of union. The organization of the coagulum was so perfect, as fully to demonstrate that it had existed during life, and had been possessed of vitality. The apex of the coagulum was also adherent to the aorta. Its base, for the extent of more than an inch, blocked up that vessel, and, immediately above its bifurcation, filled the cavity of the aorta so completely as to act as a perfect barrier against the transmission of blood through that portion of the vessel. Coagula of a similar appearance, but not adherent, occupied both of the common and internal iliacs. The external iliac of the right side was healthy, and unoccupied by coagulum. That of the opposite side contained a fibrous plug. The femoral artery of the diseased side was much contracted in its entire course, even to the ham, and was occupied by coarnla of a reddish-brown colour, but of firm consistence. High up in the groin, near Poupart's ligament, the coagulum was intimately adherent to the artery. The popliteal was much contracted, and the posterior tihial was so diminished in size, that it could with difficulty be recognised; it contained no coagulum; the muscles of the gangrened limb were much softened, and were dark in colour. The aorta, and the remainder of the arterial trunk, with the coagula in situ, I have preserved in the museum at Mercer's Hospital.

Remarks .- With regard to the question, Was the congulum of fibrine found in the aorta a post-mortem deposit, or did it exist during life? I have to state, that, independently of any reference to the history or symptoms of the case, I think its existence during life is fully proved by the fact of its organized connection with the artery. It may also be asked, Were the coagula the cause or the effect of the gangrene? Upon this point I shall refer to the following extract from "Andral's Pathological Anaton After speaking of the various wa an artery may become a

occies of obliteration for by congula of brine) has been more requently observed than the fire out no instance of it has as yet been seen in the aorta; it has been repeatedly found in the arteries of the lower extremities, coinciding with the disease known by the name of gangræna senilis, and it is reasous e to conclude that in these cases the abliteration of the arteries is the cause of the gangrene. This much at least is certain, that it is not the effect; for in a patient who lied of gangrene in one foot, and in whom all the arteries of that limb were completely obstructed by solid coagula of fibrine, the commencement of a similar obstruction was found in the arteries of the opposite limb, although not a sign of gangrene was observable in it. It appears to me highly probable that if this individual had lived for some time longer, the arteries of the sound limb would have become more and more obstructed. and that the foot of that side would then have become gangrenous."

The following passage from Dr. Thomson's excellent work on inflammation may not be considered out of place here. In the article "Mortification," he says, "Fabricius Hildanus mentions a case of mortification of the feet and legs which proved fatal to a man in the vigour of life, and of apparently sound constitution, in whom after decease a scirrhous tumour was found surrounding and compressing the inferior cava and norta, just where they are about to divide, to form the iliae vessels, and which by its pressure had prevented the free passage of the blood to and from the lower extremities."

Beclard also was of opinion that the obliteration of the arteries was the cause of the gangreen senilis, as will appear from the following extract from his "Elements of General Anatomy:"—"Contraction and obliteration of the crural trunk and its branches. This is the ordinary cause of the gangrene of the toes, feet, and legs, in old people, the change happening in a part, and at a period, when the arterial twigs themselves, affected by induration, are no longer capable of the rapid augmentation necessary for the establishment of a collateral circulation."

I shall not trespass further on your valuable space than just to observe that I lately witnessed the dissection of another female who died of the same disease, and in whom there were found most extensive ossific deposits in the thoracic and abdominal norta, we well as in the artery of the affected limbs. In this case also the posterior tibial artery of the difficulty of diminished as to be found with diffi-

RYCESS OF

FATTY MATTER IN THE BLOOD. DEFICIENCY OF THE RECTUM.

To the Editor of THE LANCET.

Sia,—I send you two cases of unusual occurrence, the first recommended from the remarkable milky appearance of the blood; the second being a case of imperforate anus, with deficiency of the rectum. By giving them insertion in your valuable journal, you will oblige your obedient servant,

THOS. ROBT. TATHAM, Surgeon. Huddersfield, Nov. 27, 1835.

Case.-April 25th, 1833.-Mr. William Bond, atat. 36, publican, of a florid complexion, rather corpulent, and of a sanguineous temperament. I found him suffering from a severe catching pain in the right hypochondrium, much aggravated upon pressure, on the slightest attempt to take a deep inspiration, and also increased by the recumbent posture. He had headache, the countenance was flushed, and there was a suffused reduces of the eyes, tongue furred, dry in the centre, much thirst, surface hot and dry. Pulse 136, full and hard; urine high-coloured; howels confined. Says he has not been quite well for the last fortnight, having suffered from loss of appetite, disagreeable taste, and "greasy" eructations; did not vomit; complains that his vocation exposes him more to the influence of liquor than is consistent with health.

V. S. ad deliquium animi. Thirty ounces were taken.

- R. Calomel. gr. xij; Pulv. Opii gr. iij. Cons. q. s. Divide in pilulas vj. Capt. 3tiis horis.
- R. Mistur Effervescentiæ, sumend. 3tils horis.

P.m. Pain in the side much relieved. breathes with tolerable ease, can lie down in bed without inconvenience, but cannot take a deep inspiration without pain; skin become moist; pulse 130, softer. The blood as it stands, undisturbed, appears like thick custard; the coagulable lymph on the crassamentum is a quarter of an inch thick, and the serum has precisely the appearance of milk. These peculiarities induced me to submit it to the inspection of Dr. Walker and Dr. Turnbull, physicians, of this town. Dr. Walker visited the patient with me on the following day. Upon drawing off the serum from three teacupfuls of this blood, leaving the crassamentum behind, and mixing with it half its volume of sulphuric ether, it yielded, upon evaporation, upwards of two drachins, in weight, of fatty matter, of the consistence of butter.

sediment in the urine; bowels bave not yet been opened. R. Ol. Ricini zvj. statim sumend, et rep. 6tis horis, si opus sit.

27. Two doses of the oil produced three dark-coloured and offensive evacuations.

May 3. Convalescent. During the last few days more active cathartics were administered, which have restored the healthy appearance of the evacuations.

CASE.—January 16, 1835.—I was sent for by Mrs. Whitworth to examine her male infant, born on the 14th inst., which she had just discovered had an imperforate anus-The infant had been indisposed from its birth, and refuses the breast and all nourishment. It is very restless, almost constantly crying, holds itself stiff, turns blueish, and appears to be threatened with convulsive fits. She attributed these symptoms to uneasiness in its bowels from its not having had an alvine evacuation. The greenish slimy appearance of its urine upon the cloths, led her to make an examination, when she discovered an absence of the natural outlet from the bowels. The raphe, from the scrotum, is continuous through the perineum. There is no vestige of an anus, no doughy feel, nor any sense of fluctuation on making pressure over the parts. Mr. Robinson, surgeon to the Huddersfield Infirmary, accompanied me in the afternoon to see the patient, when we decided upon an operation without further delay. I commenced by making an incision in the line of the raphe a little below the acrotum, and carried it rather beyond what I supposed to be the proper situation of the anus. This incision might be an inch and a half in length. then carefully dissected backwards, to avoid wounding the urethra and bladder, and downwards, towards the sacrum, full one inch from the surface of the perineum, before I reached the gut, which was much distended, the infant forcing very much the whole time. I made a free cut into it, which was followed by a very copious discharge of meconium. I then passed with the greatest ease, and without apparent increase of pain to the infant, my left forefinger into the colon. Oiled lint was placed in the opening. Very little blood was lost in the operation, but blood oozed much during the night. The child, however, continued hearty, and partook freely several times of arrow-root.

February 1st. Doing well. Fed with the spoon; the mother could not get it to suck, and her milk has now disappeared. A little oiled lint, and simple ointment on lint, were used during the first five or six days. Afterwards I made a bougie of tolerable size, and covered it with wax, which is introduced three and four times a-day, allowing it to remain for a quarter of an hour or twenty minutes each time.

10. Up to this day the infant continued municating with

26. Improving; pulse, 126; lateritious to 06 well; it have made water in natural diment in the urine; bowels have not yet quantity, quite olear from feet matter, and passed its stools without much inconvenience. The use of the bougie has been diligently persevered in three and four times a-day; nevertheless the parts have contracted rapidly. Passed per urethram this morning a quantity of fecal matter. Phymosis has come on; the scrotum is slightly or matous; and the perincum is inflamed, swelled, and painful. Bowels rather confined; dejections of a pipe-clay appearance. In consequence of the inflamed state of the parts I desired them to desist from using the bongie for a day or two, and ordered a zinc lotion to be applied to the affected parts, and a dose of castor-oil, and some alterative powders to be taken twice a-day.

13. Much the same; the oil operated freely, takes scarcely any nourishment, very restless; there is now much purulent dis-

charge from the urethra.

15. Takes more nourishment; parts less inflamed; bowels more regular; the bougie is again used, a little bloody discharge follows each introduction.

19. Rests better and takes more food; vet is weaker, and more attenuated; the urethral discharge continues not so severe; the phymosis and wdema of the scrotum have subsided. Dr. Walker and Mr. Robinson called this morning, but suggested nothing that could be of decided relief. The mother, of her own accord, has given it, during the last few days, a little Godfrey's Cordial.

26. Much the same; discharge of fecal matter, per urelhram, continues daily; sero. tum very much relaxed; screams violently at every attempt to make water; the introduction of the bougie causes spasm of the bladder, and a flow of urine,-bloody mucopurulent discharge following its removal.

March 15. Continues to decline; is much more attenuated; the appetite is variable, sometimes very voracious; the artificial opening is more contracted; the other symptoms are as before noted.

20. Dead.

Automy on the 21st; Dr. Walker and Mr. Robinson present.-Body very much emaciated; thoracic viscera healthy. On opening the abdomen, the omentum was found nearly free from fat; the large howels were greatly distended with air; liver much shrunk, small intestines of a shrivelled appearance; stomach and mesentery natural. I detached the scrotum and penis, with the corresponding integuments, from the pubes, carefully divided the symphysis, and separated the bladder from its connection with the inner surface of those bones. Passing a director through the urethra into the bladder, and slitting it open superiorly, I found the qui ing to be a small narrow canal, an inch in length, situated. hind the prostatic pe

tremity of the colonic and gut contained a little blanky muco-pic. ent matter, and cardled feesig it had descended to within if an inch of the surface of the perineum. This portion, judging from the appearances, would soon have been in a highly diseased state.

MODIFIED SMALL-POX

OCCURRING

TWENTY-TWO YEARS AFTER VACCINATION,

Turning on the third day after the appearance of the Eruption.

To the Editor of THE LANCET.

Sir,-1 beg to send you the following case for publication .-

J. S., actat. 51, of short stature, and well formed, possessing general good health, and having scarcely ever known, as he states, "what it is to be ill," was seized with a sharp attack of fever, attended with severe headache, which he attributed to cold. A dose of calonicl, and an aperient, relieved him, but he was unable to quit his bed, on account of debility and giddiness, for ten days, during which period there was occasional remission of the febrile symptoms, which on the sixth day assumed the intermittent form. On the eighth day, two incipient pustules appeared on the hand, suceceded by others on the face and hody. I at first imagined these to be varicella, but the number and character of the pustules on the tenth day were unequivocal. The cruptive fever was severe; about a dozen pustules arrived at maturity; those on the hand progressed regularly, but on the face and some parts of the body they died away before the formation of pus. On the tenth day, those which had maturated became flattened, and were scabbed on the thirteenth. The patient gradually recovered, and was quite well on the fiftcenth day.

On examination of the arm, there appeared two well-defined cleatrices. The vaccination had been perfect, and the patient described it as "a very fine arm." The rise and progress of the pustules were steady and uninterrupted throughout. No lymph was taken from them, and to this fact I am disposed to attribute his preservation from the disease, which, but for this ægis, would, all Prohability, at his age, have terminatatally.

am, Sir, your obedient servant,

T. W. WANSBROUGH.

DOUBTFUL SEX.

CANCER OF THE RECTUM SUCCESSFULLY REMOVED.

To the Editor of THE LANCET.

Sig.—I take the opportunity of a friend proceeding to London, to send you two cases which you may consider of sufficient interest for publication.

I am, Sir, your obedient servent, D. R. RANKIN. Carluke, Lanarkshire, Nov. 15, 1835.

Case 1.—A case of that peculiar conformation which is usually distinguished, however inaccurately, by the term "Hermaphrodite," has lately fallen under my immediate observation, and as it is remarkable in some degree, I shall in the following short description try to bring before the reader as distinct a picture of the case as possible.

The child is about ten months old, healthy in every respect, and well made. The present appearance of the lufant, so far as regards the external parts of generation, is much the same in proportion as it was at birth. At certain times, without close inspection, the parts present all the characteristics of the female; the mons veneris is freely rounded, and the labia majora are of the usual dimensions, in the commissure of which the clitoris is merely seçu. At other times an opposite appearance is presented; the labia disappear, a scrotum hangs loosely down, and, in place of the clitoris, a penis, small in size, is beautifully displayed.

During the first-described state of the parts, on more minute examination, the labia are found to be covered with integument, corrugated, and in other respects like that which forms the scrotum, and to contain, each, a small moveable oval body, like a testicle. There are no nympha; but a fold of integument, reflected from that protuberance which occupies the place of the clitoris, simulates faintly those processes. The body holding the place of the clitoris, has a mucous membrane for its covering, is cylindrical, about three-fourths of an inch long, rather disproportioned in thickness, not unlike, in shape and size, to a large well-formed female nipple, and very much resembles a penis. The glans with its perforation, and the prepuce (short and incapable of covering the glans) with its fremum, are most distinct; but there is no corona glandis, or cervix. Beneath, and at the root of this body, there is a small orifice, which proves to be the proper urethra; and under this, indeed in its proper situation, another opening, the vagina, which, in appearance and depth, is of the normal standard.

In the other state of the parts described.

the middle, giving a pouch to each testicle, and the penis is short.

The anatomical structure of the penis, or clitoris, in this case, it is not easy to detercharacteristic of both. While in the crect state, it can be very easily traced to its root, which seems to be over the symphysis pubis -there being no trace of it in the perineum.

The question, Is it male or female? has a hundred times been asked; a question which, in the meantime, cannot be decided positively. Independently of any other consideration, the presence of testicles, with some, decides the natter; but the minute of the knife, which, guided in this way, was inquirer perhaps will not rest satisfied with brought freely out at the perineum. The such evidence, so long as the functional; powers are questionable. May not there be a womb, and appendages, and overies too? A near approximation to such a formation has been proved eftener than once, and we way. The whole diseased portion was now do not know what may be the result of further investigation.

Case 2.- Mrs. ---, aged 55, of weakly constitution, was first seen by me towards the end of Nov. 1834 She had for nine months endured a great degree of torture, from pain in the rectum; for the last six weeks she had had discharge from the anus, of very offensive matter, and the pain was now so incessant and severe, that life had become a burden. She had been attended. during the period above stated, by the family surgeon, who supposed that it was a hemorrhoidal affection from which his patient suffered, and treated her accordingly. He had even lately "cut away a blind pile," as he called it, namely, a part of the scirrhus.

On examination per vaginam, a flat, indurated, inelastic body was distinguishable on its posterior aspect, and on introducing a finger into the rectum, and passing it on the anterior aspect, an extensive, irregular, tubercular surface was detected. With the aid of the speculum the whole was brought into view, and the nature and extent of the disease at once seen. The disea ed mass, a congeries of tubercles of various dimensions, extended nearly four inches along the anterior of the rectum. It was about two inches broad; the margins were well defined, and the rest of the bowel seemed to possess its integrity. As the only probable means of relieving the immediate sufferings of the patient, and the only hope. however small, of affording permanent relief, or at least of prolonging life, an opera-tion was recommended, Mr. Logan, of Lanark, concurring in the proposal, to which the poor sufferer willingly responded.

On the 29th of Nov., after a renewed and careful examination of the parts, the operation was performed. The recto-vaginal pregnation in the

while the female peculiarities are sufficiently septim was the to inches the at the well marked, the male organs are very fairly perineum, and, as the superior of the well marked, the male organs are very fairly perineum, and, as the superior of the well marked in temporary fully an inch; to the superior of the super o inches thisk at the vagina, posteriorly, were greatly attenuated, and proved, at some particular points, to be involved in the morbid mass. It was there. fore thought vain to endeavour to preserve mine; it is, however, an erectile body,-a it. The patient being placed in a suitable position, the speculum was introduce into the rectum, and so managed that one or the arms ran along the anterfor margin of the diseased intestine on the right, side, which was the line of the first incision. The knife was passed along the arm of the speculum, while the index-finger of the left hand was introduced into the vagina, to receive, at the highest part of the tumour, the point part thus freed on one side, was grasped by an assistant with a long flat forceps, and carried to the right side. The incision on the left side was then made in the same taken hold of by the left hand, and pulled down until the knife easily reached beyond the disease, which was detached by a transverse incision. There was little blood lost, and the cantery was required to be applied only at two points. A sponge, loaded with a weak solution of nitrate of silver, was introduced into the cavity, and the patient put to bed. Setting aside the inconvenience experienced by the involuntary discharge of feces, and the falling down of the worsh, no untoward symptoms ever appeared, and the patient now enjoys comparatively good health.

The diseased portion of the rectum, on inspection, presented all the characteristics of tebercular scirrhus. Ulceration had commenced in three different places, and there was one alcerated cavity large enough to admit a walnut.

EARLY BREEDING IN THE HEIFER.

P.S. I have notes of a few interesting cases, (?) not strictly medical however, which have lately occurred (?) in my neighbourhood. One of an animalcule in the eye of a horse. One of singular monstrosity in the shape of a chicken with four legs and three wings. And a case of precocious impregnation in the cow species. A bull calf of less than three months age, and a quey calf of about two months, copulated, and within nine months the female brought forth her first-born; both mother and offspring being yet alive. Will details of any of these phenomena suit the pages of THE LANCET? If so they shall be forwarded,

. We find the following statement, he Mr. W. A. Cartwright, of Whitchurg the Veterinarian for November ing on the subject

able farmer "A Wilson, residing to kington will, had a cow that calved he will are calf in January, 1834. When about signmenths old, this calf was bulled by a buil calf of the same age, when running out with her, in about nine months after she calved very well, and brought a heifer calf which is now rearing. It is rather small but healthy. The breed of this heifer is of the short-horn."

In the same periodical for December, the Rev. Henry Berry, alluding to the above occurrence, makes the following statement. The subject is interesting to physiologists : -

"I this year lost an improved shorthorned heifer, from the injury experienced in extracting a calf at a period when the dam was only thirteen months old. The bull's access to her at such an early period was of course accidental; but the circumstance of calves seeking the bull at this early age is quite common in my stock, most particularly if the calves be allowed to suck the dam. Strange though the circumstance may seem, I find them more susceptible of impregnation at a very early age than when more matured; and, still more strange, my late but frequent experience has been derived from cases where the calves, unmanageable under these circumstruces, have obtained access to a particularly large bull, whose size would suggest the impossibility of consummation. I think it probable that any calf allowed to suck the dam, would come earlier in season than otherwise, but the improved short-horns are peculiarly characterized by general early maturity, and I should, even without the testimony of experience, be inclined to expect the result under consideration, as well as the other indications of such early maturity.'

THE LANCET.

London, Saturday, December 5, 1835.

THE excitement in the profession on the subject of the medical contracts which are still being made in the new parochial unions, is on the increase. The dissatisfaction is deep and general, and sincerely do we hope that the indignation of the members of the profession will undergo no abatement, until the vite, the abominable, the brutal system which the making of these contracts is il be for ever abolished.

condemn the Poor-Law Commissioners. when those gentlemen had expressly declared to Mr. Houges, M.P. for Kent, and other gentlemen, that the Boards of Guardians should exercise the unrestricted privilege of arranging the conditions of the medical contracts in the new parochial Unions. In offering those exculpatory remarks we relied on the word and promise of the Commissioners, - our reliance was, however, but indifferently founded, if the statements which are contained in the letter of Mr. CELLY, of Aylesbury (inserted at page 387 of this week's LANCET), be supported by a correct apprehension of the circumstances which he has explained. Mr. CEELY does not write anonymously. He is a most respectable and intelligent practitioner, and we place, therefore, the fullest reliance on the details which he has communicated. It would now appear that the charge of interference in arranging the medical contracts between the boards of guardians and medical practitioners, is brought home distinctly and unequivocally to the Commissioners and their agents, and thus the promise which was so unreservedly made to the Kent deputation, has been unfeelingly and unblushingly talsified. It is really impossible to write or to speak on this perverse and cruel exercise of authority, with any degree of moderation or patience. The Commissioners and their agents are resolved, it seems, on reducing the amount of the poor's rates. "No matter what may be "the consequence to the poor,-no matter "what sufferings may be inflicted,-no " matter what lives may be lost,-THE POOR-"RATES MUST AND SHALL BE REDUCED." Thus would speak the Poor-Law Commissioners. But a declaration of a very different character will be heard from the mass of the people of this country. The conduct of the Commissioners and their agents relative to the contracts, is bringing the Ministers of the Crown into disrepute and of this Journal we odium everywhere throughout the rural t it was unjust to districts, and, Heaven knows, a reforming 2 C

ministry stand in need of no such depress- | will ing auxiliaries in those quarters.

wards of fifteen thousand medical practi- country committed that they should be detioners, whose occupations necessarily lead prived of the services of respectable resithem into all ranks of society, and whose dent practitioners, and be turned over to a learning, usefulness, and integrity of cha- set of low-minded mercenary adventuates? racter, render them the objects of universal Are the meritorious labouring men of Engesteem and respect. Leaving out of con- land to share a worse fate, with respect to sideration, therefore, the protection of the poor, which ought to be the first subject of Let us state one fact in order to exhibit the consideration, can any executive govern-scandalous measure of injustice with which to treat with disrespect, contumely, and insult, such a body as is constituted by the criminals, when patronage is to be bestowed. Commons, he spoke in a tone of the most fervent earnestness, in deprecating any arrangement with medical practitioners, conduct, therefore, of the Poor-Law Commissioners and their assistants must be not, under the specious pretext of providing more, -if he be sick, if he be bed-ridde the poor with competent practitioners from for a whole year, and, further, it a distance, send amongst the wretched and able mud-hovel he ten ; destitute sufferers, a set of VAMPIRES, who of the mercilens co

cobtain a dispraceful dy consens livelihood, by a profuse sacrifica homan There are, in England and Wales, up-life. What offences have the poor of this medical aid, than the criminals in our jails? ment be justified in suffering their officers our poor are treated, and the opposite course which can be pursued in the case even of members of the medical profession? But When the "estimates" were hefore the we are firmly convinced that neither the House of Commons in the last session of Prime Minister nor the Secretary of State Parliament, votes of money were demanded for the Home Department has sanctioned by Ministers, for the supply of medical atany one of the disparaging acts of the Poor- tendance on the prisoners who were con-Law Commissioners relative to the medical fined in the Penitentiary of Milbank. The contracts. When Lord John Russell was number of criminals was under 600, -all, addressed on the subject in the House of observe, at hand, -confined within the walls of a single establishment,-and every prisoner necessarily rendered subscrvient to the orders of the medical attendant. The which could have the effect of derogating Penitentiary is not an hospital. There were from the interests of those gentlemen, or of not five hundred and odd sick persons placed withholding from the poor any essential there, but six hundred healthy persons, medical aid in the hour of sickness. The simply exposed to the casualties of disease. And what sum was voted by the House as the salary of the resident surgeon? Why, brought under the consideration of the three hundred pounds, for one year! And executive Government, and of Parliament, what for the visiting surgeon? Three hunand we will soon see whether the evil, great dred pounds also! These sums, be it obas it is, cannot be removed by an efficient served, were exclusive of the charge for and permanent remedy. The course of con- medicines. Now observe. Medical aid is duct which the Assistant-Commissioners provided for criminals, in a state of health, are pursuing, is calculated to drive the peo- at a charge, per head, of upwards of one ple into a state of fury, of madness. If it pound per annum, while the poor labourers be the object of those hired functionaries in the Unions are provided with the occato destroy the poor sufferers, let them have sional presence of a medical adventurer, at the honesty, the boldness, the courage, to a charge varying from two shillings to three make the acknowledgment; but let them shillings and sixpence per annum, and no

Good and! We we find atrocities of this description commonly and unhesitatingly perpetrated. It is impossible, utterly impossible, that Ministers can be guilty either if the cruelty or the folly of giving their article to such a brutal system. On this point, however, it has become necessary that the most accurate information should be at once obtained.

THE circumstances connected with the illing up of the vacancy caused by the resignation of Mr. KIRBY in the Dublin School, vill be stated in the next LANCET in the communication of a correspondent. save not space on the present occasion, to ollow the intriguers through the windings of their crooked and despicable policy, our bject being merely to place before the world a specimen of the corruption which orms the staple of a medical corporation. The details, of proceedings of this kind, are vorse than imagination can in general coneive them to be. Let the reader assume my ideal standard of turpitude, and he will and it, on examination, to fall far short of he reality of the present proceedings, into vhich not one useful or equitable object eners. As to the qualifications of the candilates, or the principle of conferring the ofice on the most deserving competitor, the parties do not even pretend to think, much ess to speak. That would be "radicalism" and "revolution." When the concours was proposed some time ago in this Institution, very objection was made to its introducion, on the grounds of its complexity, and he difficulty of carrying it into execution. 'Such a plan of disposing of professorships," aid the junto, " was perfectly impossible." But what mode of effecting such an object an Aual in tumult and intricacy, the plan ad in the present instance, where we dements of discord, and the ocesses, along with the

Mombers of the College, and the perpetualatrocities of this tion of the grossest injustice to the candidd unhesitatingly dates?

> THE professor of the "Institutes of Medicine" in the School of Physic in Ireland has been practically illustrating of late the moral of the "little harper in the great theatre." Like the puny musician who mistook the acclamations of his village admirers for the voice of fame, and fancied that the tones of his diminutive lyre would be equally successful in securing the applause of the world upon a larger stage, he has been exhibiting himself, under the impression, no doubt, that the public would repeat the parasitic approbation of the coterie of medical conservatives in the Irish metropolis, and he seems to have had no friend to admonish him of the imprudence of the experiment - no Moliere's old woman to refrain from laughter during the perusal of his vagaries. The course he has adopted is, perhaps, the best calculated to undeceive his self-love, and bring his followers to their senses. It is possible that with his address he might retain their allegiance a little longer-might continue their " consulting physician" and " medico-political advocate" some few months more-were it not for his furnishing them so abundantly with the means of detection.

Let us see how the account stands between these trusty adherents and their disinterested leader. The compact was this,-for it would be idle not to presume a reciprocity of advantages between these honourable individuals -that their bigotry should be defended, and their monopoly secured, against the ravages of Reform. Upon one side were expected the brilliant efforts of an accomplished pleader, and the imposing authority of a man of science; on the other the patronage of pupils and of patients, and an annual subscription for "the Journal." what have these expectations eventuated? One of the Journals, selected as the mirror for reflecting abroad the beauties of medical science in Ircland, has died a natural death: the other has been preserved from a similar fate by a timely subscription during the recent summer. As refutations of the described condition of medical affairs in Iresel contests on the land, we have had oracular contradictions;

and in science, the gleanings of continental authors put forward as productions of Irish growth. In physiology we have had fine specimens of philosophy run mad,—and in therapeutics, pleasant juleps and agreeable mixtures. In medical literature, the labours of a Grub-Street compiler,—and in materia medica, the commentaries of a confectioner!

By these Herculean exploits were the patronage, the tuition, and the practice, of the medical profession in Dublin, to be secured for ever. Considering the condition of Ireland, and the precedents in other departments, it is not wonderful that the mistake of imitating those examples was made, although, at that very moment, the political monopolies which they sought to rival in medicine were universally execrated by the Irish people, and virtually abandoned by cabinets of all shades and colours, from the cabinet of Wellington to that of Mel-BOURNE! Men with far less sagacity ought to have seen that the system of exclusion which was not maintainable in the church, in the corporations, or at the bar, could not be sustained in the medical profession. It was not prudence but sheer stupldity to stand between the ruin and its fall; but from the quarter to which the party have all along addressed themselves, they seemed to think that if they could meet the statements and arguments of THE LANCET, their case was safe. Yet even had this journal latterly been silent, the impetus it had already given to reform could not have been retarded much longer. Public opinion had become too strong an enemy for the junto to cope with. Were the profession in Ireland likely to be satisfied with less than was to be conceded to the profession in England and Scotland? Did they imagine, for instance, that the fact that not a single individual belonging to the faith professed by the bulk of the Irish nation, fills (as we believe) the office of surgeon or physician to any Irish County Infirmary, would not be considered as a gross anomaly and a scandalous grievance? Was it to be supposed that the people of Ireland would be content with an University, the by-laws of which declare that no Catholic shall ever hold in it the office of Professor? As well, indeed, might Dr. GRAVES and his party expect that the sturdy followers of Calvin in Scotland would allow the episcopalians in that died at each distin

country to how the possession of all their universities the schoolst And yet such is the proposition of the model monopolists of Dublin!

But sooner or later will the inhabitants of Ireland either force open the existing institutions, or possess institutions of their own. They are intent upon this course. eir enemies force them to adopt it. We are perfectly aware of the kind of use that will he temporarily made of this announcement; nevertheless, the event cannot be retarded, however great may be the abuse cast upon THE LANCET by the monopolists. The question is not now, "Shall there he reform?" but "How far shall it be carried?" The spokesman, Dr. GRAVES, suspects this, or he would not have deviated from the old usage of treating public opinion with affected indifference, and admitted the necessity of reform, in his late "introductory" lecture at the Meath Hospital. The extent of reform will be discussed in the next harangue at that place.

In our present Number will be found the first part of an extremely interesting paper by Mr. Edmonds, of Regent-square, on the influence which age n the population, and locality as regards divisions of the country, exercise over the mortality of various portions of the English population. The new and valuable materials - of unexampled varicty and extent-on which Mr. EDMONDS has exercised his abilities and his great industry, - are but little, if at all, known to the public; and the devotion of so much time and attention to them as his papers evince, renders the community, for whose advantage they are designed, greatly his debtors. The chief of those materials convists of a Parliamentary return of the ages of nearly 4 millions (3,938,496) of deceased persons, and of more than 10 millions (10,530,671) of persons living, also distributed according to the terms of their age. These numbers have been divided into 100 portions, the sexes of the individuals enumerated being distinguished in each county in which the individuals are stated to reside; and also in each of six large towns. The "law of the mortality," or a careful disc the number of these is

number of persons w naterials.

In giving a place in our columns to the consunication of Mr. Edmonds, we are ininenced by the impression, long ago enterained, that the subject is one of peculiar mportance to the members of the medical profession. It can hardly fail to excite, inleed, a high degree of interest, local and general, amongst the people of this country; out to the medical community, especially, t affords an abundance of new and rich natter for reflection. The results themselves appear to us to be of high intrinsic value; but he exhibition of all the steps of the simple rocess by which they have been derived, nay, perhaps, be considered of great pernancnt use as indications to the inexpeienced in these matters, of the course thich should be pursued in the invesigation of the same, or of other similar maerials. In medical statistics attention has ither to been confined chiefly to the retive mortality resulting from different disases, and to the number of deaths and reoveries which have occurred among a given umber of persons attacked by disease. The uration of the attacks, and the ages of the atients, are indeed now deservedly becoming bjects of great importance. But observations f this latter nature can supply no measure f the health of a population, so long as we ontinue ignorant of the number and ages f the persons living from whom the disused are taken. In order to obtain an ccurate measure of health, it is essential at the number and the ages both of the ving and the dying should be observed. nd that the number who are sick at each re should be distinguished.

It may serve, perhaps, to increase the tention of our professional brethren to the ocuments which we publish, when they e informed that very great secrecy is prerved on the facts which they develop, by ie remainder of the very few persons bedes Mr. EDMONDS, who possess any real howledge on the subject.

nace for the insertion of

cach lived to the of London. The ministerial plan for foundthe information which has ing a general university in the metropolis, been laberiously sought by Mr. Ednonds, is distinguished in many respects for its and ingeniously obtained by him from these liberality; but the scheme will never receive our unqualified approval, unless the charter shall provide-after the institution is set in motion-for electing the future examiners by concours; nor, unless every candidate for the honours of the University shall be admitted to examination, simply on his furnishing proof of his having ever sustained a character of unimpeachable moral rectitude. The scheme in its present form will only add new strength and vigour to the odious, the infamous, certificate system. The letter, signed "A STUDENT," in the present Number of THE LANCET (page 388) relating to this subject, merits general attention.

> THE facts relating to the late disinterment of a body at Moulton, and the consequences resulting from the discovery of the proceeding, are not unknown to us. We only hope, for the credit of the profession, that any one of its members who may be at present involved in the charge connected with the disgraceful transaction, possesses the means of freeing himself with honour from the implication. The affair is undergoing legal investigation, and we shall therefore abstain from saving anything farther on the subject at present.

THE LATE DR. HAMILTON.

(From an Edinburch Correspondent.)

DR. HAMILTON, the author of the valuable work on the treatment of diseases by purgatives, died on the 27th of October last, having arrived at the eighty-eighth year of his age, and enjoyed, during that long period of life, an uninterrupted course of good health.

There were many features in the life and character of this able physician which are worthy of notice. It may justly be said of him, that he constructed one of the best works on practical medicine which appeared during his day; and he was, at the same time, one of the best practitioners of the Scottish metropolis.

JAMES HAMILTON was the son of the Professor of Natural Philosophy of the Univerpsedings which took sity of Edinburgh. Having had an excelat the University tent preliminary education, he commenced the study of medicine,- the school of Edinburgh having at that time acquired its highest reputation, its list of professors have looked chiefly to the list being adorned with the names of MONRO, CULLEN, BLACK, and GREGORY.

Finding an unconquerable difficulty in even witnessing operations of surgery, Dr. HAMILTON commenced practice as a physician; and although he always had the reputation of possessing good sense and a sound judgment, he was very little enployed in private practice; and the greater portion of his time was devoted to the duties of the Royal Infirmary of the city. It was not until he had passed the fiftieth year of his age that he enjoyed any professional reputation. He had never devoted himself zealously to any pursuit connected with the science of his profession; and he was even defective in its rudiments, having, like his contemporary, the second GREGORY, no knowledge of practical anatomy; and possessing, consequently, no accurate knowledge of pathology.

At about this period of his life he came forward with his work on "Purgatives;" and never was any literary production more cordially received by the profession. The views which he inculcated therein were at once adopted by a great proportion of British practitioners. It passed through one edition after another, at once establishing the fame of the author as that of a first-rate

practical physician.

At the same time that HAMILTON was directing the attention of the medical world to the administration of remedial measures in the treatment of fevers, and ascribing many diseases of the nervous system to the alimentary canal, ABERNETHY was employed in pointing out a variety of local ailments, all of which were symptomatic of a derangement of some portion of the digestive apparatus, and to these also ABERNETHY directed all his therapeutic means. Each observer was employed in exploring the same country, but they travelled in different roads. Both observers agreed on all practical points; they both agreed in the fact that almost every disease is modified by, if not actually originating in, a deranged state of the digestive canal; and whether it be the stomach itself, the liver, or the large intes-tines, it is those organs to which we must direct our chief remedics in all the diseases of the human body. In confirmation of this important truth, we have only to look at the habits of mankind in civilized life. The irregularity of their meals, and the multitudineus variety of their food, con-trived purely to gratify sensual desires, must constantly disturb the functions of the stomach, while the moral excitement to which mankind is exposed, must, in like manner, whatakes in the choice of constantly derange the operations of the lives as often proposed the liver. It was to this portion of the all-inctions of "seniors mentary canel that Abernstay directed the doors, some symmetry

particular attention to all his michological investigations, while HAMLE in Appears to the last a lestine have looked chiefly to the later injecting. To the congestion and accumulation of fecal matter in the colon, he attributed the chief affections of the nervous system, particularly chorea, but he considered that a man num-ber of symptoms of other diseases, originates in the condition of the alimentary Lunal. Both practitioners established their views by a reference to an immense body of facts. and their joint labours now form the groundwork of the practice of the ablest medical

men in this country.

Much has been told, and truly told, of the absurdities into which these champions of the stomach occasionally fell, from the extravagant bias which their minds took on the subject, its diseases and remedies. To such an extent did Dr. HAMILTON CATTY some of his views, and so eager was he to inculcate the importance of examining the evacuated matters on all occasions, that in visiting his patients in the Royal Infirmary, he was in the habit of looking at the cloaca in every case. An old and waggish nurse who was employed in the Institution at one period, had no difficulty in providing an "evacuation" for the doctor's critical inspection, numerous as were the demands on her faculties of distinctiveness and arrangement. It was at once indeed a saving of trouble and a source of amusement to her to confuse the stools of the different patients, and then to present them to his notice indiscriminately. These deceptions, however, converted laughable errors into a useful conviction, on the minds of the numerous students who attended the Doctor's visits, that little was to be learned from the mere external characters of the evacuations from the alimentary canal.

As a private individual, Dr. Hamilton was generally considered as a very primitive character. He was a perfectly upright and just man, but his generosity of disposition was not very conspicuous towards those who chanced to present claims on his benevolence. Though unmarried, he had the reputation of possessing a progeny. He was rather affected in his dress, continuing to wear a cocked-hat forty years after that form of heaver had been given up by every hody except a few clergymen. He would not wear gloves even in the coldest days of which our northern climate can boast, and he always slept with the window of his room open. In personal appearance he was a little pleasant-looking body, and he generally contrived by his manner to make friends. His house being adjacent to that of Dr. HANGLTON junior, our well-known accoucheur, many amusing anecdotes are told of ladies miles mistakes in the choice of thek

calling of each, in order that the victims of "Cupid" adapt not undergo an unmerited purgetting by accidentally calling at the ach, in order that the victims of wrong house.

INTERCEPTED LETTER.

"DEAR SIR HENRY,-I always feel it to he an honour to receive a letter from you, and am ever proud to fulfil your commands. Your letter, most parts of which I read at a College meeting, was most gratifying. I am every day more convinced that you are not even yourself as well aware of your public as you are of your private professional value. We all look up to you, justly, as the chief pillar of our venerable institution; and we know that when you fall so must Pall Mall East. 1 rejoice in the amendment of your health and spirits, which at the last College meeting you attended we all observed had faded a good deal. Wiston Hall is a delightful spot, and I hope you will remain there until the close of November, in order that both your mind and body may be recruited. My solicitude to see you once more amongst us, prompts me to take the liberty of cautioning you not to make too free with your constitution, and expose yourself too much to the endearments of the fascinating circle in which you move, and have been so fondly caressed. I cannot help recalling to your memory the sage advice which you gave some years ago to the gallant Duke of Wel-LINGTON, and as you are much more advanced in years, the same precept may now be to you even more applicable. I am contident that by tender nursing and great command over your passions, your mind and body may yet last a few years. The aged are not less apt to become the victims of female society than youth, and if you at your time of life were to take to yourself a young wife, we should soon lose your valuable services. It is my high consideration of those services that prompts me to write to you on this practice. Nobody but a blockhead would delicate subject.

"I don't know that I have much news to tell you. All of us will join you heartily in keeping things at the College in statu quo, and we are every one confident that your ingenious and comprehensive mind will contrive a tub for the whole, and that you will easily manage to amuse these pettyfogging licentiates with another reform phantom. You have no one to fear, as all of us will be glad to keep you in the president's chair. There is in fact no other man in the profeson high enough in rank and science to fill the same dignity and credit. The think are paralysed. MATON,

of the favourite suppressed the facts respecting the indecorous part of his life. A married Fellow, with legitimate offspring, might have been something; but the least public suspicion of immoral habits, unfits any one to be an occupant of the President's chair. Such a person could never have overthrown a man with your high moral feelings. WARREN, whom you reasonably considered as an opponent, will soon leave this wicked world, for he is very very ill; so instead of fearing him, you may pray for him.

"I have done all I could to obtain information about the schools. The different lecture-rooms have been open some time, and I wish my statements respecting several of them could be more gratifying. But I must not deceive you. The medical pupils of the London University have increased prodigiously. Last year there were 300, but this year the number is not less than 500. The other schools have suffered a proportionate diminution, some of them having been hit most severely. St. Bartholomew's, notwithstanding all STANLEY's efforts, are 83 minus.

At the Borough hospitals they are making a convulsive struggle, but all the palm oil which King HARRISON can supply, does not seem to make the rusty wheels of Guy's go quicker. At St. Thomas's, however, the classes are a shade better. The reason is, I understand, that they are more liberal in their conduct to strangers. At Gny's their demeanour to visitors is quite ungentlemanly, and contrary to every rule observed at the other and more liberal recognised hospitals. They are machinating a quarterly journal of Reports. Such a thing is already advertised at St. Thomas's. But they are a dozen years too late. Had they been wide awake in 1823, they might have prevented the inconvenience of criticism with report-But they say that the unfortunate Gazette is rend by so few that it does not answer the purpose of the hospital surgeons. These *pure* journals, however, must fail, as of course they will only contain successful cases, and will give none of the bungling publish an unsuccessful case.

"The Westminster School is as low as low can be. I conversed with a gentleman who went to hear one of the new-fashioned clinicals, and who, after waiting for three quarters of an hour, took his departure, because no other soul but the lecturer attended. GUTHERE is sliding down rather fast, though he was never far up in the estimation of the competent judges. You will find a melancholy scene described in THE LANCET. All true! The College have kept the Charing Cross concern out of competition with their own hospitals, by refusing to recognise the k are paralysed. Maron, practice. Our St. George's friends have met tainly aspired, but he is with the fate which you foresaw. The wild. Had he been a 7000% sunk in brick and mortar, will never we should not have again be converted into currency. The two

opposition. LANE, who is as sharp as a needle, has certainly got the best shop, having spent upwards of 1500l. in putting the original school in order. The Middlesex must be considered as a failure. This I regret only on your nephew's account, for Sir Charles is a bitter enemy of things as they are, though, loud as he talks out of the College, we never hear of any of his efforts in doors to help the reformers. The University hospital has kidnapped every popil in that quarter. Bythe rage here. Have you ever heard of it?

"I saw Turren last night. He appeared low, and said the trade was dull, that he was looking out for patients, and that the old families who used to permit all their domestics to include in the draught system at the master's expense, now oblige them to go to dispensaries, or have their own doctors, which makes a serious difference in the Christmas bills of all the top-apothecaries. He says that no one now ever wants a pure physician, and that none of his patients will stand a regular attendance any longer. We are all fully sensible of the complete change which has taken place in the guinea trade, and every day see the necessity more and more of becoming, in reality, general

practitioners. "I have sent you per coach WARDROP's book on Blood-tetting, which was published yesterday. I think it will please you. It is full of practical information, and contains what are to me many views which are quite original; but I should like to hear your opinion of the work. Favour me also by saving what number of copies I should order for our library, as it will be much called for, for it is a work not for a cursory perusal, but for attentive study and calm deliberation. There is one point in which you may obtain some useful information from it. I allude to the quantity of blood to be taken. I remember a lady, who was present at one of your visits, telling me of the happy effects produced by your nice discrimination of the requisite quantity to be removed in the case of the old Dowager Duchess of R**** D. She said that after repeated most accurate examinations of the pulse, and of the alvine and urinary discharges. a la Pront, you prescribed the loss of four onnees of blood by cupping, and then departed; but on returning to your noble patient in two hours, and having first ascertained that the cupper had not arrived, you then, with your customary tact, expressed an unusual interest in the case, saying 'that your anxiety. was more intense than it had ever been for any patient before,' and that 'after having contemplated, reviewed, and turned over again and again in your mind every particular of was allowed her. The

contending parties have about shared equally ther condition, yet and come to the important to the pupils, each having from twenty three and determination that the quantity of blood to be removed about be only the concerning the provided and give up the sad a saft. I shall never forget the favours opposition. Lanz, who is as sharp as a needle, able impression which your conduct on that occasion made on all concerned; and for years after, the noble family could never hoar your name mentioned without a tear of gratitude rolling dan their cheeks.

"I am glad you are riding a quiet pony. What a frightful escape little BRODIE had in the Isle of Wight the other day! I trust you will have the kindness to let me know about the time that you will come to town, the-by a new medicine, called creosote, is all and say if I can do you any little kindness at Kensington. Do you think there will be a chance of getting up some meetings at the College this season? There are many difficulties which you alone can surmount, if surmountable. I remain, dear Sir Henry, ever your very humble and obliged servant, " W. Mc. M.

"Half-moon Street, Oct. 1835."

LONDON MEDICAL SOCIETY.

Monday, Nov. 30, 1835.

Dr. Whiting, President.

TREATMENT AND EFFECTS OF FRACTURES.

MR. BRYANT placed on the table a speci men of fracture of the femur, of which he gave the following history: A female, aged sixty-seven years, much addicted to drinking, occasioning considerable feebleness of constitution, was knocked down by a boy, when the left trochanter forcibly struck against a curb-stone. She was unable to rise, or bear the least weight on the limb, She was conveyed home and put to bed, and simply kept quiet. On the 27th of October, three days after the accident, she was brought to the infirmary, when the injured limb was found to be two inches shorter than the other. The foot was everted, and on rotating the limb, distinct crepitus could be heard and felt at the upper part of the thighhone. The woman was placed on a fracture bed, and the limb on a double-inclined plane, with splints and bandages to maintain the broken parts in apposition; and thus placed she appeared easy. On the following day she became extremely restless, pulled off the bandages and apparatus, and obstinately refused to have them re-adjusted. He (Mr. B.) then placed the limb on its outer sile, with the knee bent on a pillow, insisting on perfect rest being kept. She remained and comfortable, but became eva feeble, although a supply which she had been a h

boulse rapid and feeble and the tongue dry referable to the injury, but to the shock and brown. The symptoms continued inwhen she died. On examination, a fracture was found through the trochanter; the neck of the femuratas driven into the cancellated structure with the trochanter minor was broken off. The fracture was external to the apsular ligament, but no attempt at union had occurred. Cases, however, of fracture of this description were described by Sir Astley Cooper, where union did follow. His (Mr. Bryant's) object in bringing this case before the Society was to engage its attention on the treatment of such injuries, which he thought was a very desirable object, especially at the present time, as an excellent paper had been lately published in THE LANCET, by a Mr. Radley, who had advanced, very ably and strongly, the treatment of fractures without splints. The plan recommended by Mr. Radley appeared to have been so successful with Mr. R., that it could not be otherwise than worthy the attention of every medical society. Two other specimens of fracture, on the table, were taken, the one from an old man aged sixty years, and the other from a woman aged sixty-three, the injuries arising, no doubt, from the extreme fragility of the bones at their advanced ages; and he (Mr. B.) was very sceptical whether the practice of confining the patients on the back, with the limb extended, was a good one. In fact he was led to consider that great advantages would result from the surgical treatment recommended by Mr. Radley. He Mr. Bryant; did not consider that any benefit would have ensued in the present case if mechanical contrivances had been adopted; and in such cases he regarded the position on the side, with the knee bent, resting on a pillow, the most likely to answer the object of the surgeon. The Society's time, he believed, would not be ill-spent in giving this important subject an attentive consideration. In the case of the female first mentioned to-night, he believed that the accident had but little to do with her death; for but very slight inconvenience arose from the fracture. He, perhaps; might account for the fatal event correctly, by asserting it to be the woman's having become habituated to the use of ardent spirits, which having been in the first instance withdrawn, low fever ensued, which, in its turn, by degrees, occasioned the feebleness under which she sank.

Mr. Jones was persuaded that patients having received severe injuries, died, in innumerable instances, from a peculiar kind slow fever that succeeded, without disstructural change. Irritation,

which the whole nervous system had susfrined. He had seen many persons die from falls which had produced no fractures, in the course of a very few days.

Mr. DENDY pronounced Mr. Radley's plan to be no plan at all, for it permitted the patients to do as they pleased, when, if there were any disposition to displacement of the disunited parts, the treatment without splints would not succeed. In Mr. Bryant's case little could be done, but he (Mr. D) would have added a pelvic strap, to keep the pelvis fixed.

Mr. CLIFTON considered the principal source of irritation in very old people, to depend on the confinement and restraint to which they were subjected after the re-

ceipt of an injury.

Mr. PILCHER attributed the development of the irritation, rather to the confinement than to the abstraction of the stimulants, the former leading to an interruption of the functions of the body, and finally to a disorganization of the viscera.

Dr. JOHNSON maintained that the irritation or mischief resulted from the shock which the constitution had received.

An animated discourse ensued, terminating, however, in each member regarding his own theory as most feasible, in accounting for the phenomena occasioning death in such cases, and the Society soon afterwards adjourned.

OUR REPORTER remarks on the note of Mr. Hooper in the last LANCET, "that he did not anywhere state in his report, that Mr. 11. had said that, 'the exostosis on the tibia of the patient well illustrated the proposition laid down by Mr. Abernethy;' but, rather, what Mr. H. himself states in his note (page 349), viz., that cancer will invade every structure of the body. Although the word exostosis was perfectly separate from the sentence, still it had reference to it; for, as stated in the report, not only soft parts were destroyed by cancer, but bony parts also."

WESTMINSTER MEDICAL SOCIETY.

Saturday, Nov. 28, 1835.

Mr. RICHARD QUAIN in the Chair.

DEATH FROM TAKING MORISON'S PILLS.

Dr. Johnson, in answer to a call from Dr. Granville, detailed the post-mortem appearances of Mrs. Sarah Porter, aged 39 years, who died from effects caused by taking Morison's pills. The particulars of the das a frequent cause of care were given in our report from the London Medical Society, Nov. 33, the day on which she died. The abdonen was rather tumid and distended; peritoneum healthy; sions of the mucous coat; no changes in the duodenum; jejunum and ileum twisted in different parts and with the other, and the to attend an old patient, who, he was con-morbid parts had summed the colour of dark vinced, had also met with his death from the makegany, with distinct demarcations of healthy surfaces; the vessels were injected, and from their capillary extremities blood was extravarated; there were no traces of ulceration, the mucous surface being simply abraded. The parietes of the heart were rather thicker than usual, probably the commencement of an hypertrophied condition. The bloodvessels of the brain were congested throughout, but there were no other morbid changes affecting the substance of that organ. In answer to a question whether the pills had ceased to produce any action some time prior to death, Dr. Johnson said that the medical gentleman in attendance, and the friends of the deceased, had informed him, that ten days prior to her death, she was recommended to give to one of her chil-dren, who was troubled with palpitation of the heart, some of "Morison's Pills;" she complied, but the child got worse. Presently the mother had pain in the head, and she also took them, in doses such as we have before described, producing, shortly after, distressing vomiting and violent purging; and her adviser remarked, that the more actively they operated, the greater number of pills it was necessary to take! An increase in the violence of the symptoms necessarily followed. The friends finding her becoming rapidly worse, sent for Mr. B-, a medical practitioner, who found her comatose, in which state she remained up to the period of her death, four days after commencing to take the pills. The last day or two prior to the fatal event, the bowels had ceased to act, and at the post-morten examination they were simply distended with air. He (Dr. J.) came to the conclusion that death was occasioned by the pills, from the fact that some portions of the tube were highly diseased, whilst other portions were perfectly healthy; and where the lodgement of the irritating substances had taken place, there the changes were evident, and the contractions appeared as if tied with a piece of silk, while there no morbid achesions had supervened; these contractions, when found in the healthy portions of the canal, were a positive evidence of their having been produced by the direct application of an irritating substance. But he did not wish it to be understood that he believed that other powerful pills, taken in the same enormous quantities, would not have occasioned the same result. (The virtues of this quack medicine, however, are said to reside in large doses.) The affection of the head was attributed to the large doses of Ext. Conii,*

stomach inflamed, presenting slight abra- which the pills, be malysis, were found to contain.

Mr. VERRAL said he had bear goqueste same cause; and in whom the pills and other aperients, towards the close, comed. to pro-duce any action. After death an immense mass of the pills and of oil was Ind wedged in the intestinal canal, in so putrid a state, and emitting so powerful an offluvium, that the like he never before encountered.

MEDICAL MAGNETISM.

Dr. Jounson, in a brief address, re-introduced this subject, but it occupied attention only for a short time, the conversation consisting of a few questions that were put to Dr. Schmidt. The discussion of the previous night, Dr. Johnson said, proved to the Society that medical men were not the only class of philosophers who differed. As much variance of opinion prevailed to-night as on the last evening of discussion.

Dr. RITCHIE denied that the magnet, by itself, could produce any therapeutic effects. Dr. SCHMIDT maintained that it could, if the poles were placed according to his arrangement.

Dr. RITCHIE thought it quite a joke that Dr. Schmidt should know how to manufacture magnets more powerfully, and place

them more remedially, than other persons. Dr. Errs replied, that a gentleman had offered to Messrs. Watkins and Hill, of Charing Cross, 100 guineas if they would produce magnets having the like power* They tried, but at last were compelled to acknowledge their incompetency; and he would now propose that Dr. Ritchic and Dr. Schmidt should each take a certain number of pieces of iron, and try who could produce the most powerful magnets.

Dr. Schmidt offered any medical gentleman who doubted his competency to perform what he had described, or who believed that the magnet could not produce physiological effects on the human body, to bring to his (Dr. S.'s) residence, any poor and sick patients on whom magnetism might be tried, the visitor judging for himself of the results, for he had no secrets to conceal. He had abstained from quoting cases cured with the magnet within the last six years. He would, however, briefly state that he knew a lady, aged 22 years, afflicted with amaurosis for several years, and who, during the last eighteen months, was completely blind,

of the lagredients that give to his pills their powerful drastic speriout quality), as it best pleases his fame when preparing the means of deception, for analyses turnish the like product. we take this opportunity. Schmidt withholds

We believe the manufacturer, in order to baffle lative to his the analyst, changes his formula (with the exception nets? - Ep. L.

lative to his mode

the was soon by several continent physicians, to the Kent deputation:—"That the guarithmut basefut, but in whom the magnet dians of the poor of the respective parishes roduced as speedy and perfect cure. It should not be prevented entering into as ould avail nothing to dotail cases within here walks unless authenticated by the resençe at the patients themselves. Many smooths there certainly were in the pharecopois, but the profession, nevertheless, not overstocked with remedies.

Mr. HALE THOMPSON said he was authoized to offer to Dr. Schmidt the use of the)phthalmic Institution, where he might sehought advisable, and in order that the ragnet might have a fair trial, the sole ianagement of the selected cases should be ntrusted to his care, and he (Mr. T.) would ive to the Society an impartial statement f the results.

The offer was accepted, but not so willngly, apparently, as to prevent Mr. King rom believing that a reluctance existed on he part of Dr. Schmidt so to test the effiacy of the magnet. Mr. King considered hat more effect would be derived from elec-

lectricity in the treatment of diseases, and. forcover, he had not so great a control i ver the electric as the magnetic influence.

Dr. Jourson advised Dr. Schmidt to acdish a cure when the cause arose from oranic changes .- On the whole, the Society cemed to form a more favourable opinion of nagnetism this evening, the interest in the ubject being heightened when it was anjounced that Dr. Faraday had purchased once of Dr. Schmidt's magnets (which Dr. i considered as a proof that his magnets vere very superior) and examined his exeriments, remarking that his views were iew, on some points, and no doubt would hat he should more fully investigate the abject. The adjournment of the Society hen took place.

MEDICAL CONTRACTS IN THE NEW UNIONS.

LETTER FROM MR. CEELY OF AYLESBURY,

, To the Editor of THE LANCET.

we never been among the numhave derived the least ged any hope, from the r-Law Commissioners

should not be prevented entering into as many contracts with medical men as they pleased, because, in the first place, in the rules and regulations originally issued boards of guardians by the commissiones a clause exists, relating to medical relief permissive of such authority,-a clause which, in an official communication on the subject, dated June 20th last (now before me), their secretary states, " he is instructed to declare, empowers guardians to exercise an entire discretion with regard to the medical appointments." In the second place, experience has taught me to entertain no very exalted opinion of the discretion of such bodies in general on such a subject. In the third place, I am unwilling to respect the declarations, and unable to appreciate the authority, of a central triumvirate which, though incessantly disclaiming all interference in the medical arrangements, and for ever alluding to the grant of these discretionary powers, at the same time permits ricity, though whether the magnetic fluid most of its itinerant assistants to be actively iffered from the electric he was not aware, and relentlessly engaged in prejudicing, in-Dr. Schmidt said he had found injurious sulting, and degrading the medical profesesults to arise from the application of sion, often prompting guardians to the execution, and always supporting them in the infliction, of the most flagrant injustice on numbers of its worthiest members.

For these reasons, also, I could not parept the offer to make experiments at the ticipate in the surprise expressed by you, in ublic institutions, but to be careful in the a recent Number of The Lancer, at the election of patients, especially those affected proceedings relative to medical contracts, election of patients, especially those affected proceedings relative to medical contracts, with amaurosis, for it was impossible, he still manifested by the guardians of several casidered, that any remedy could accom- unious, much less can I concur in the correctness of your strictures of the 21st inst.

on this subject.

I could relate many instances in different counties, previous to the Kent deputation, where guardians, uninfluenced by assistant commissioners, have exercised this discretionary power with humanity to the poor and justice to the medical profession. I could also mention a multitude of instances, both before and since that event, where, in spite of the above recited discretionary end to important results, he (Dr. F.) stating | clause, the secretary's authorized explanation, and the reiterated official assurances in the House of Commons, assistant commissioners have most illiberally and unjustly interfered in these matters, either dissuading them from the pursuit of an enlightened and judicious course, pandering to their parsimony, or ministering to their meanness. Boards of guardians, in general, need not such assistants; and it is equally true, that had those bodies been left to their own feelings, knowledge, and discernment, infinitely less evil, and much less injustice, would have been perpetrated in the medical arrangements.

Wide LANCET, No. 027, p. 747.

In the Wycombe Union, formed some fered. The former offered a Loudon medi-months sin cc, the guardians refused to ad cal man at a lower rate, at the same time-mit of medical districts, though urged to it declaring that the election just make would by Mr. Sub-Commissioner Gilbert. He, not be confirmed. The latter proposed a however, succeeded in persuading the Board, sum scarcely equal to two-thirds of that after having unanimously agreed to the claimed by the successful candidates.

adoption of a low scale of graduated payThe guardians, however, after mu ment, proposed by a medical man of ac-cussion, would not accede to this, but sti-knowledged talent, experience, and liber mately were induced to propose a considerrality, to abandon their design, and force able reduction of the original terms. Con-

rivalry with his associates, declared publicly tral Board—the Poor-Law Commissioners and privately, "that the medical men of have signified to them in writing," that, Buckinghamshire had given him so much under the circumstances, they will allow the trouble that, on all occasions, he would medical appointments to continue only surge the guardians to procure medical offitil the end of the perochial year; at the same cers from London"—" that although they time they consider the remuneration prohad caused him most trouble, yet he could posed too high, and such as they will not feel always subdue them by introducing very justified in sanctioning in future." clever young men from Somerset House, where there was always a long list of them in the possession of the commissioners."

The Aylesbury Union comprises forty parishes, and contains a population of more than 22,000, with districts most preposterously and perniciously arranged in reference to the medical duties, and is it not less than twenty miles in extent in one direction. During the formation of this union, that sagacious gentleman Mr. Gilbert gravely inquired " whether one medical officer would not suffice for the entire Union."

When the Union was formed, in September last, he took an active part in dividing it into four arbitrary districts for the relieving and medical officers, and suggested terms for the latter to which none of the the antidote. resident practitioners could accede. Union was disposed of to three individuals; two from London, one having two districts, who are engaged to discharge the medico-parochial duties lately performed by Whether the medical men in Desixteen! vonshire have proved more compliant than those of Buckinghamshire, or whether this gentleman there continues his pragmatical proceedings, our brethren in the South, 1 dare say, can inform you.

In Hertfordshire, after a contract had been ratified, the assistant commissioner. Mr. Adey, refused to sanction it till 7s. 6d. was substituted for 10s. 6d. for midwifery, in and out of town. In Bedfordshire, guardians have been officially informed that the commissioners would not allow more than 7s. 6d. for this important item. This gentleman has publicly declared, " that, notwithstanding medical men now complain of inadequate parochial remuneration, they will receive much less next year.'

In the Thame Union, where the medical appointments have been made within this last month, and where the highest tenders were accepted, the Assistant Commissioner, Mr. Guison, and the Central Board, inter-

The guardians, however, after much disthe medical men, by modern threats, to tracts, on these abated terms, were then accept a shamefully inadequate stipend.

ratified by the guardians, for twelve months. This functionary, doubtless, in laudable Within these few days, however, the Cen-

If further evidence could be required to show the spirit actuating the Central Board towards the medical profession, and to declare the hopes we may entertain from that quarter, surely their last Report to Lord John Russell * will furnish abundance. That report can be proved to be no less replete with unwarrantable aspersions and unfounded imputations, than distinguished for the arrogant folly and the ignorant credulity of its subordinate concoctors. It may, in its characteristics, stand unrivalled; but I am happy to say it will not remain unanswered. I do hope, as you suggest, that it will at once engage the serious attention of the profession in general; and that, since his Lordship has the bane, he may also have

By extensive union, cordial co-operation, and an appeal to the Legislature, supported by authentic facts, existing in abundance, I cannot doubt that the honour and respectability of our profession will be best vindicated and most successfully maintained.

I am, Sir, your obedient servant, ROBERT CEELY. Aylesbury, Nov. 30, 1835.

METROPOLITAN DEGREES IN MEDICINE.

To the Editor of THE LANCET.

SIR,-I perceive by the daily papers, that it is the intention of the Government to "incorporate by charter certain persons eminent in literature and science, as the University of London, with power, after examination, to confer degrees in arts, law, and medicine." It is also stated, that didates for degrees must produce nials of having gone throu of study, either at the "

" Vide LANCET. NE

at the institution now denominated "The throughout exerted yourself to obtain a London University."

sigNow, this does appear to me to be meither more nor less than a continuance of the old system, and to imply that the examination for degrees, at the new "University of London," will be as useless as that process has hitherto been in other quarters. If it is not a perpetration of the old scheme under a new name, why is it necessary that a regular course of study should be "gone through" at any institution whatever? The circumstance that a candidate has passed a certain number of years in professedly educating himself anywhere, is no proof of the ability or attainments of the professedly educated individual; and it is a fact which cannot be disputed, that many persons have attained degrees, in our two great universities, without presenting any solid claim to the possession of those marks of distinction. So that it would seem already, that neither certificates of having studied, nor the fact of having passed an examination under the influence of the old system, is any guarantee of qualification to hold a diploma.

But suppose we admit that the examination will prove so good, that none but competent men can pass the proposed examination. What then is the use of certificates of " conrses of study?" Why should only those who can afford to obtain their knowledge at a university, be qualified to become candidates? The adoption of such a system necessarily excludes all but the comparatively rich. The want of means must prevent many able young men from pursuing their studies in an English university, but who, in the retirement of a private study, would attain a degree of knowledge which is far beyond that possessed by the inajority of those who go through "courses of study," and obtain degrees. It does not matter how knowledge is obtained, - whether in the solitude of Welsh mountains, within the walls of a university, or amidst the din of a metropolis,—whether in Wales, France, or England. If the knowledge be but obtained, its possessor is equally worthy.

But, perhaps a fear is entertained by certain parties, that such an arrangement would increase the labour of an examination, because much which ought to be proved at an examination, is now taken for granted, or would be so, under the " course-of-study' system. But, even were more labour required, such labour would not be lost, for the worthiness of the possessor of degrees would thus be ensured. We might then look upon a degree as a thing of value, -as the evidence of a fair and adequate test of one, would first have proved before at and renown that he had de-

Barthard Street

pure mode of government in our metropolitan collegiate institutions. I have, therefore, no doubt that you will insert these remarks in THE LANCET, and give the liberal side of the question all the support in your power. I am, Sir, yours truly, STUDENT.

London, Nov. 28, 1835.

MEDICAL REFORM IN IRELAND.

To the Editor of THE LANCET. SIR,-In the last Number of your truly independent journal you have been pleased to notice and comment on a lecture lately delivered by me in the Peter-street School of Anatomy, Medicine, and Surgery, in which I introduced the important subject of medical reform. Judging from certain passages in the commentary I am induced to think that your reporter must have either mistaken my meaning, or otherwise (unintentionally no doubt) fallen into error in reference to some points connected with the discussion of this very interesting topic. In order to prevent misconception or misunderstanding in the minds of the readers of THE LANCET, may I beg you will give insertion to the following explanatory observations in your next Number? In the commentary the following passage is to be found :-

"So far, therefore, as the act of divesting the theme of its ioniginary horrors, and of calling general attention, by personal appeal, to its examination, is a meritorious one, we cordially concar in the favourable estimate which we hear was formed by his additors of the manner in which Mr. Ellis discharged the daty he had undertaken. But if our report lecture be correct, we cannot state that we think his canneration of medical abuses was so comprehensive as it should have been in a discourse professedly de-voted to their discussion. Some of these omissions voted to their discussion. Some of these omissions are; indeed, so remarkable that we incan to notice them. In our experience every sound reformer has always looked upon the system of computory apparenticeships as one of the baneful usages of the surject profession in Ircland. They have also every itought the scale of fees to sinces haspital practice most oppressively and thiquitionly anjast. Yet, upon these two important items in the catalogue of medical abuse, no opinion was given in the oration apon these two important items in the catalogue of medical abuse, no opinion was given in the various of Mr. Ellis. In these confisions, which we presume were accidental, he was aeither just to himself, nor to the question which he designant to advocate, and he ought to have forecess that the absence of condemnation of surh glaring and no orisms features in the picture of medical economy in these countries, only his wise many justice, expuse him to the unsworthy apopicion that he was performing the play of Hamilet 'with the part of Hamilet left out by special desire.'"

I consider the first sentence of this passage complimentary to a degree quite beyond my humble deserts; for, in my opinion little praise is due to a person for the mere discharge of what he conceives to be a duty which he owes to the public, the profession, and the situation which he may chance to tanguished yourself in occupy in society. If I were so fortunate reform, and have as to obtain the approbation of my hearers much more attributable to the "good cause" in which I was embarked, than to the ability of its talentless, though zealous, advocate. In the second sentence you candidly assert that "if your report of the lecture be correct," that you do not think that my "enumeration of medical abuses was so extensive as it should have been, in a discourse professedly devoted to their discussion." Here, in the first instance, you have been led into a mistake; for, although the advertisement to which you make allusion in the first part of your commentary did announce that the "important subject of medical reform" would be introduced, it did not state that the lecture would be exclusively "devoted" to the discussion of medical abuses; and, indeed, even if it were, your reporter ought to know that "the catalogue" is much too long to be elaborately discussed within the short period usually allotted to a lecture. The fact is simply this; the lecture in question occupied an hour and three-quarters in its delivery; the first half-hour was spent in general observations on the subject of medical education, and the remainder of the time was devoted to the exposure of some of the most glaring of the countless and multifarious abuses with which the medical corporations, and the hospital and dispensary establishments of these countries, abound. will, therefore, I trust, give me credit for veracity when I assure you, that if I have failed to satisfy your reporter in the length of the discussion and in the character of the numerous topics it involved, the omissions complained of, if real, could be more fairly attributed to want of time than any disposition on my part of suppressing truth "by special desire," as delicately insinuated by the commentator on "the report. states that some of these omissions are indeed so remarkable that he means to notice them, and then goes on to say, that in his "experience every sound reformer has always looked upon the system of compulbaneful usages of the surgical profession in understand what the writer of this passage means; there is no such thing, nor has there been since 1828, as "a system of compulsory apprenticeships in the surgical profession in Ireland." Am I, therefore, to be censured because I did not betake myself to the tomb of a defunct monopoly, and exhume therefrom, as a topic for discussion, the ashes of an abuse which has had no material existence for the last seven years, when I found myriads of living and substantial ones obtruding themselves on my attention, and leadly demanding exposure? Would time

* This was an error of the press. The wood accidentally obtained its place in the page, after the make of eracers was aftered against in at the proof.—Er. L. signs, and in this wi

on the occasion alluded to, my success is permit, or common tense tolerate, such a line of procedure?

On the subject of hospital feet I believ I did not make any direct or specific observations; however, by a reference to the report, "if it be correct," it may be inferred that I am favourable to their total abolition. provided the medical officers be otherwise remunerated for their attendance, ar the time and trouble bestowed in giving clinical instruction to the pupils. When speaking of the French system of medical education I expressed an opinion favourable to it, and explained at the same time that there were no fees demanded from students for the privilege of witnessing hospital practice in Paris. I may here perhaps be permitted to add as an item in my defence against the insinuated charge of wilful omissions, that the pupil-money received at the Jervis-street hospital, to which I belong, is applied to the support of the institution, whilst the surgeous are left unrequited, not only for their professional attendance on the patients, but likewise for the time and trouble consumed in imparting clinical instruction to the pupils.

The last charge advanced is contained in the following passage. "In speaking for example, of hospital appointments derived by 'purchase' and 'descent,' our report of his lecture describes him to have said that the persons who are concerned in this infamous traffic and practice are warranted in their proceedings. Making every allowance for the intention of condemning the crime and saving the transgressor, which we consider to have been the object of Mr. Ellis in this nice discrimination, it is unquestionably true that no man has a right to enter into a compact which will be of detriment to the public welfare." Here again the reporter must have mistaken my meaning, if he supposed that I meant either to justify or defend in an unqualified manner, either the actors or the means by which the appointments alluded to are generally effected. However, when I express myself thus, I by no means admit the correctness of the assumed premises that all such appointments must necessarily "be productive of detriment to the public welfare." For instance, suppose a case in which an hospital surgeon, or physician, has, either from excess of occupation, indisposition, indifference, or any other cause, performed no part of the duties of his station, with the single exception of receiving annually his dividend of the pupil fund; yet he will not resign, and, unfortunately, he has enough of friends on the managing committee to save him from Opulsion. Now, would it not be more conductive to the interests and the objects of A tution, and "the public welfer a person could be induc be compelled, under the

inary exemplification, either of contempt of obligations seriously imposed, or of human lepravity, as exemplified in our medical occurs. I could, in support of my argunear, name, if necessary, an individual who as practically illustrated by his conduct for the last twenty years the truth of the position I here lay down; and I could likewise nention three or four instances of salulary exchanges which have taken place in pospital appointments, although they were effected chiefly by private arrangement. Give me leave to add that, in my opinion, the man who obstinately perseveres in monopolizing an important medical situation, and will, in the dog-and-the-manger fashion, neither do the duty, nor resign, but takes advantage of his spurious interest and vitiated influence with a corrupt committee, is much more culpable than a person who would vacate even for a pecuniary consideration. As long as the present system is permitted to continue in operation, and human nature remains what it is, moralize as we may, nepotism, patronage, and money, will exert a preponderating influence in determining medical appointments, both in Great Britain and Ireland, and the "infamous traffic and practice" will go uninterruptedly on, until restrained by the powerful arm of legislative cnactment. It appears to me that the adoption of the principle of the concours in reference to hospital appointments in these countries would be the most efficacious method of putting a stop to the "flagrant abuse" complained of; and that it is only by rendering the commission of "the crime" impracticable, that "the weapon" can be effectively wrested from "the aggressor." This is the opinion I expressed, and the doctrine which I endeavoured to promulgate, when delivering my unimportant sentiments on the important subject of MEDI-CAL REPORM.

I have the honour to remain, with great respect, your obedient humble servant, ANDREW ELLIS.

47, William-street, Dublin, Nov. 28th, 1835.

DELIRIUM WITH TREMOUR.

To the Editor .- Sin,-Your correspondent respecting Delirium Tremens, in your last Cumber, - and who need not have apryd anenymously in the matter,—is certainly correcting that I have insiderently over-ing that I have insiderently over-ing the control of the control of the control of the inside that my article on the wands as the time; this

setent successor who went be loth a pleating and a pride in faithfully discharging be important offices which his sense of duty sould imped him to finfil? This is by no neans an extravagantly conceived, or imatinary exemplification, either of contempt of chilotachesis seriously imposed or of human in the contempt of chilotachesis seriously imposed or of human in the contempt of the contempt of conte of it which is devoted to delirium tremens methodi-cally arranged into " Symptoms," Causes," " Diag-noris," and " Treatment;" but I could not find the noria," and " Treatment!" but I could not find the distinctions in question moter either of the heads "Apoptoms" and "Disguosia," where I experted to find their, and it was not muit! I had arrived nearly at the conclusion of the "Treatment," that I found the subject adverted to, and there only in an incidential manner. I may take occasion to state, that the first case which directed my attention to take distinction in question occurred in a dispensary patient in 1821; and that, about (my para ago, I attended, whith a few months of each other, three cases of the disease, with Mr. Houlton, of Lieson Grove. a sentlemen well with Mr. Houlton, of Lisson Grove, a gentleman well known to Dr. Elliotson and myself for his extensive literary and scientific acquirements, as well as for his experience; and one of those cases presented the inexperience; and one of those cases presented the in-flammatory characters, and occurred under the cir-cumstances which I have detailed at length. I do not dispute that the distinction was made about the same dispate that the distinction was made about the same time by Dr. Elliotson and myself; but that I have been indubted to his lecture I mengulvocally deny. Whoever will first read Dr. E. 's lecture, and imme-diately afterwards my articles on "Delirium," and "Delirium with tremon," will find listermal evidence of my originality. If I may ladge from my feelings and habits, I should lifer that, in glaneing—for I and do no more in many instances, even where I make references—over this lecture, I perceived nothing which particularly stuck me, otherwise I won'd have taken further notice of it; and that the topic in question should have escaped me is not sur-prising, when the head under which it was noticed, prising, when the head under which a was sound both briefly and incidentally, is taken into account.

I am, Sir, your obedient servant,

James Corland.

JAMES COPLAND. Bulstrode-street, Nov. 39, 1835.

CORRESPONDENTS.

WE have received another communication from Mr. ROGERS, in reply to the letter of Mr. G. Bury, relative to the proceedings at the late inquest at Farnham. We think we shall best consult the ends of justice by excluding from our columns any further remarks on the subjects in dispute until we have obtained on official copy of the depositions taken at the inquest. It is not necessary to say one word in justification of the conduct of Mr. Rogens. He has manfully stepped forward to protect the character of an innocent man; and in doing so, will obtain the approbation of every just intelligent member of society.

WE have not space for the letter signed C., but we give insertion, for the satisfaction of the writer and the information of his friends, to the following passage, which is strictly applicable to the case, from the excellent work of Jervis on the office and duty of Coroners. Nothing can be more evident than the fact that no inquest should have been held on the occasion in question :-

"The dying suddenly is not to be understood as relating to a fever, an apoplexy, or other visitation of God, and Coroners ought been afterwards added not in such cases, to obtrude themselves

stituting inquiry, but should wait until they of compileory residence which his proposition has a season for by the peace officers of the wider, cannot obtain from us any support as a particular to whom it is the duty of those in our accordance of the whose bounces or constructed degrees in sec. into private families for the purpose of innocuir, to make immediate communication.

whilst the body is fresh, and, if possible, whilst it remains in the same situation as tweether of the same of the same situation as twice the person died. But, under whatever circumstances, this authority must be exercised within the limits of a sound discretion; and unless there be a reassable ground of suspicion that the party came to his death of the proceedings of the kinds of the proceedings of the first party came to his death of the proceedings of the kinds of the proceedings of the kinds forwarded to usely his, M. May, that appear in the next Number of the Tue Langar.

Palla Justition and the letter of the proceedings of the proceedings of the state of the proceedings of the proceedings of the state of the proceedings of the state of the proceedings of suspicion that the party came to his death by violent and unnatural means, there is no occasion, except in the case of a person dying in jail, for the interference of the Coroner. In fact, Coroners have, on several occasions, been censured by the Court of Tiedemann. The likeness, taken while the King's Bench for holding repeated and un. King's Bench for holding repeated and unnecessary inquests, for the sake of enhancing their fees, where there was no reasonable probability that the deaths occurred from violence or unnatural causes.

a suggestion, "That any new Board of Metropolitan University Examiners should have the power of conferring degrees in surgery, candidates having bestowed on them, ac-

as an apothecary, he is liable to prosecution

A Shareholds will see that the scheme

We have not room this week for our

Philo-Justitia, and the letter of our correspondent from Brighton, next week.

Mr. Schloss has published a good litho-Professor was lately in London, by a Mr. S. Laurence, is very faithful. It reminds us of the portraits of Abernethy, but the face has a more scdate and intellectual expression. A very cunning cast of coun-A correspondent is anxious to throw out tenance was given by most of the painters to the English surgeon.

The BRITISH MEDICAL ALMANACK for 1836 has just been published by Messis. as at Glasgow and on the Continent, the Sherwood. We have not room this week to say more on the subject of this annual, cording to their acquirements, degrees of than that it is a work of infinite labour, and C.B., C.M., and C.D." contains a vast fund of matter expressly in-A Constant Reader .- If the party practise teresting and useful to the members of the medical profession.

METEOROLOGICAL REPORT.

(Retract from a Meteorological Journal kept at High Wycombe.

Lat. 51° 37′ 44" North, Long. 34° 45" West.)

Nov. 16 17 18 19 20 21		Therm	ometer.	Baron	ieler.	Rain.	Wind.	Weather.				
		Highest.	Lowest.	Highest.	Lowest.	Ins. Dels.						
		42.25 46.25 48.75 46.25 49.50 50.25 50.	40.50 35.25 32.50 42.	.56 .77 .75	29.73 29.63 .46 .72 .68 .61	0.21875	W. W. W. S.W.	The weather during the week generally dull and misty, with slight rain on the evening of the 22nd.—Almost brillian Aurora borealis was visible for several hours on the night of the 18th.				
Nov	23 24 25 26 27 28 29	48.25 50.50 47.25 51. 49.50 45.50	44.75 45.50 48.50 41.50 34.50	.54 .44 .14 .30	29.05 .55 .45 .14 .03 .67	0.05 0.24375 0.3375 0.0375	S. S.E. S.E. S.E. W. S.E.	The early part of the week fin and warm for the season; after wards rain daily, with ince vals of clear and fine weeth				

ANCE

Vot. I.] LONDON, SATURDAY, DECEMBER 12, 1835. [1835-36

LECTURES

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL,

Physician in Chier to the Hopital de la Pitie, and of Paris.

LECTURES II. & III. CONGESTION OF THE BRAIN.

GENTLEMEN,-In our last lecture I insisted at some length on the various difficulties which present themselves in the study of diseases of the nervous system, and into the history of diseases of the central nervous system, by which we mean the brain and spinal marrow. Let us commence with lesions of the circulation, and, first, with hyperemia, the most simple form. After congestion, we shall take up the history of inflammation, then pass to anemia, and, finally, terminate this portion of our subject with hemorrhages of the brain and spinal marrow. Such is the method we propose to adopt. As for inflammation of the meninges, it occupies our attention when we describe the diseases of serous membranes in general, we shall not, course.

Anatomical Forms of Cerebral Hyperemia.

cumscribed portion of the brain. It may, again, attack simultaneously both hemispheres, or it may be confined to only one, and this latter circumstance is not of very rare occurrence. When thus limited, the hypercmia very often gives rise to symptoms closely resembling those of cerebral hemorrhage, from which it is almost impossible to distinguish it. In some cases the congestion is bounded to a single fraction of the hemisphere, and, finally, cases have been observed where the injection was confined to one of the cerebral lobules. Professor, and Lecturer on the Principles and Thus you see, gentlemen, the phenomenon Practice of Medicine, in the Faculté de Médecine which now occupies our attention may follow exactly the anatomical divisions of the organ that is the seat of the malady. This is a curious circumstance, and not confined to the brain alone. How frequently do we observe the same thing in the lungs, where the inflammation sometimes occupies both sides of the chest, sometimes attacks but a single lung, at other times affects one lobe, endeavoured to explain the nature of those or, many, as in the confined to the ramificasome of the principal means by which they the only divisions of cerebral hyperemia; it may attack more particularly either the gray or the white substance, the congestion existing at some point of the surface of the brain, or being situated more or less deeply towards the centre of the organ. Hyperemia of the nervous centres may also be found in other parts of the brain : thus, it is not rare to observe a greater or less congestion of the pons varolii, or of the cerebellum; and in this latter organ, as in the cerebrum, the congestion may occupy the middle, or either of the lateral lobes. Finally, the spinal marrow alone may be affected, either generally, or at any one therefore, refer to it during the present point, from the protuberance to its termination in the cauda equina.

Here let us first examine briefly the anatomical characters of cerebral hypere-Hyperemia of the substance of the brain, mia; they are, in most cases, sufficiently br, in the coloration of the cereery common disease of the nervous sys- bral substance in cases of hyperemia is of be different forms under which it two kinds, presenting,—1st, either a uni-belf are numerous and vari- form reduces—or, 2nd, a reddish colour meneral, occupying the from a number of small red points that pebral substance; or occupy its substance. These two forms to a certain cir. again differ, as they may occupy the white or the gray cerebral matter. The spotted | died of an acute or a chronic disease, for inredness (rougeur pointillée) is most remark-individuals who are rapidly cut off by the able in the medullary portion of the brain, and when the latter is divided into thin spinal axis are more injected than in those slices, the surface exhibits an immense number of small bleeding points, as if it were scattered over with a quantity of fine has died of acute pneumonia, the other from red sand. These points are nothing but the orifices of so many divided vessels abnormally injected, and the peculiar appearance has given rise to the term " sandy injection," adopted by M. LALLEMAND and some other writers. This form of injection jection," may be general or partial, and is much more characteristic of hyperemia than the second form, in which the redness is uniform. The gray substance is more frequently the seat of this second form of coloration; however, in some cases it may exist in the white or medullary portion. In the gray matter it presents a great variety of shades, from a deep red, similar to that of mahogany, to a light or delicate rosy tint, and it has been observed to occupy either the substance forming the convolutions, or the gray matter which is disseminated through the different points of the cerebro-spinal mass.

In the greater number of cases of cerebral congestion, the anatomical changes are not confined to the brain alone; its membranes show at the same time more or less marks of hyperemia; the meninges are usually more injected than natural, and the veins of the pia mater in particular are large, and distended with a quantity of dark-looking blood; the sinuses of the dura mater are also engorged, and the whole organ bears marks of the irritation which has occupied it. In some cases we find troubled, sometimes clear, scrum in the ventricles, or in the cellular tissue beneath the arachnoid; sometimes, on the contrary, the surfaces of the brain are free from humidity, and the scrous membrane in particular scems to be in an abnormal state of dryness. We must attribute the presence of the serosity now alluded to, to an interruption of the circulation through the brain, in a word, to a mechanical cause, and when the congestion has been carried to a very high degree of intensity, we may find not only serum, but blood, effused from the vessels. It is necessary, however, to remember, that the blood is not effused into the nervous pulp, but into the cellular tissue, by which the different parts of the train and its various fibres are surrounded and supported.

We have now laid before you a rapid sketch of the several anatomical forms under which cerebral hyperemia may present itself, but it is of importance to observe that, in order to determine after death whether the phenomena we witness really belong to true hyperemia or not, you must take into account the two following circumstances. In the first place, you must take bral mass. You winto consideration whether the patient has examples of this

spinal axis are more injected than in those who die at the termination of a chronic malady; thus, in two patients, one of whom phthisis, the brain may exhibit very different degrees of injection. In the selbud place, we should be acquainted with the nature of the individual's death, as, for example, whether he died from asphyxia, &c. In this case we know the injection of the cerebral substance is always well marked, and cannot be regarded so completely as a pathological condition, as if the same degree of coloration were observed in a person who died of a tubercular affection. Finally, we should pay attention to the circumstance that some parts of the brain in a normal state are more deeply coloured than others; thus the gray substance appears much less vascular than the white; the cerebellum than the cerebrum; and, on the other hand, the age of the individual is not without some influence on the degree of injection in different parts of the brain; in the infant the white substance contains more vessels than in the adult; and in the adult more than in the aged person; and hence the brain of old persons, which presents the same degree of injection as that of a child, ought not to be regarded as being in a normal condition.

Influence of Temperature &c. on the Brain.

Let us now turn to the causes which promote the development of hyperemia of the cerebral hemispheres; and, first, as to the exterior world. In what manner does the atmospheric temperature influence the production of this disease? for, that it has an influence, and a very considerable one, we cannot permit ourselves for a moment to doubt. Experiments made upon animals, and the observation of certain cases in man, prove indubitably that an elevated temperature is one of the most powerful causes of cerebral congestion. Let us then examine, in the first place, the effects of heat. If we take a range of between twenty and fifty degrees (centigrade), and above fifty degrees death rapidly ensues, -if I say we assume this range as representing an clevated temperature, we shall find that in from fifty to forty degrees the economy may either resist the heat, or the individual dies rapidly, with all the symptoms of cerebral hyperemia. In from forty to thirty degrees the same phenomena are observed, but the congestion is usually less intense. In some cases, where death has ensued from exposure to a heaf degree, nothing has been found be ple congestion of the brain; was effused into the sub

Medicale, vol. 70, page 250. In proportion as physician, in which electro-puncture was the temperature descends, the acoldents of practised; at the moment the needle was which we speak become more and more rare. We may observe them at from thirty-five to thirty degrees, but at from thirty to twenty the tendency to cerebral congestion disappears, and within this latter limit its frequency ceases to be in direct proportion to the elevation of the temperature. Thus, gentlemen, an elevated temperature certainly has an influence in the production of cerebral hyperemia. I need only cite in proof the fact, which has frequently been witnessed in the course of very hot summers,-viz. the sudden death of reapers and other individuals employed in collecting in the harvest.

Again, a very low temperature has also a powerful influence in determining congestion of the brain; indeed, we may say a greater one than heat, if we except artificial temperature, and regard only the effects of climate. Thus, in Holland, it has been shown that cerebral congestions are more frequent in winter than at any other scason; this has been determined from a statistic of twenty years;* and at Turin, observa-! tions made with the same object for twentyfive years lead to a similar result. + Finally, who does not remember the unfortunate hiscoma and death ! Persons who pass suddenly are also exposed to cerebral congestions.

There are cases in which we see this hyany known cause, in a number of individuals at the same time, and reign in a manner altogether epidemic. M. LEURET has published some interesting cases of this kind, which you will find in the Journal des Progrés, 2nd series, vol. 2. Three individuals were suddenly attacked at Charenton with the symptoms of cerebral congestion; two died, and the substance of the brain appeared excessively injected, without any other alteration: at the same time many other individuals in the neighbourhood presented some slight symptoms of cerebral em-barrassment. M. Levrer could discover nothing to explain the circumstance, except a very strong south-west wind, which had prevailed during several days.

ith regard to electricity, I have very little a any. Observations are wanting to enable o form a decided opinion; however, we tion the case cited by a foreign

Publique &c., vol. 2, p. 231.

placed in communication with the electric fluid, the patient experienced a sensible pain in the head. We may apply the same remark to the influence of light in the production of hyperemia, as we have just done to that of electricity. We do not possess sufficient data to form a judgment; all we can say is, that only one-sixth of cerebral congestions commence in the night.

Effects of Stimulants and Narcotics.

The effects produced by alimentary substances on the development of hyperemia, have been considered by some writers as demonstrated; we can conceive how a rich and exciting diet may, by generating a greater quantity of blood in the system, favour a determination towards the head; but we think, that at the same time a predisposition must exist on the part of the individuals. On the other hand, alcoholic drinks have, beyond all doubt, a powerful influence in the production of the congestions under consideration, and we are induced to think that they may act not only sympathetically from the stomach, but also exercise a direct influence on the brain itself: this is the more probable, betory of the retreat of our armies from Russia cause after death the odour of alcohol has during a season of unexampled severity? been found disseminated through the sub-M. Launer and the other surgeons inform stance of that organ. Narcotics also may us, that the greater part of the persons who have a direct influence in determining cere-died during that retreat were affected at bral hyperemia; no matter how introduced first with vertigo, stapidity, &c., and then into the economy, or under what form, as fell into a state of somnolence, followed by opium, belladonna, tobacco, or prussic acid, we always find after death an identical from one extreme temperature to another, lesion, consisting in a greater or less hyperemia of the nervous centres. But these congestions have something special in their percinia declare itself suddenly, without character, something which prevents us from regarding the anatomical lesion as the whole disease. Observe cases of poisoning produced by narcotics, and you will convince yourselves that the brain must be the seat of modifications, which the scalpel indeed does not reveal after death, but which are proved by the diversity of the nature of the accidents that occur during life. A question which has long occupied physiologists with regard to the action of the substances now alluded to is the following :- " Do the special symptoms produced by each of these substances, depend on the influence each exercises on a special part of the brain?" If we rely on the experiments of several physiologists who are worthy of confidence, we must resolve this question in the affirmative, and believe that opium most readily produces congestion in the hemispheres of the brain, alcohol in the cerebellum, nux vomica in the spinal marrow, and belladonna in the tubercula quadrigemina. This latter fact especially would seem to result from the experiments of M. FLOURENS: but we must remark, that all these deductions have been drawn from

animals, and that the observations hitherto | From Derangements in other Organs made on the human subject, have neither confirmed in a sufficient manner, nor, on the other hand, have disproved, the results at which experimenters have arrived.

Congestion from Causes within the Brain.

Internal causes have a far greater and more extensive influence than agents which operate from the external world; we can discover various conditions of the brain itself that favour in the most evident manner the production of cerebral congestion: thus a forced exercise of the intellect, long-continued and severe study, powerful emotions, relapse. May we not refer the sleepiness such as fear and joy, the passions, &c., may in turn give rise to the several accidents that characterize hyperemia of the nervous centres. It is unnecessary to cite examples in support of this assertion : you will manifest influence in the production of cerefind them in every author; and your ex- bral hyperemia. Thus, in childhood, acute perience cannot fail to have furnished more inflammation of the stomach and bowels than one proof. Certain diseases of the brain, again, have the effect of determining in the organ a degree of congestion which has erroneously been regarded as the cause allow the cerebral effects of excitation in the of the malady itself; as in epilepsy, which digestive tube, all we shall say, with respect disease certainly does not depend upon a simple hyperemy of the brain, although the flammation of the mucous membrane may be congestion which accompanies or succeeds each access, may become the cause of certain accidents that we observe in epileptic patients. It is on this principle that we would sists for a greater or less period after the Jysis, contraction of the muscles; and, finally, whom the injection of alimentary substances various other symptoms of cerebral derange-in too great quantity invariably give rise ment. Accidental products in the brain, as to cerebral symptoms; the face became tubercles &c.; the cysts which succeed coloured, she was affected with severa handon old apoplectic effusions, hydatids, and several other products of the same kind, may all act as so many centres of irritation, mory : these symptoms sufficiently indicate and give rise from time to time to an hyperemy, varying in intensity and extent according to the cause which produces it. When congestions take place round the foreign bodies, as we may so call them, two orders of symptoms arise; the first are often permanent, and depend on the presence of the accidental product. The second are intermittent, like their cause, and are produced by an occasional congestion round the point of irritation. It is thus that we would account for the intermittent convulsions of children affected with tubercles of the brain, giving rise from time to time to accesses of hypercmia, and this is a remarkable example of intermittent phenomena produced by a permanent organic lesion. Finally, the different degrees of meningitis, especially when the disease is chronic, may often give rise to corresponding congestion in the neighbouring portion of the cerebral hemispheres.

Systems.

The causes external to the brain are next in order. The influence exercised by the different organs, whether healthy or in a state of disease, on the production or relapse of cerebral congestions, merits our attention. And first for the digestive tube.

We may affirm, without danger of error, that certain acts of the stomach may occasion the development of cerebral congestion. particularly in individuals who are predisposed: thus, a too active function of digestion has more than once been the cause of affecting certain individuals after a full meal. to a slight degree of the same congestion? A pathological condition of the stomach does frequently, and beyond all doubt, exercise a may be accompanied by accidents that announce the existence of congestion in the brain; however, though we are willing to to typhus fever, is, that here possibly the inthe cause of cerebral congestion, as it frequently accompanies that disease.

A chronic affection of the intestinal canal may likewise produce congestion of the explain the comatose state which often per- brain; but much more rarely than acute sists for a greater or less period after the gastro-enteritis; however, we cannot doubt access; the troubles of intelligence, delirium, its influence in some particular cases. Thus &c.; certain disorders of movement, as para- I have had occasion to treat a lady, in ache, ringing in the cars, weakness and numbness of the arm, and even loss of mean excess of blood in the brain, and what is remarkable, they never appeared except in consequence of some error of regimen. In another case, that of a patient labouring under chronic gastritis, every time the affection of the stomach became exasperated, the patient was seized with paralysis of the arın.

> Irritation of the small intestines may also be arranged amongst the undoubted causes of cerebral hyperemia. Who is macquainted with the effects of prolonged constitution in determining the blood towards the brain?

> The circulatory opparatus may, also, by its various conditions, produce different degrees of cerebral congestion. It is easy to conceive how the various degrees of force which the blood is carried to the influence the development o that organ. We have fre of sceing patients subje tions of the heart. In

tion of the circulating medium is accom-panied with giddiness, ringing in the ears, and other symptoms of congestion in the brain. Again, any obstacle to the free return of blood from the head may give rise to a similar result. Sometimes the impediment exists within the cavity of the cranium; the researches of Dr. Tonnelle prove in a staking manner the coincidence of hyperemia, and even cerebral hemorrhage, with an obliteration more or less ancient of one of the sinuses of the dura mater. (Journal Hebdomadaire, April 1830.) M. GINTRAC, of Bordeaux, has related a case in which the congestion was caused by an obliteration of the longitudinal sinus. A tumour pressing on the jugular vein may also hecome a cause; and the congestion observed in malefactors who have been hanged, evidently depends on the same circumstance. viz., a mechanical obstacle to the free return of blood from the head. A change in the circulation of the brain is often produced by very slight causes: thus in some individuals, a mere change of position from the vertical to the horizontal posture, and vice rerea, is enough to occasion vertigo, and some persons can never get up or lie down in bed without experiencing a similar sensation.

The disease termed apoplery of new-born children may be, in most cases, attributed to an obstruction of the venous circulation from the brain; and instances are on record where death has been produced by the pressure of the chord round the child's neck, causing a fatal congestion of blood. Finally under this head, we may arrange the effects of certain violent efforts, such as the act of vomiting, defecation, &c.

The different organic diseases of the hearl, which oppose the free return of blood from the head, or by turns retard and necelerate the circulation in a remarkable manner, must also be ranged amongst the causes that give rise to cerebral hyperemy. Nor are we to neglect the influence evidently produced by simple acceleration of the circulation during the course of ordinary or intermittent fevers. We cannot certainly explain in any other manner the headache, giddiness, pains in the limbs, &c., which accompany every access of fever at all well marked.

The development of cerebral congestion is also favoured by the existence of inflammation in some other organ. You know that congestion forms one of the elements of inflammation, and this element may be repeated in the brain under three different circumstances, which we shall now enumerate. 1st, Before the inflammation taker place in the organ; as for example, in the same of the commandation, when we observe the existence of deficium, the coma, during the febrile active appearance of the cutter of the

time as the inflammation; witness erysiperinging in the earl, has of the scalp and face, which is often fatal, with cerebral symptoms, leaving no ther trace of lesion in the brain, than an head may give rise netimes the impediately of the cranium; and the trace of lesion in the brain, than an hyperemy more or less well marked. 3rd, The symptoms of congestion may set in after the inflammation has completely disappeared; of this we may cite examples in the congestions that follow the disappear ance of a cutaneous malady, the sudden restored in the face of a cutaneous malady, the sudden restored in the face of a cutaneous malady, the sudden restored in the face of a cutaneous malady of the face of a cutaneous malady, the sudden restored in the face of the

There are, again, cases in which we in vain seek the cause of cerebral congestion in the access of intense fever, or in the inflammation of another portion of the body: here it depends on a certain congestional diathesis, if we may so use the expression, on a morbid condition of the system, in which the different organs become in turns congested. We have seen cases where the nasal fossæ, the uterus, the lungs, the intestinal canal, and the brain, have shown symptoms of congestion, one after the other, without our being able to discover any thing in the patient's constitution or mode of life to explain this singular phenomenon. Having thus studied the effects produced by various conditions of the solids, we may ask ourselves whether the quality of the blood exercises any influence on the production of symptoms of hyperemia of the brain. We cannot doubt but that persons whose blood contains a great deal of fibrine and colouring matter, in a word, individuals endowed with what is called a sanguineous temperament, are predisposed to cerebral congestions; but on the other hand, the absence of this temperament by no means ensures a patient against the dangers of hyperemia, a disease which, as you have seen, may be occasioned by so many other causes.

Affections of the respiratory opparatus can rarely enter amongst the causes of congestion of the brain; we can only admit them as such when they produce an obstacle to the circulation, as in asphyxia or croup, and then they are to be ranged under some of the categories already mentioned.

With regard to the secretory apparatus, I may observe, that when in a normal state, the different secretions do not seem to exercise any remarkable influence in favouring the development of the disease which now occupies our attention. However, in certain morbid conditions, as for example, on the suppression of a discharge to which the economy has been for a long time accusomed, they may undoubtedly give rise to a determination of blood towards the head. Some writers have greatly exaggerated the effects arising from the stoppage of suppuration, whether once artificially excited, or originating in an accidental lesion. Although I would not deny that such effects may sometimes take place, I am inclined to think that nuch greater value has been attributed to 2nd, At the same this circumstance than it really deserves.

The genital apparatus is the last whose in- and in greater existration than if natural fluence in cerebral congestion we have now to examine. The reproductive organs, gentlemen, give rise to frequent derangements of the circulation in the brain, as well as in several other parts of the economy; this is particularly seen in young females as they approach the age of puberty. How many accidents dependent on cerebral hyperemy do we witness in young females at the period of their first menstruction ! And at the decline of life, when the normal stoppage of the menstrual flux is about to withdraw the constitution from an influence to which it has been habituated for a long series of years, how often do we see the same phenomena repeated! Finally, in suppression of the catamenia, it is not an unusual thing for the patient, at each period, to exhibit the various symptoms that indicate a more or less severe congestion of the brain.

These are circumstances, gentlemen, that you should never neglect in practice; and above all things, watch with anxiety and care the signs of congestion towards different organs, particularly towards the chest, in some young girls, at each period of menstruction; be on your guard here, I say, or you may render yourselves culpable of a fatal neglect; for in too many cases, the periodical determination to the thoracic viscera awakens a latent disease, which, when once advanced, leaves the patient without hope, and medicine without a resource. The different degrees of intensity with which an individual may ahandon himself to the generative act, also enter amongst the causes of cerebral hyperemia. Thus an abuse of venereal pleasures may become a curse, and, on the other hand, a similar effect may arise from complete abstinence.

With regard to the influence of age, I may observe, that individuals at every period of life, from infancy to decrepitude, are subject to the disease which has just occupied our attention; but we do not think it proved, as many writers have advanced, that cerebral congestion is most common in old age. We have collected numerous examples in children of the tenderest infancy, and think the only conclusion warranted by facts is, that the maximum of intensity may be placed after the age of forty.

We have now, gentlemen, touched upon some of the principal causes which give rise to congestion of the centre of the nervous system; and in reviewing them, with the design of adopting some general classification, we find that they may be comprised under three heads. Thus many cases of congestion of the hrain are evidently produced under the influence of certain mechanical forces, and this is a circumstance which can be very readily understood. Other causes art ligence is clear, the reasoning by producing a modification of force in the turbed, the memory and a circulation of the brain itself; the blood is carried to that organ with greater rapidity dangerous form Inde

and congestion is a frequent cost quence of this state. Finally, in other cases of cerebral congestion, we have a diminished activity of the vessels of the brain; the quantity of blood which circulater through that organ is reduced in quantity, and this circumstance often gives rise to functional disorders exactly similar to those occasioned by the presence of a superabundant quantity of blood. Thus, then, we have three species of causes engaged in the production of cerebral congestion; some are purely mechanical, others are active, and others are much less active or are even passive; and the three conditions resulting from the operation of the above-mentioned influences may, with advantage, be distinguished into mechanical, active, and passive hyperemia.

The Symptoms of Cerebral Congestion.

Having thus taken a brief review of the causes of cerebral congestion, let us now, gentlemen, pass to a consideration of the symptoms accompanying the disease. These are extremely different in different cases, and vary according to a multitude of circumstances which it is not always in the power of the physician to seize; we may, however, lay it down as well established by observation and experience, that the symptoms of cerebral congestion vary according to three principal circumstances: the first is the intensity of the lesion, which produces a variety in the symptoms of all diseases in general; the second is the duration of the congestive state; thirdly, and finally, the symptoms vary according to the diversity of the points of the nervous system which may be affected. These are the three main circumstances, gentlemen, according to which the symptoms of cerebral hyperemia are at one time well marked, at another obscure, and present the great diversity of appearances which render it so difficult in many cases to form a certain or correct diagnosis in diseases of the nervous system. With regard to the last circumstance, namely, the diverse points of that system in which congestion may exist, we are compelled, for the sake of order and clearness, to study, separately, congestion as it may occur in the cerebral hemispheres (or brain), in the cerebellum, and in the spinal marrow. The first of these may present itself under a variety of forms, each of which we shall describe apart, and endeavour to point out the most striking characters by which it is distinguished from the others.

First Variety of Cerebral Congestion,

In the first form of congestion to willow now direct your attention the great find tions of the brain remain intact, ti altered: this is the mo

ranged. The Principal modifications of sensibility characterizing this simple form of hyperemia are, pain in the head, which is sometimes carried to a very severe extent; vertigo; ringing or singing in the ears, momentary aberration or loss of sight, giddi-&c. The locomotive powers are at the same time variously affected: in some cases you find the movements executed with dulness and evident disinclination; the patient is heavy and inclined to sleep; while in others he is tormented with a constant desire of exercise, he is constantly on his legs, and cannot rest for a few moments without experiencing a troublesome feeling of anxiety and restlessness; in other cases, again, you will remark nothing but some fourmillemens in the limbs, or sometimes about the face. In certain cases the local symptoms seem to affect especially the circulatory apparatus. At the same time that the patients present many of the symptoms of cerebral congestion, they are attacked with frequent and violent palpitations of the heart, throbbing of the arteries, &c.; but observe, gentlemen, that these palpitations may occur under two very different circumstances, which it is of some importance to distinguish; in one the trouble of the heart and circulatory apparatus is evidently dependent upon the derangement which has taken place in the nervous system, because it does not manifest itself until some time after the symptoms of congestion in the brain; in other cases, on the contrary, the palpitations are connected with some condition of the heart or vascular system, giving rise to increased energy of action in that organ, and subsequently to congestion of the cerebral vessels. The influence of this latter cause is manifest in a great number of cases which we have witnessed. We have frequently seen individuals in whom any slight augmentation of the palpitations to which they were ordinarily subject, was constantly attended with giddiness, vertigo, singing in the cars, or even a well-marked sensation of numbress in the extremities of the fingers. Hence we are compelled to admit that in a certain number of cases the palpitations of the heart, to which we have just alluded, may either follow the derangement in the nervous centre, or be the cause of congestion, by the increased force with which the blood is sent to the brain. It is unnecessary for me to point out the importance of this distinction in a practical point of view.

When congestion of the cerebral hemiarcs is carried to any remarkable degree sity, the symptoms become more gea economy at large seems to esure of the disturbance temporal arteries now

we observe may all be selected to lesions of so violently that their pulsations may be re-the sensitivity, which is but slightly de-cognised by the eye as well as the touch; the cheeks are suffused with a brilliant red colour; the vessels of the ocular conjunctiva become injected; even the forehead sometimes partakes of the coloration of the face, and the whole veins of the head show marks of congestion; the small and large branches are equally distended with blood. In this state of the circulation hemorrhage may take place from the vessels of the nares, and dissipate all the unpleasant symptoms; or congestions may form in various other parts and organs of the body, giving rise to a number of secondary accidents; for, like most other diseases, cerebral congestion may exist singly, or he complicated with a variety of other lesions.

The species of cerebral hyperemia which now occupies our attention may present itself under two varieties, according as it is accompanied by signs of febrile reaction or not,according as it exists with what is called inflammatory fever, or is not attended with any symptoms of general derangement of the circulation. In the first cas when congestion of the brain is attended with fever, its duration is generally very limited: in the second, its duration is indeterminate. Thus, in some cases, the disease does not seem to exist beyond a few hours, after which the headache, giddiness, and other symptoms, completely disappear. In other cases, the signs of cerebral hyperemia may continue with little or no inter-mission for several months, or even for whole years together; thus, I have seen patients who showed the first symptoms of congestion in the head, at the age of twenty, and still continued subject to more or less severe attacks, up to the age of forty, fifty, or fifty five, or even during the whole life. The duration, then, of this disease is very uncertain, and may, in certain cases, be prolonged to a great length of time. Sometimes the congestion is, as it were, permanent, the patient is constantly affected with giddiness, pain in the head, noise in the cars, &c.; but more frequently it becomes suspended for an uncertain period of time. and then returns under the infinence of causes which we can occasionally appreciate, but which in many cases escape discovery altogether.

Congestion of the brain is a disease of very frequent occurrence, and when once a patient has been affected with it, the chances that he has it again are very numerous; the period of relapse is, as we have just noticed, at one time uncertain; at another, the congestion recurs at fixed periods, at the change of life, as it is called, at certain changes of season, &c. I remember the case of a patient who, during the course of several years, was attacked towards the end of every winter with symptoms of severe conforce; in some cases gostion of the brain. The accidents per-

sisted from twelve to fifteen days, and then with nearly is. When raised up they de went off, to return again at the same period not fall down in that dead bestess man on the following year. In some cases the ner which distinguishes refer but enay periods of relapse are so regular that the disease hears all the characters of an intermittent fever, so far at least as periodicity is concerned; and on examining authors you will find examples in which the access simu. lated that of a quotidian or a tertian ague. MEAD has left us the history of a man who fell down in a fit of apoplexy every year about the month of March; sensation and motion were completely lost for a few minutes, after which the individual returned to himself, but for ten or twelve minutes more he was unable to speak, and was affected with a trembling motion of the right arm; these symptoms were quickly dissipated, and the patient recovered the use of all his functions. When the return of the congestive state takes place at short intervals, it constitutes what many authors have called "intermittent apoplexy," a form of disease of which I myself have witnessed some very striking examples, and which often gives way rapidly under the administration of quinine in elevated doses.

This first and simple form of cerebral congestion may be succeeded by various others, or if it be prolonged for any considerable period of time, it may give rise to hemorrhage into the substance of the brain, or ramollissement, but in the majority of cases it may be dissipated by the assiduous employment of means which we shall have occasion to notice presently: its characteristic marks are, the intelligence intact, sensibility but slightly modified.

Second Variety of Cerebral Congestion.

Let us now take up the second form of congestion of the cerebral hemispheres. In this variety of the disease, the individual, either after having suffered for a greater or less period from giddiness, confusion of sight, and other symptoms of congestion, or without having previously experienced any of these accidents, suddenly falls down, deprived of all consciousness. This form of the malady is hence called a "coup de sang," and is characterized, as we have just said, by an instantaneous loss of consciousness, with or without previous symptoms. The patient suddenly falls to the ground, deprived at once of intelligence, of motion, and of sensation, as if hemorrhage to a considerable extent had taken place in one of the cerebral hemispheres; however, it is distinguished from this latter affection by the circumstance that it is very rarely accompanied by hemiplegia; the symptoms connected with locomotion, in cases of cerebral hyperemia, are much more frequently those of general paralysis than hemiplegia. Sometimes, however, although the individual lies without motion and consciousness, the limbs are not, properly speaking, struck severe headache is the

even remain elevated.

In the second form of cerebral congestion death may suddenly take place; the coup de sang carries off the individual as rapidly as an access of apoplexy; in other cases the attack may last for some hours; the patient may remain in a comatose state from a lev minutes to twenty-four or thirty hours nothing is more variable. Finally, in other cases, the accidents go off by degrees; the intelligence, motion, and sensation, are gradually re-established, and, after a lapse o time which varies as much as the duration of the attack itself, the patient is restored to the full enjoyment of his health. It is astonishing to see how rapidly the recovery may take place from a state in which the patient has lain, perhaps for a considerable time, without consciousness, power of mo tion, &c., -in a word, with all the symptom of an apoplectic stroke; yet such a case fre quently occurs in practice; and we find the individual, whom we left labouring unde the most alarming symptoms, restored t perfect health, without any lesion of move ment or sensation being left behind. I cases of this kind, we are certainly force to admit the existence of simple hyperemi of the cerebral substance; we cannot for moment imagine that actual hemorrhag has taken place, for the sudden and perfec recovery of the functions is quite incom patible with the latter supposition. Genera paralysis, then, as contra-distinguished from hemiplegia, or loss of motion in one side c the body, is the characteristic symptom of the form of cerebral congestion which w have just now described under the familia denomination of "coup de sang."

I said that the patient sometimes recover unexpectedly from the state of coma int which the undue determination of blood t the brain has plunged him; this is not al ways the case; on the contrary, the acci dents often persist in a greater or less de gree, and consist in lesions of the intelli gence, of motion, or of sensation, the thre great functions of the life of relation. Thus after the patient has recovered from th first alarming effects of the coup de sans the intelligence often remains dull and ob tuse; the patient has an air of stapidity, o looks frightened; he is unwilling to be dis turbed, or to walk about; in some cases even, we observe delirium; these symptom may persist for four, five, or six days, and then the patient recovers the full exercis of his intellectual faculties. The sensibilit, may likewise remain affected; the pader conserves for some time a sonsation of p ness in different parts of the hod extremities particularly, by with prickings in the 1

emains, and this may persist with some in- or four days. Hence, whenever the acciensity for a considerable length of time dents which succeed an attack of the kind Finally, gentlemen, certain patients present we now describe, do not persist beyond the nerely a derangement in the organs of loconotion; thus some are affected with weakiess of the limbs, incapability of executing with force the ordinary movements, and this s remarked especially in the abdominal exfor some time after the coup de sang; the impression seems directed entirely to the muscles of the tongue, and articulation is consequently imperfect and embarrassed: this latter symptom is frequently observed as a consequence of simple congestion of the brain; however, when the accidents which we have just enumerated persist for any length of time, we have reason to conclude that something more exists in the centre of the nervous system than mere congestion; the obstinacy of the secondary symptoms would indicate the presence of a permanent cause - viz. cerebral hemorrhage.

Third Variety of Cerebral Congestion.

Let us now turn to the third form or variety under which hyperemia of the brain may present itself. In this form we observe precisely the same accidents of intelligence, motion, and sensation, as in the former one, but we have something more than the general resolution of the limbs, which we give as the characteristic mark of the second variety; we here remark a phenomenon that connects cerebral congestion with hemorrhage-viz. hemiplegia, and this circumstance frequently gives rise to great difficulty in the diagnosis. I have seen patients struck with the coup de sang who saddenly became hemiplogic, and presented a combination of all the symptoms that are produced by cerebial homorrhage, but these were dissipated in a short time by the ordinary means; here we cannot admit the existence of hemorrhage into the substance of the brain; it is impossible to conceive that a clot of blood should be removed in a few hours: the accidents can only be attributed paralysis. to congestion, and we are compelled to allow that a symptom which is almost exclusively attached to effusion of blood into one of the hemispheres, may also present itself in coninnction with a simple determination to the head. This sort of paralysis is often seen after attacks of epilepsy, where the congestion which accompanies or succeeds the discase, frequently gives rise to certain disorders of movement; and, independently of the rapidity with which these accidents disappear, we have further reason for referring them simply to congestion, from the fact the state of the circulation in the brain the access, not unfrequently leaves effects on the patient's countc-

space of a few days, we may rigidly con-clude the absence of any hemorrhage into the substance of the brain.

The hemiplegia accompanying this third form of cerebral congestion may disappear nearly as rapidly as it was produced, or it may continue for an indefinite time after the complete restoration of the intellect and other functions, and in this latter case we must attribute it to something beyond congestion; the persistence of the loss of motion infers the operation of some permanent cause, which is an effusion of blood from the vessels of the brain, that has accompanied or been caused by their state of congestion. The observations which we have just made, tend to establish that hemiplegia is most commonly connected with cerebral hemorrhage, while general paralysis or resolution of the members is more frequently observed with simple hyperemia of the brain; we must not, however, generalize too rapidly, especially in diseases of the brain. The cases published by M. LEURET, show that hemiplegia may exist with nothing but an abnormal injection of the versels of the brain. I could find, perhaps, fifty similar cases in the science, which demonstrate the same fact, and hence we are compelled to draw a conclusion, which indeed will frequently present itself to us during the investigation of diseases of the nervous system-viz., that functional derangements are not always accompanied by changes of structure appreciable to our senses, and that in the case before us, some impression remains in the nervous system, causing a derangement of locomotion long after the coup de sang has passed away.

I should not forget to mention that in infants and children this form of cerebral hyperemia is chiefly shown by convulsions, and not by the production of general or partial

Fourth Variety of Cerebral Congestion.

Now for the fourth variety of congestion. In this form, the intellect remains intact; the only phenomena we observe are modifications of sensibility or motility; and let me here remark to you a fact which is well worthy of attention, namely, that in a great number of diseases of the brain the intellect remains unimpaired amidst lesions which apparently should have produced its complete destruction. Here then we have no loss of consciousness as in the former varicties. The first symptom which shows itself is paralysis, often confined to some nascles of the face, but in other cases excases, the patient pre- tending to the whole of one side of the body. on the conjunctiva, This paralysis often disappears in a rapid ich disappear in three manner, a few hours after its production; and here certainly we cannot attribute it to the effects of cerebral hemorrhage. Some very curious cases have been published, which illustrate the progress and termination of this form of congestion; perhaps one of the most remarkable is that we owe to M. Gintrac, of Bordeaux.* of which the fol- The autopsy reveals nothing but a vivid in-lowing is a brief account: "A child, four jection of the substance of the brain. years of age, had been attacked from birth by an affection which consisted in a momentary suspension of voluntary motion, that came on at intervals; the access was not preceded by any premonitory symp-toms. If the child were standing up when seized, his limbs bent under him, the trunk gave way, and he fell down at once on the ground; when in bed, the access was anthe muscles. During the attack or fit the of symptoms? Can we discover any prinsenses appeared somewhat dulied, and the ciple to reconcile the apparent contradicsensibility was diminished; the eyes re- tions we meet with? Can we explain the mained open and immovable; the sense of diversity of functional lesion by a difference hearing remained; the intellectual faculties were perfect, but the child was unable to utter a single syllable. This child died of some other disease, and on examination, no alteration was found in the brain except the transformation of the superior longitudinal sinus into a hard chord, filled with a solid clot of blood." In this form, then, we have the intellect untouched, we have some modification of the locomotive power, and we have, finally, a suspension of some of the senses, while the others remain free from injury.

Fifth Variety of Cerebral Congestion.

In the fifth variety of cerebral congestion the lesion is chiefly directed to the intellectual faculties. Hyperemia of the brain, in this case, does not produce coma; it does not exercise any very remarkable influence on the movements of the body; the principal phenomenon is the sudden appearance of furious delirium, accompanied by an extraordinary development of muscular localize the functions of the brain, but, I re force.

This form of the disease is highly dangerous, and frequently compromises the life of the individual. In some cases the dehirium is accompanied with so violent a perturbation of the brain that the patient dies in the access, vociferating loudly, agitated in the most severe manner, or making such powerful and long-continued efforts that life becomes extinct in the struggle. I have more than once been struck with the remarkable phenomenon of which I now speak. I have watched the case closely during life, examined the brain after death with the greatest care, and found nothing which could explain the excessive derangement of the intellectual functions, except marks of great congestion in the cerebral hemispheres.

In many cases this form of peremis, commencing in extreme deligination and terminating in coma, or, more descently, in an access of the most violent muscular efforts, has produced death as suddenly as it the patient had been struck by lightning

Different Symptoms from Similar Lesion.

These are the principal forms under which cerebral congestion may present itself to us; each you see has its characteristic mark. The phenomena accompanying each form are distinct, and on passing them in review we cannot help asking ourselves these questions,-" How comes it that the same nounced merely by a complete relaxation of identical lesion gives rise to such a variety in the seat or duration of the organic lesion?" I think that a solution of the questions we have now put is chiefly to be found in the different parts of the brain which are affected; and that observations establish this general rule, that the discrepancy of symptoms which present themselves in the various forms of cerebral hyperemia depends not only on the duration or the malady, but still more upon the seat it may occupy in the central organ of the nervous system; but if you wish to know what particular parts of the brain are implicated when such or such symptoms ap pear, I must confess my ignorance: the state of the science does not yet permit me to arrive at the solution of this most in teresting problem, although we have many excellent reasons for thinking that by i alone we can clear up the difficulties which now pursue us in our study of diseases of the nervous system.

Many attempts have already been made to gret to say, most of them appear to be pre mature. Thus we have several observations which tend to establish that sensation and motion chiefly reside in the gray or cortica substance, and that when this portior of the brain is injured, the two proper ties just mentioned principally suffer. Thi may possibly be the case, but we have no proof of it, and until something better i offered than conjecture, we cannot thinl ourselves justified in coming to any conclu sions; there are, however, some circum stances which lend it a colouring of probability. When the gray substance of the brain is injured, we certainly have oper aberration of the intellect than when lesion exists in other parts, and fro with meningitis, we mi that the superficies of

destined to the shift

^{*} Recueil d'Observations, Bordeaux, 1536.

faculties may, in fact, readily under- various modifications in the different forms standinow descriptions should vary accord-of cerebral congestion, without our being ing as the supportion may occupy the an-terior portion of the brain, or the depth of ticularly to one form than to another; someits substance, or the various parts compre-hended in the base of the organ. We can easily conceive a difference of external phenonnega according as compression may be cry, as if the integuments were the seat of exercised on the corpus callosum, the that intense inflammation. Here, again, many lami, the pons, or the cerebellum; indeed, this ought to be the case, but, unfortunately, experience does not enable us to say how or when. Let us not however be discouraged, but hope for better times; let us examine with greater care, let us observe more, and, above all, collect a greater number of observations; for nothing can be more irrational than the your attention. error into which some writers fall of drawattention.

Affections of the Cerebellum.

authors would thus explain.

In some periods of cerebral congestion, we observe a certain number of symptoms which it is very difficult to connect with any drunk; he is stupid, his appearance is extraordinary; when he attempts to walk, the organs of locomotion, though still capable of acting, are evidently deranged; his step by him in an imperfect manner and with difficulty. Here is a case in which we might suppose that the lesion was principally situin the cerebellum, but we cannot affirm his with any certainty. We cannot bring ed my rigorous proof of it; indeed the which have as yet been made, are bing that in this disordered motions, the cerebel-train chiefly or solely

times it is exalted in a very extraordinary degree; the patient is unwilling to be disturbed, or the least touch produces an acute cry, as if the integuments were the seat of writers will tell you that the cerebellum is the part of the brain chiefly attacked, but I must confess to you that I do not find this opinion confirmed, either by my own observations, or by an examination of the cases we possess. However, explain it as you will, the fact exists, and is not the less worthy of

There are also a certain number of ing general conclusions from two or three facts connected with this part of the subisolated facts, and attempting to explain ject, of which we shall seize the present opphenomena before any solid groundwork portunity to speak, as they seem to throw has been established upon which they can some light on a doctrine, which, though not huild an hypothesis worthy of confidence or yet established, as I said before, upon proofs, yet has some probabilities in its favour. I have seen patients who at each return of the menstrual period (and in these cases the The remarks we have hitherto made, refer catamenia are always painful), were affected entirely to one portion of the brain; but with more or less severe pain in the back of there is another part of that organ to which the head; this phenomenon was constant, peculiar functions have been attributed, and and I possess three or four facts of the kind. many authors have thought that pathologi- Again, in one case, each time the individual cal observations ought to show whether these had connection with a woman, he was seized functions have justly been attributed to it with violent pain in the oscipital region; or not. The part I now allude to is the this symptom constantly followed each act cerebellum: some physiologists place the of copulation, and was accompanied by power which governs the organs of genera-tion in the cerebellum; others connect it In relating these cases, gentlemen, I merely more particularly with locomotion, &c.; but give you facts as I have observed them; reif you examine the observations which are member I do not connect them with any recorded in the different works upon diseases hypothesis or explanation. I have also had of the nervous system, you must perceive an opportunity of witnessing a case of priathat many of these hypotheses are at least pism in a young man, accompanied by con-premature, and that we cannot refer to it a stant and very neute pain in the back of the a great variety of the symptoms which their head; this state lasted for three months, at the expiration of which time, I was sent for to see the patient, who had been suddenly attacked with alarming symptoms. On my arrival, I found him labouring under all the particular lesion, or explain by any one of symptoms of acute meningitis. This patient the hypotheses as yet formed; in these cases died, and though I had an opportunity of the individual looks exactly as if he were examining the body, the fact is not less certain; besides, the inflammation of the brain was so well characterized, as to leave doubt of its existence. Here, then, are a certain number of cases in which we may presume is vacillating, and progression is performed that congestion of the cerebellum coexisted with a series of symptoms peculiarly connected with the generative apparatus, but I would not here build up any thing on so small a number of observations.

Congestion of the Spinal Marrow.

We now come to congestion of that part of the nervous system which is contained in the vertebral canal. Hyperemia of the spinal marrow is much less frequently met thirty undergoes with than congestion of the central portion,

lambar portion. The symptoms which are symptoms continue for a length of time; connected with a congestive state of the in others we have some patients who prespinal macrow consist entirely in lesions of sensibility and motion for movement and sensibility, together with a a considerable period, recover auddenly, and few that may be referred to derangements in a most unexpect d manner. of organic life; the brain remains intact, and the intelligence consequently does not brain differs in different individuals accordpresent any of those phenomena which so ing to the seat of the lesion, and its duration, often accompany a similar pathological con- and according to the patient's mode of life, dition of the cerebrum.

take place in a rapid manner, or may be estimate. You have also seen how it often formed gradually and slowly; let us first terminates in death. When the discase, consider the rapid form. Here you may however, ends favourably, we may someobserve three varieties that we should distinct observe at the moment of its termitinguish from one another. In the first we nation certain critical phenomena that are have a special lesion of motility. The paralso found to accompany the close or detient is suddenly seized with paralysis, cline of other diseases. Thus some patients which may affect the four extremities at are relieved from the headache, vertigo, and the same time, or be confined to two of other symptoms of congestion in the brain, them, the superior or the inferior limbs. In by a copious hemorrhage from the nostrils some cases, however, which are excessively. This is a phenomenon very frequently obrare, the loss of motion may exist only in served, and must be familiar to you all. In the members on the same side of the body; other cases the musual appearance of the the patient is attacked with a true hemiple; menstrual flux dissipates the cerebral sympgia, but there you will generally find that the tons; I had a patient under my own care, lesion has implicated the brain also, and who exhibited a curious phenomena of this that the spinal marrow is not the only part; kind. She was frequently subject to attacks of the system which presents traces of con- of congestion towards the brain, and each gestion. The respiration may be compro- time the symptoms gave way on the appearmised in cases of this kind, from paralysis of ance of a copious flux of scrosity from the the muscles of the chest, of the diaphragm, mose; the quantity of fluid thus discharged &c., and the patient may die completely was really surprising, and was sufficient to asphyxiated. The symptoms we have just werthree or four handkerchiefs in the course enumerated, are in certain cases also at of the day. tended with convulsive motions that are partial or general. In the second form of congestion of the spinal marrow the principal lesion is not munifested in the organs; the several forms of cerebral hyperemia, and of locomotion, but in the sensibility. Some-described the symptoms by which they are times we find a complete loss of sensation accompanied, let us turn to the therapeutic in various parts of the body; at others the question, and point out the principal indi-modification of sensibility is shown by cations of treatment. There are three: the prickings, or a creeping sensation in divers first, and perhaps I might say the principoints, by pains in the surface of the skin, pal, is to combat the cause which has pro-or occupying the depth of a member. Fi- duced or keeps the determination of blood nally, in some cases, these pains occupy the to the brain; this is a point of the atmost trajects of the nervous chords, and then importance, and without attention to it simulate in a very close manner diseases your other means will frequently fail; seek, called "neuralgia." In the third form we then, I say, the cause of the disease if you have a simultaneous loss of sensation and would care the patient. Examine the commotion in the parts which receive their ditions under which he is placed, his mode nerves from the portion of the spinal marof life, of nourisiment, his occupations; which the influence of six of the spinal maror the spinal ma row that is affected.

by death, and that rapidly, when the nerves was then said on the subject, which supply the respiratory muscles are gravely implicated; more frequently, however, the congestion is dissipated, and a cure indication which

or brain. It may occupy various parts of carees. It produces, as you are a series of the medullary column, and for arrangement symptoms which are almost explained commay be distinguished into congestion of the uected with somability mighty. Its cervical, of the dorsal, and, finally, of the duration is very various; in series cases the

You have now seen how congestion of the occupation, and other causes, which it is Congestion of the spinal marrow may the duty of the physician to investigate and

Indications of Treatment.

Having thus laid before you, gentlemen, weigh the influences of air, of season, of the Concluding Remarks on Cerebral Congestion.

These are the three principal forms under which hyperennia of the spinal marrow may present itself. The disease may terminate length, and we therefore refer you are the spinal marrow may be suppresented in the spinal marrow may be supprese

s to empty the vessels of the brain or ducing a powerful and instantaneous effect pinal marries. This is done by copious on the surface of the intestinal canal; or in and repetitive feeding, according to the amilder furm, but long continued, so as to mergency of the case; the abstraction of bring away two or three stools daily for a least the largest stools. slood may be performed with the lancet, length of time. The former method we re through the medium of leeches have frequently employed in cases where ng, the quantity of blood removed, to tended with any success; a few drops of ave any immediate effect, must be large, croton oil, or some other strong purgative, his practice in cases where the headache, from the arm. linging in the ears, numbress of the limbs, &c., suddenly disappeared after the abstraction of a copious quantity of blood. If the nationt have been subject to epistaxis, or any other habitual discharge; if the menstrual period be not far off, in case of a emale; if the congestion have appeared in consequence of the repercussion of some cutaneous eruptions, &c., perhaps it may se sufficient to apply a number of leeches behind the ear, to the anus, on the inner surface of the thighs, or even around the nallcoli; these, repeated according to the nature and gravity of the disease, frequently dissipate all the symptoms. However, you should not forget that in many other cases, ifter sanguineous emissions have been mulsiplied, the signs of congestion persist, or, rielding apparently, and for a short time only, to the loss of blood, they return again with renewed intensity.

The third indication is to draw off the afflux of blood, as far as possible, from the brain class of medicines called revulsives are par- hen's egg. ticularly indicated when the symptoms of previous existence of an irritation to which culiar transparency which characterizes hy-the economy has become accustomed. You drocde in a child. With a view of ascerthe repeated application of blisters and thought it prudent to make a small open-other similar remedies. Revulsion from the ing, from which a little blood, mixed with a head may be attained by two principal modes soft brain-like substance, escaped. of acting: 1st, by acting on the cutaneous are one of the best means we possess for combating the accidents attendant upon gatives in two forms,

Whenever the symptoms are threaten sanguineous emissions had not been atand I think venesection performed at the have been sufficient to dissipate accidents irm is preferable to any other mode. I of congestion of a very severe nature, which have frequently seen the beneficial effects of had that persisted in spite of blood-letting

CASES OF

MALIGNANT DISEASE OF THE TESTIS,

IN A CHILD AND AN ADULT.

To the Editor of THE LANCET.

Sin,-The enclosed account of two cases of malignant disease of the testis, was read at the Hunterian Society, on Wednesday last. I trust you will find it deserving of a place in your valuable Journal. I am, Sir, your most obedient servant.

GEORGE LANGSTAFF. 2, New Basinghall-street, Dec. 4, 1835.

MEDULLARY SARCOMA IN THE RIGHT TES-TIS OF A CHILD TWELVE MONTHS OLD.

The child had from its birth been perand spinal marrow; this is done by what are feetly healthy, and its body was well devetermed revulsives. The older authors con-loped. When about ten months old, an entain numerous examples of the benefit de largement was perceived in the right side rived from this method of treatment, and I of the scrotum, which increased rapidly, have more than once had recourse to it my- and bad, in the course of two months, acelf with the most decided benefit. The quired the magnitude and figure of a

The tumour had not excited any pain, rongestion have succeeded the disappearance nor was there any enlargement in the inof a cutaneous eruption, or any chronic af- guinal glands, nor any sign of constitutional fection of the mucous membranes; in disease. Its nature was ambiguous; it was cases of this kind you must not neglect the clastic to the touch, but not of that pemust take into account the antecedent ma- taining its nature, the surgeon in the counlady, and must endeavour to call it back by try who had the management of the case,

A few days after this operation, the child surface, by blisters, the seton, actual cau- was brought to London, and placed under tery, and irritating ointments; 2ndly, by my care. I examined the tumour atten-leting on the intestinal canal. Purgatives tively, and from its elastic feel and configuration, I was at first inclined to think that there was fluid in the tunica vaginalis; but hand congestion; I have had frequent from its want of transparency, and having raties of witnessing their utility, and been informed of what escaped on paracenaven more efficacions than tesis being performed, I suspected the dispat variety of cases, ease to be of a medullary character.

I must confess. I never observed this disthe object of pro- case in the testicle of so young a subject. Mr. Lawrence was consulted. The point to the size of a horse-bean, was beteeted bebe decided upon was, whether the disease a
hould at once be removed, or whether a
free opening should be made into the tumour daily increased, and acquired the magmour, in order to ascertain its structure,
nitude and figure of an apple. It felt soft before proceeding to the operation of cas- and pulpy; but when pressed upon, pain tration. The latter method was pursued, was not evinced, and there were no signs of an incision was made, and the tumour was cerebral affection. The health of the hild found to be of a medullary structure, and, began to decline; the digestive organs beconsequently, of a nature requiring innue-came disordered, denoting some visceral diate removal. Mr. Lawrence assisted me affection; the abdomen was tunid, and an in the operation. There was considerable enlargement was, by the touch, felt deeply hemorrhage from the integumental arteries, scated in the abdominal cavity. The patient which rendered it necessary to tie several only lived six months from the time the of them.

The little patient did not experience the least subsequent ill effect from the severe tunnour was seen projecting into the cavity, operation, the ligatures came away, and the from beneath the posterior surface of the wound healed favourably; and in the course of fourteen days the child was sufficiently well to be removed into the country.

On the dissection of the tumour, the following appearances presented themselves :-The tunica vaginalis and albuginea were natural in structure, and there were no greatly thickened. The disease had its ori- signs of disease in the mescuteric glands, gin in the glaud itself. Upon opening the or in the glandula aggregata in the ilcum. tunica vaginalis, a tumour of about the size of a cherry was observed projecting from but those on the left were affected with methe anterior surface of the testis, and cover-dullary sarcoma. The brain was examined. ed by the albuginea, which at this part was On reflecting the pericranium, it was found much attenuated by the progressive absorp- highly vascular in the situation of the left tion caused by the growth of the tumour, parietal bone, and that bone was highly inwhich would shortly have burst into the flamed. tunica vaginalis. On cutting into the morbid growth, it was found to be composed of size with the one just described, on the inlobules of medullary matter, exactly similar ternal surface of the parietal hone, which to fuetal brain, which is termed fungus has had detached the dura mater to the extent matodes. Not a particle of the natural struc- of the arch of the tumour. The arachnoid ture of the testicle could be found, the me-membrane lining the dura mater, and that dullary matter adhered but loosely to the reflected over the pia mater, were slightly tunica albuginea, which presented the ap-thickened where the tumour protruded, pearance of a dense cyst. The spermatic The brain was natural in structure, and chord was perfectly natural in structure.

(Observations .- As I am, from the result the ventricles. of long experience, led to believe that medullary sarcoma, carcinoma, and scrofula, are congenital diseases. I cannot help fearing that the disease in this case will attack some other viscus in the course of time; an occurrence which I have frequently witnessed. Yet there have been cases recorded where the disease was only local, which I sincerely hope will prove to be the fact in this instance.)

Since writing the history of this case, I have been informed by the professional gentleman who attended the patient after its return into the country, of the death of the child: he has also favoured me with an account of the symptoms after the operation, and the morbid appearances which prerented on a post-mortem examination. These I shall briefly relate.

The child appeared to enjoy a good state of health for about four months from the time of the operation being performed. After this period a small tumour, of about protrusion of a part

operation was performed.

Autopsy.-On opening the abdomen, a peritoneum. On reflecting this membrane, the tumour was found to be formed by seveval of the absorbent glands, in the lumbar region, having been converted into medullary tubera. The abdominal viscera were

The lungs on the right side were healthy,

There was a tumour, corresponding in there was not any accumulation of fluid in

The heart was healthy.

The tuniour situated beneath the scalp was presented to me by the gentleman who examined the body. The following are the appearances which were noticed on dissecting the morbid parts. The pericranium, which seemed to form the capsule of the tumour, was highly inflamed, as was the dura mater which contained the corresponding morbid culargement. On making sections of the tumour, it was found to be composed of medullary matter, exactly resembling the testicle I had removed.

The external surface of the parietal bone, where the tumour was situated, as well asthe internal, had been slightly acted on by, the absorbents, but there was no confinuni-1 cation between the tumours, except by the arteries and veins belonging to the cranium and dura mater. On opening a portion

sinus, I found the call

external state, which, in all probability, health before the operation was to be per-vould, the thin child lived a short time formed.

His health did not improve, and the pain out. I am induced to make this pathologous became so distressing that he felt desirous ogical deduction from having a preparation n my museum, where nearly the whole of he longitudinal sinus is obliterated by mehillary matter. The preparation was taken ro a patient who had been afflicted with inputs hamatodes in various viscera.

HISTORY OF A MORBID TESTICLE.

In February 1831, Mr. S-, 30 years of ige, a married man, requested my opinion respecting an enlargement of the right testicle. He informed me that it had been progressively increasing for nearly twelve nonths, and had affected his health, though ac had had the advice of some of the most distinguished surgeons in Lendon. Various means had been adopted to prevent the progress of the disease, which it is not neces-sary to describe, as they had no effect in checking the morbid action. Some of the surgeons advised him, as the only chance of saving his li.e, to submit to custration, which the patient at that time did not wish.

When he consulted me the testicle was of an immense size, and felt very dense and ponderous. There was considerable eulargement of the sperimatic cord; the interminants of the scroting were of a reddish cubair, and the veins were greatly distended and tortnous, and meandered over its surface similar to what I have generally noticed in examining fungoid tumours. The inguinal glands were not affected.

Lecches were ordered to be applied freand externally, and his digestive organs were well attended to. This plan of treatment, with little variation, was adopted for several months, without producing any good effect. The spermatic cord became greatly distended, and there were all the appearances denoting hydrocele. Paracentesis | was performed; the fluid exactly resembled that of a hydrocele in the tunica vaginalis. This operation lessened the distention, as well as the pain which he had experienced; but the fluid soon accumulated again, and the operation was obliged to be repeated a great number of times. A seton was intro-duced into the scrotum, which occasioned a profuse discharge; this was continued for some time, but as it did not appear to alter the morbid growth of the testicle, it was discontinued. As the health of the patient began to decline, and he had a sallow complexion, it now became a question whether

to submit to the removal. Sir Astley Cooper was consulted, and his opinion was, that castration should be performed as soon as possible, with a hope of saving the life of the patient.

I performed the operation on the 23rd of April, 1833. The ligatures separated in about a fortnight, and the wound healed favourably.

The patient at this time. November 23rd, 1835, appears to be in good health, and says that he is, in every respect, as vigorous as

Appearances of the Testis and Spermatic Chord .- A pipe was placed into the spermatic artery, and the parts were injected with size and vermilion. On dissecting the spermatic chord, there were seen several large serous cysts, not hydatids. On cutting open these cysts their internal surface was found to be minutely injected, which accounts for the rapid secretion of fluid which so frequently took place. The spermatic artery was very large, and the vas deferens was pervious from its origin at the epididymis. The tunica vaginalis and albuginea were greatly thickened by chronic inflammation, &c., and they were firmly adherent. A section was made of the morbid testis; there were no signs of the natural structure, and there was scarcely any appearance of vascularity. The morbid productions were composed of scrofulous tumours, which occupied the principal porquently; iodine was employed internally tion of the internal part of what had been the natural structure of the testicle. The external surface had all the characteristic signs of carcinoma; and exactly resembled some preparations of scirrhous testicles which I have in my museum.

Observations .- As the morbid structure of carcinoma, medullary sarcoma, &c. &c., and their devastating effects on the constitution, have been so ably described by distinguished pathologists, it would appear almost needless to publish any more on this subject, except with a view to detailing the minute anatomy which tends to elucidate the cause of those morbid changes, and the tissues which they affect, and this I hope will shortly be satisfactorily given by my friend Mr. Kiernan.

My motive for wishing to publish these two cases is, to show, in the first case, the early development of the disease,—its occurrence in a child, which appeared to be, it would be right to propose the removal of otherwise, in perfect health,—and to point the festicle. At this time Mr. Earle saw out the singular circumstance of its affecte setient, and his opinion was, from the ling so many other parts of the body, so soon after the operation,—a fact which proves what I have frequently asserted, viz. that and that it would be malignant diseases and scrofula are con-

The second case is only interesting in one | considerable importance. part of its pathology, and that relates to the combination of scrofula with carcinoma. This is a rare occurrence, and one which I should term accidental. I have inspected the bodies of a number of patients who have died from the effects of medullary sarcoma, and only in one instance did I find any sign of scrofulous tubercles, and they were in the lungs, and of the miliary kind.

I have seen such unfavourable results after operating for cancerous or fungoid affections, that I have determined never to propose an operation, or again to perform one, in either disease, unless at the particular desire of the patient, and with his consent to abide by the consequences, without reproach against the surgeon.

ON THE

LAW OF MORTALITY

1 N

EACH COUNTY OF ENGLAND.

By T. R. EDMONDS, Esq., B.A., of Trinity College, Cambridge.

(Concluded from page 371.)

In exhibiting the law of mortality of the aggregate population of England, I have gone to the full extent allowed by the materials, and compared the mortality in each of thirteen gradations of age. A comparison consecutive in ervals, which is a point of been concentrated on #

inple, if two consecutive results, the the inter-10 per cent., and other two consecutive results, when the intervals are larger, differ by the amount of 30 per cent., a much greater number of facts will be requisite for determining the approximate value of the smaller than that of the larger difference. Fourersons of this nature, in comparing together the mortality of different counties, I have extended the intervals, and reduced the thirteen to five gradations of age. I consider that the numbers thus obtained are of nearly equal weight with the numbers obtained for the aggregate population in smaller intervals of age. No useful information has been lost by this proceeding, for I have taken care to draw the lines of division in such a manner as to include the parts most nearly allied to each other. To prevent the possibility of any mistake on this head, I have obtained for nearly all the counties of England, the resulting mortality for each of the thirteen gradations of age. As I have not met with one instance of a decided variation from the scale of relative mortality already exhibited for the aggregate population, there appears to be no reason for desiring the publication of the results for smaller intervals of age than those which I have adopted,

In closifying the different counties of England, I have arranged them principally according to the rate of mortality of females between the ages of fifteen and sixty years. to the same extent might have been insti- But I have not separated counties in juxtatuted for each county, but the results would mosition, when the difference in the rates of have been less valuable, being founded upon more dity was inconsiderable. The mortality observations of very inferior magnitude, of males at the same interval of age would According to the doctrine of chances, the not serve us a good index to the healthfulsmaller the number of facts, the less correct ness of a locality, unless we could abstract is the indication of the general law which the detrinearal effect of their occupations, these facts obey. When the intervals of leading to fatal accidents, or to loss of health. age are very small, and when the differences In many counties, also, the uncertain amount between the mortality at consecutive interpolation of the military and maritime population, divals are also small, the true law of neortality minishes considerably the value of the apis never correctly indicated, unless the facts purent mortality of the male sex. Another observed are of immense magnitude. During valuable classification might be made, groundonfancy, the nortality at one annual inter- ed on the nortality under the age of lifteen val differs 32 per cent from the mortality years, but much preliminary labour would of the succeeding annual interval; and on he requisite, in order to abstract the influaccount of this great difference, a small ence of large towns. For example, the account number of observed facts are sufficient to tality in Devon, under the age of five years, determine the true law at this period. But is nearly 25 per cent, greater than in Combetween the ages of fifteen and fifty-five wall, and yet it is doubtful whether the cliyears, the mortality at any annual interval mate of Devon is less favourable to infant differs only one-thirtieth part from the mortality of the next annual interval; and we part of the excess may be accounted for by cannot expect to find any materials of sufficient amplitude to indicate correctly these large town like Plymouth, the mortalicy of menute differences. By extending the intervals of age observed, we increase the
weight by diminishing the number of the
fresults. We also thus increase the diffreences between the mortality at two
consequities interests, which is a noint of
here concentrated on

Table point for each County of England the Annual Deaths which occur for every Hamiltonia in each of Five Gradutions of Age, the Counties being Classified according to Mortality of Females between the Ages of Fifteen and Sixty Years.

- Marian	1				ine A				THE ST				
Wales and the Forty	Ma	ucs :	withe	ui coi	recii	mj.	ĺ		1	'emal	es.		
two Counties.	0-5	5 15	15 3f	3 0 60	Above 60.	All age.	0.5	5 15	15 30	30 60	Above (2).	All Ages.	Living in
1 Cornwall			.51 .82		7 63 7.56						7.18		
2 { Wales				1.25		1.79	3.51	.49		1.32	7.08 2 6.82	1.80	35
Dorset Somerset Wilts Somerset Wilts Somerset Hereford Northumblad Cumberland Some Some Some Some Some Some Some Some	4.34 3.66 4.24 3.88	.56 .49 .55 .46 .59	.7! .83 .7: .85	1.41 1.31	7.37 7.21 6.80 7.66 6.73	1.97 1.83 1.91 1.90 1.90	3.55 3.13 3.35	.57 .53 .49 .51	.83 .95 .74	1.34 1.40 1.35	7.40 6.50 6.7.27 2.6.55	1.87 1.84 1.76 1.88	185 114 175 52 104
Westmoreland	3.79 4.37 5.20 3.73	.67 .53 .44 .54 .45	78. 46. 18.	1.30 1.24 1.31 1.24 1.19 1.45	7 30 7 59 7.21 6.86	1.91 - 1 ! 8 2.08 1.78	3.84 4.46 3.21	.58 .55 .55 .55 .49	.93 .95 .93 .88 .95	1.47 1.34 1.38 1.31 1.37	7.04 3 7.32 7.02 6.83		93 9 177 138
Durham East York S West York Leicester Lincoln	5.18 5.18 5.21		.94. 88;	1.38 1.41 1.33	7.38	$\frac{2.17}{2.09}$ $\frac{2.09}{2.04}$	4.49 4.66 4.57 4.38 4.39	.72 .60 .56 .51 .58	9	1.54 1.41 1.48 1.41 1.45	7.17 7.32 7.30	1.98 1.98 1.95	98 402 88
(Salop Derby Northampton Huntingdon Essex 6 Bolford Bucks Oxford Bucks Southampton Sussex	1.38 4.61 4.72 4.41 4.17 4.72 4.57 4.72 1.43	.61, .56, .57, .58, .58, .53, .53, .53, .55, .55,	.92 .84 .92 .74 .81 .75 .90	1.55 1.54 1.34	7.38 7.37 7.65 7.88 7.51 7.65 7.82 7.89 7.88	1.94 2.05 2.09 2.05 1.92 2.05 2.05 2.12 2.10	3.72	.65 .63 .53 .55 .55	1.00 1.06 1.14 1.10 .99 1.05	1.58 1.54 1.47 1.53 1.52	7.63 7.49 7.22 7.29 7.40 7.69 7.69 7.68	1.51 2.08 2.02 1.97 1.95 2.08 2.04 2.08 1.91	107 83 25 145 43 69 68 66 145
Chester Chester Nottingham Stafford Warwick Worcester Cambridge Kent	5.57 6.38 5.98 6.12 5.81 5.96 5.60 7.75	.71 .61 .68 .63 .65 .71 .66	1.07 .96 1.06 .90 .90 .90 .90 1.41	1.64 1.63 1.41 1.60 1.63 1.47 1.63 2.04 2.12 2.14	7.18: 7.80: 6.16: 7.84: 7.85: 7.82:	2.32 2.27 2.34 2.26 2.26 2.34 2.54	4.78 5.37 5.43 5.29 5.21 5.08 4.75 6.40	.62 .62 .71 .61	1.04 1.03 1.02	1.76 1.57 1.58 1.53 1.51 1.62 1.63	8.22 7.04	2.22 2.16 2.20 2.08 2.15 2.23 2.11	95 169 141 94 62 216
	5.30			1.59		_		_	.93	1.52	7.53	2.05	6145

their Commencing the morns my in thirty-nine countries have been obtained by increasing the contribution of the case of Wales, Monnouth, Middiesers, and Surrey, the increase earliest of the Monnouth, Middiesers, and Surrey, the increase earliest of the Monnouth, Middiesers, and Surrey, the increase earliest of the Monnouth of the funder population of each country.

The general harmony of the results in the though inferior disposition in foregoing table, appears to be interrupted in derstate their ages. In the two instances only. In the counties of Dur- have thought it preferable ham and Kent, the mortality of males between fifteen and thirty years of age is considerably higher than would be expected. In Durham, the excess may be due to accimaritime population. The extremely low county of Warwick is a deceptive appear- largest correction. had been included in the general summary of the county, the proportion living above sixty would have been considerably less, and consequently the true mortality would have been considerably higher than the apparent. A deceptive appearance of a similar nature, though inferior in degree, exists in the counties of Gloucester and Northumberland, in consequence of the omission in the county summaries of the ages of the inhabitants of Bristol and Newcastle.

One of the most remarkable and unexpected results presented by the above table, is the fact that the mortality of females between the ages of fifteen and sixty years is greater than that of males at the same period in all cases excepting Cornwall, Devon, and Wales. The difference would be still because they are subject to laws of mortality sible error, in comparing together the mor- and Cornwall, the mortality during the tality of the two sexes, is to be diminished years after birth, differs very by the compensating effect of a similar mortality in many count

able I the : pparent mortality of males between streen and sixty years of age, without a necessary correction for the unenumerated military and maritime population. It may, howdents in mines; in Kent the excess may be ever, be acceptable to state the two classes due to deaths of boatmen, or to the omission of counties in which the defects are must of an excessive proportion of military and considerable. Kent, Surrey, Middlesex, Durham, Cumberland, Northumberland, North mortality above the age of sixty years in the York, East York, and Devon, require the Lancashire, Wales, ance consequent on the omission of the ages Gloucester, Cornwall, Norfolk, Essex, Dorof the population of Birmingham, which set, and Southampton, require a smaller constitutes one-third part of the population correction. The apparent results for males of the entire county. The proportion of from fifteen to thirty, and from thirty to living above the age of sixty years is much sixty, ought probably to be diminished by less in large towns than in the country. If the quantity .09 in the first mentioned the ages of the inhabitants of Birmingham counties, and by .05 in those last mentioned, the reduction for all England being about .06 at each of these two periods.

In the case of Cornwall, Devon, and Wales, there appears to be some ground for the conjecture, that the relatively high mortality of the male to the female sex, arises from original peculiarity in the constitution of the inhabitants. The proportion of male to female births in these districts, differs very much from the proportion existing in the rest of the observed territory. In these districts also, the mean age at which females attain the minimum mortality, is the same as that for males; whilst in other districts, the minimum is generally attained one year carlier by females than by males. During the twenty years ending with 1830, for every 100 births of females, there were greater, if allowance were made for deaths born of males, 110 in Wales, 108 in Devon, by accident, which are more numerous and 107 in Cornwall, whilst in the whole of among males than among females. In Corn- England and Wales, the excess was only 44 wall and Wales, the apparent exception may per cent. In Middlesex and Surrey, the be due to accidents in mining. In Devon excess of male births was only 14 per cent.; the apparent exception may be due to deaths but this affords no ground for inferring that in naval and military hospitals, and to a the proportion of conceptions of males was very high proportion of unenumerated sai- less in London than in the country at large. lors and soldiers. The counties of Middlesex | The mortality in infancy is much greater in and Surrey are excluded from comparison, large towns than in the country; and it is very probable that the mortality of males peculiar to large towns. I have already before birth, exceeds the mortality of festated my reasons for believing that very males before birth, according to the same 4 little error can have arisen from the under- law as exists for the first five yearsoafter statement of the ages of females. The pos-birth. But in the case of Wales, Devot.

justly conclude, that the morthat the excess of male conceptions is considerably greater in Wales, Cornwall, and Devon, than in the rest of the territory.

The relative mortality of the male to the temale sex, between the ages of fifteen and sixty years of age, appears to be dependent on the mean age at which the period of "infancy" terminates. In nearly all the counties, this period for males terminates at the age of eight years, which is indicated by the fact, that the mortality between five and ten is 50 per cent. greater than the mortality between ten and fifteen years of age. In the majority of counties, this period for females terminates at seven years, as is indicated by the fact, that the mortality at the former exceeds that at the latter interval only 20 per cent. Cornwall, Devon, Wales, and London, are the exceptions to this general rule, the mean terminating age for females being at eight years or above. In these four districts, the relative mortality of males to females is just the reverse of what exists in the rest of the observed territory. The general law appears to be, that when the minimum is attained by both sexes at the same age, the mortality of males exceeds that of females; and that when the minimum is attained half a year sooner by females than by males, the mortality of the two sexes between the ages of fifteen and sixty years of age is equal.

In adopting the mortality between the ages of fifteen and sixty years, as an index to the healthfulness of a locality, I have been influenced by political as well as numerical considerations. The strength of any nation resides in the individuals comprehended in this interval of age. A low degree of mortality at this interval contributes greatly to the physical, but more especially to the moral, strength of a nation. A low degree of mortality in infancy does not necessarily add to the strength of a nation, because it frequently involves a high mortality at the period when life is most valuable. Comparing together two "stationary" populations haveg each the same number living between fifteen and sixty years, the stronger and more thy inthat containing the smaller number her the age of fifteen years. If,

the is only half as great. We show the age of sixty years, is as much a source of weakness as the population under the age of fifteen, then the physical force of any given amount of population, is independent of the law of mortality; at least the highest and the lowest laws of mortality which have been supposed to exist, yield the same proportion of living between the ages of fifteen and sixty years, out of a given number living at all ages. The highest law of mortality I suppose to be represented by the ancient tables for London and Stock bolm; the lowest law by Dr. Heysham's observations at Carlisle, on the supposition that there were no deficiencies in the registered deaths.

It is a remarkable fact, that all the counties of England in which the mortality of females between the ages of fifteen and thirty is at a maximum, are situated on or near the same straight line; and that in the counties most distant from this line, the mortality is at a minimum, the maximum being to the minimum in the proportion of three to two nearly. This line is a central one running in a north-west direction from Brighton to Liverpool. In Northumberland and Cornwall, the two counties most distant from each other and from this line, the mortality is at the minimum. Sussex has been supposed to be one of the most healthy counties of England, and the mortality under the age of five years is as low in this as in any county. Nevertheless it obeys the law common to other counties on the central line, and suffers the maximum mortality between the ages of fifteen and thirty years. Possibly the apparent high salubrity of Cornwall, Devon, and Wales, may be the effect of their peculiar geological and geographical position. They are situated on primitive rocks containing no organic remains, and they are most exposed to the sea air.

In the preceding table the different counties have been classified, and the mortality has been stated for each county at five intervals of age. I now present a second table. which shows the mortality at six intervals of age, resulting from combining the counties comprehended in each of the eight classes. I also present the whole of the materials from which the mortality of those classes, or combinations of counties, has been deduced, in order that every reader may possess the means of verifying with ease the results exhibited. Any person possessing copies of the population returns of 1821 and 1831, may verify with equal facility the results exhibited for single counties. In the table for the separate counties, on account of the insufficient magnitude of the observations, the mortality between the ages of five and ten, was not distinguished from the mortality between ten and fifteen years of med that the population age, as it is in the following table.

TWO ABLES of the Lining and Dying at six intervals of Ag Living on the 28th May, 1821.

							7.00	VI.2 2
Living between	0.5	5-10	10-15	15-30	30-60	Above 60	Ages . specified	Cotal
Class 1 $\left\{egin{array}{l} M. \\ F. \end{array} ight.$	50,453 48,983	43,490 43,141	37,563 35,668	78,323 91,860	85,473 98,550	24,932 31,190	320,234 349,392	333,046 363,441
Class 2 $\left\{egin{array}{l} M. \\ F. \end{array}\right.$	56,708 54,319	52,741 50,237	45,528 42,747	93,325 100,649	100,655 107,958	30,233 36,563	379,190 392,473	387,2 401,506
Class 3 $\left\{egin{array}{c} \mathbf{M}_{\cdot} \\ \mathbf{F}_{\cdot} \end{array}\right.$	94,191 90,733	83,353 81,638	74,464 69,395	154,263 175,342	170, 00 5 188,439	51,573 58,458	627,849 664,005	730,303 785,842
Class $4 \cdots \left\{ egin{array}{l} \mathbf{M} \cdot \\ \mathbf{F} \cdot \end{array} \right.$	69,604 67,955	62,598 61,192	53,685 49,802	112,414 122,861	122,598 131,873	39,358 42,033	460,257 475,716	488,312 509,539
Glass $5 \dots \left\{ egin{array}{l} M. \\ F. \end{array} \right.$	116,395 112,420	100,271 98,379	86,769 82,649	191,348 198,245	197,896 200,302		735,349 716,858	817,363 837,745
Class 6 $\left\{egin{aligned} \mathbf{M}.\\ \mathbf{F}. \end{aligned} ight.$		123,438 121,189		216,943 235,628	241,683 219,478		896,397 911,741	951,126 972,087
Class 7 $\left\{ egin{aligned} \mathbf{M} \\ \mathbf{F} \end{aligned} \right.$	189,437 183,833	163,331 160,371	142,554 134,207	286,126 326,250	312,659 322,259		1,171,615 1,207,252	1,402,807 1,454,804
Class 8 $\left\{ egin{array}{l} \mathbf{M} \\ \mathbf{F} \end{array} \right.$	78,652 83,482	64,636 66,310		142,624 185,072	187,226 203,785	30,952 38,762	560,161 632,182	723,444 819,745
							5,151,052 5,379,619	

Dying at specified Ages during the 18 years 1813-30.

Dying between	0-5	5-10	10-15	15-50	20-60	Above 60		Total registered, 20 yrs, 1811-36
Class 1 $\left\{ \begin{array}{l} M \\ F \end{array} \right.$	35,450	4,606	2,416	10,638	20,420	31,710	105,210	117,401
	29,944	4,576	2,468	10,765	19,534	37,342	104,569	116,797
Class 2 { M.	32,465	4,674	2,948	12,267	20,362	33,365	106,081	117,377
	27,688	4,333	2,694	11,107	19,947	37,921	103,090	114,813
Class 3 $\left\{ egin{array}{l} M. \\ F. \end{array} \right.$	73,704	9,902	6,206	23,981	14,108	49,609	227,809	252,544
	61,984	9,240	6,249	27,817	48,536	77,688	231,514	258,425
Class 4 ${M. \choose F.}$	52,365	6,296	4,081	16,097	26,680	49,599	155,118	171,573
	44,134	5,803	4,476	19,578	30,899	51,764	156,654	174,618
Class 5 { M.	108,043	12,723	8,071	28,659	49,623	69,790	276,909	312,502
	90,531	11,174	7,638	32,305	52,254	71,612	265,514	301,186
Class 6 { M. F.	103,853	13,120	8,552	33,322	59,245	92,927	311,019	346,881
	86,927	12,076	9,432	42,419	64,216	91,840	306,940	343,682
Class 7 ${M \choose F}$.	216,756 184,396	23,982 21,486		56,560 63,131	97,757 100,126	110,884 113,022	520,806 496,216	599,125 572,256
Class 8 $\left\{egin{array}{c} M. \\ F. \end{array} ight.$	113,403	11,960	5,183	26,467	78,019	58,381	293,413	344,468
	97,899	11, 04 4	5,143	27,583	68,193	67,742	277,604	.328,039
	736,039 622.903			207,991 234,675	396,514 403,705		1,996,395 1,942.191	

[•] The total registered deaths of females in England and Wales during twenty year.

176, which were deaths contained in returns received after the county and the contained of the means of distributing these continued to give the means of distributing these continued.

10 Oct.

ing in each of Six Gradutions of Age, the Mortality per cent. of each Sex in each of Eight Classes of English Counties.

Ī	Class	. 14,57		Male	s (cor	rected). *		Females.								
4			5-10	10-15	15-30	30-60	Above 60	All Ages	0-5	5-10	10-15	15-30	30-60	Above 60	Ali Ages		
	6	4.19 3.87 4.14 4.36 5.24 4.45 6.11 8.19	.63 .60 .63 .58 .72 .62 .78	.38 .44 .44 .44 .52 .47 .56 .53	.75 .83 .76 .80 .86 .87 1.03	1.36 1.31 1.32 1.23 1.38 1.40 1.64 2.27	7.58 7.46 7.15 7.30 7.47 7.62 7.64 10.72	1.86 1.92 2.09 1.99 2.34	3.65 3.39 3.58 3.76 4.52 3.81 5.33 6.68	.63 .59 .59 .55 .64 .58 .71	.41 .43 .47 .52 .52 .55 .56 .53	.70 .75 .83 .92 .92 1.05 1.03	1.26 1.35 1.35 1.47 1.50 1.65	7.06 6.96 7.12 7.33 7.51 7.48	1.78 1.79 1.83 1.90 2.00 1.96 2.50 2.18		
	Total	5.30	.72	.49	.88	1.53	7.77	2.15	4.56	.66	,52	.93	1.52	7.53	2.05		
		Table	e of " Infan	Mean I	Mortali minate	ty," wh	ich peri en yezi	of of !	4.47	.77	.65	.96	1.66	7.62	2.09		

* The apparent mortality of the male sex between 15 and 30, between 30 and 60, and at all ages, has been diminished by .06 in the total, and in classes 1, 2, and 3; it has been diminished by .03 in classes 4, 5, 6, and 7; and by .10 in the eighth class.

ferent ages is founded upon the deeths at each interval of age, by using, as a common specified ages occurring during the eighteen multiplier, the number which will reduce years 1813-30, whilst the absolute annual the mortality of the aggregate to the nummortality is founded on the deaths occurring ber previously obtained, representing the during the twenty years 1811-30. The absolute annual mortality at all ages, difference between the mortality for the In the eight classes of counties, the aseighteen and for the twenty years is insigni-ficant; in the former case, for the whole of the ages of fifteen and thirty years, are not so England and Wales, it was for the female well marked among males as among females, sex, 2.064 per cent. per annum; in the lat- Nevertheless the difference between the ter case it was 2.061. It would have served maximum and minimum is nearly the same no useful purpose to have undertaken the for each sex. In the first, or most healthy labour of separating the deaths of the two class, the annual mortality of females beyears 1811 and 12, and the difficulty to the tween the ages of fifteen and thirty is seven reader in verifying my results would have out of one thousand living; in the seventh, been unnecessarily increased. For similar or most unhealthy class, it is 10.3 out of a reasons I have also omitted to complicate thousand. In the same classes, at the same the question, by introducing a trifling correction consequent on the assumed mean out of one thousand living. On inspection rection consequent on the assumed mean out of the above table it will be seen, that the mortality of females between the ages of fifteen and thirty most exceeds the mortality of males at the same age, when the nt may be useful to give an example of the large of mines at the same age, when the mode of obtaining the number representing inortality of females between five and ten differ least from the mortality of females class, the registered deaths of females are between ten and fifteen years. From the stated to amount to 116,797, which increased one-minth part for unregistered of the part of th

In the above table the mortality at dif-| made to represent the absolute mortality at

deaths, and divided by 20, yields 64,887, as constant in all classes, especially among the average annual deaths. This number males. This result is not much to be relied divided by 363,441, representing the mean upon, because the variations to be looked number living during the period of obser- for are very small, and as such might be vation, gives the quotient 1.78, which is the concealed by the population above the age ion, gives the quotient 1.78, which is the conceased by the population above the age
ber stated as representing the absolute of airty years, not being exactly distributed
from dividing the deaths ites. There exists, however, a distinct
the living at the same ground for the belief that the mortality
aumbers are then above the age of sixty years is nearly con-

cant. In nearly all the counties of England mum mortality, or that existing between the number living in 1821 between the ages of ten and fifteen the second of sixty and seventy was to the number living between the ages of seventy and living between the ages of seventy and the country. The absolute mortality stated for these towns the country in the more view of the country. eighty years, in the proportion of two to one is founded on the assumption that the reginnearly, which coincides with the result of tored deaths are to be increased 20 per cent the table of "Mean Mortality," on the in order to obtain the true number of deaths; in the whole of England and Walt. tionary. I have already stated my reasons for the belief that this was the case, and that the living between seventy and eighty were the survivors of the same number of births as the living between sixty and seventy / years of age.

The population returns furnish the materials for determining the law of mortality in six towns only, which are of the largest size, and principally seaports. On account of the omission in the enumeration of the maritime and military population, we cannot determine the degree in which the mortality of males exceeds that of females between the ages of fifteen and sixty years. It is, however, indisputable that in all these The scale of relation connecting together and smaller proportion of the inhabitants of the mortality at different ages in large towns differs from the scale for counties chiefly in exhibiting a high ratio of mortality in infancy and in old age; the mini-

the estimated increase has been 13.92 per cent. In large towns the mortality between five and ten, is to the mortality between ten and fifteen as two to one nearly, which indicates that the mean age of attaining the minimum mortality is at nine years; for all England and Wales the minimum is attained at the age of 71 years. This fact, which is established on the firmest ground, as it depends on the correctness of the relative and not of the absolute numbers returned, seems to contradict the commonly entertained opinion, that the epoch of puberty occurs at an carlier age in towns than in the country. It is, however, difficult to believe that such an opinion can have any sound foundatowns the mortality of males considerably tion; for it can hardly be disputed that the exceeds that of females at every age. In all general population of large towns suffer the property of the state o England and Wales the mortality of males greater privations of food and air, than do above the age of sixty years, exceeds that the inhabitants of the country. Perhaps of females by three per cent. only; in the the erroneous opinion may have been six large towns the excess is 14 per cent. founded on observations of the wealthier

Table, showing in each of Six Gradations of Age, the Mortality per cent. of each Sex is each of Six Large Towns.

		Ma	les (w	ithout	corre	ction)	Females.							
	0-5	5-10	10-15	15-30	30-60	Anove 60	All Ages	0-5	5-10	10-15	15-30	30-60	Above 60	All Ages
York Norwich Plymouth Hull Portsmouth Liverpool	9.81 8.90 8.40	1.05 1.28 1.02	.72 .47 .60 .59 .60	1.03 .81 2.02 1.37 1.89 1.73	1.60 2.46 2.03 2.49	8.96 9.00	2.98 3.60 3.13 3.35	6.39 7.68 7.56 6.79 6.25 9.89	.81 .73 1.05 .98 .84 1.10	.52 .50 .53 .57 .49 .54	1.00 .78 .91 .99 1.15	1.50 1.62 1.84 1.99	7.80 7.79 8.48	2.51 2.52 2.53 2.49
TotalTowns	9,14	1.08	.62	1.52	2.32	9.80	3.36	8.00	.96	.53	1.01	1.85	8.56	2.66

The mode of distribution according to the | The great disproportion in this last class age of the population living in 1821 is a between the numbers living between five present inquiry. I have therefore constructed a table representing the number of females living in London between fifty age, in each of the eight classes of counties, rounding country. It would be difficult; and in each of the six towns, out of one give a correct and useful view of the thousand living st all ages. This table in- ner in which the male population dicates that the mode of distribution of the buted, because we are in living is nearly the same in all classes ex- ber and ages of the min cept the eighth, which represents London, population attached to English, whether at

question of considerable importance in the and fifteen, and between fifteen and thirty years of age, shows that one third of the females living in each of five gradations of and thirty are immigrants from the mig

home abroad. Mr. Rickman, in the cated by this and by other principles. For aturns of 1821, has given a very terms of 1921, nas given a very population. He omits entirely all the maritime and military population, and consequently exhibits an excessive proportion of males under fifteen and above sixty years of

comparing together two districts wherein the population is stationary, the higher proportion of survivors above the age of sixty years, will indicate the exist-ence of a lower degree of mortality. When the population of the two districts suffers the same rate of increase or decrease, the higher proportion of survivors will equally well indicate the lower degree of mortality. Upon a principle of this nature I have instituted a comparison in the different classes I have added a column in the following according to this theoretical table agrees table to represent the proportion of survivers above sixty for every one hundred living between thirty and sixty. There is a general England in 1821. ral agreement between the mortality indi-

example, the annual mortality of females in the first class above the age of sixty is 7.14, and in class eight it is 9.95 per cent. In the first class the living above sixty amount to 31.6 for every one hundred living between thirty and sixty; whilst in class eight the survivors amount to only nineteen out of a hundred. The few existing discrepancies are such as might be expected to arise from occasional differences in the rate of increase of the populations compared. I have also given the results of my table of "Mean Mortality," founded upon the assumption that the population had been increasing 10 per cent. at each decennial interval under the age of fifty years, and had been stationary above that age. It has also been assumed that the age at which the minimum of counties, and in towns, between the mortality has been attained is seven years, number living above sixty, and the number which corresponds with the fact for females living between thirty and sixty years of age. in all England. The resulting distribution

LABLE, showing for each of Eight Classes of Counties, and for each of six large Towns, the number of Females living in each of fire interrals of Age out of 1000 living at all Ages; also showing the proportion living ubore 60 years of Age, for every hundred living between 30 and 60 years.

Counties.	Fe	male	in E	ngland	l and	Wales.	Towns.	Females in Towns, &c.						
	0-5	5-15	15-30	30-60	Above 60	Prop. above 60		0.5	5-15	15-30	30-60	Above 60	Prop. above 60	
Class 1	110	226	263	282	89	31.6	York	118	224	277	298	83	28.0	
2	138	237	257	275	93	33.9	Norwich	124	199	277	303	97	31.9	
3	137	227	261	284	83	31 0	Plymouth	138	210	261	321	70	21.7	
4	143		259	277	88	319	Hall	139	214	268	308	71	23.2	
5	151	242		268	74		Portsmouth			266	295	59	19.9	
G	146			274	78		Liverpool			278	303	52	17.2	
	152		270	267	67	24.9	Total Towns	135	221	272	305	67	21.8	
	132	192	293	322	61	19.0	Scotland	129	223	282	286	80	28.0	
England & }	144	233	267	279	77	27.5	Ireland)	153	257	298	252	40	15.7	
Mean Mor ?	144	230	262	288	76	26.5	Belginm 🗏	130	204	256	315	95	30.3	

The greatly diminished mortality of in- living individual; of which the immediate fants in England is probably the consequence of the rapid increase of the population during the last sixty years. There are only two principal causes which operate in producing an increase of population; and either of these would appear adequate to ccount for a diminished mortality in in-

and temporary effect is, a reduction in the mortality at every age. The second cause which determines an increase of population is, the exercise, at an earlier period, of the reproductive power, which is the only way that an increase of population can be obtained when the proportion of food to each and an increased mortality between individual remains constant. I believe that the fact will not be disputed, that the desupply of food to each velopment of animate and inanimate life is

accelerated by a plentiful supply of food; years, which it is at present. and I believe that it will no more be disputed, that as the rapidity of development increases, the soundness and degree of consolidation of the mature individual diminishes. Whether a diminution of the mean age of contracting marriages causes a more rapid development of the new population, is more a matter of conjecture, as the facts bearing on the subject are yet very deficient. It appears, however, highly prohable that the children of parents who have exercised the power of reproduction at an early age, will be sooner able to propagate than the children of those who have exercised this power at a more advanced age. The germs of animals may reasonably be supposed to obey laws similar to those re gulating other constituent parts of adult individuals. I believe it to be admitted by physiologists, that the proportion of new matter secreted, and of old matter absorbed. diminishes as the age of the adult individual increases. That is to say, the elements of law of mortality which existed in England the members of young individuals are in a state of greater activity, or impressed with derably less than in Belgium; at all ages more motion, than those of older individuals, above fifteen years it is as much greater. It may hence be inferred that the germs detached at an early age, containing elements in a higher state of activity, will have a tendency to more rapid development than the germs detached from the same individual at a more advanced age.

The English population returns, however, supply no evidence as to the epoch of puberty; they only show that the minimum mortality is now attained one or two years earlier than it is supposed to have been attained in any other European country. This is, however, a sufficient ground for presuming that the new population undergoes a more rapid development than that undergone by the population of other countries; which presumption is corroborated by a corresponding increase in the mortality between fifteen and sixty years of age. In every county of England, the mortality between the ages of fifteen and thirty years bears a higher proportion to the mortality between thirty and sixty years of age than it ought to do according to the Swedish observations, or according to the new theory of mortality. This apparent contradiction becomes a confirmation of the new theory, if it be admitted that the English population is now in a state of transition, and that the limiting age of "infancy" fifty years ago was at nine years instead of at seven and a half

admitted that the contracti of lafancy indicates a more ment, and a consequent dimit solidation in the new population. viation from the theory in England now is just what might be expected to occur, on the supposition of the rising adult population possessing a lower degree of vitalital

than their immediate predecessors.

The population of Belgium is apparently also in a state of transition from a low to a high mortality between the ages of fifteen and sixty years. The limiting age of infancy is now at eight and a quarter years, having previously been probably at nine years, as in other European countries. The Belgic observations exhibit the same "plague snot" as the English observations, in the high relative mortality between the ages of twenty and thirty years. The only difference between the population of the two countries appears to be, that the state of transition has endured twenty years longer in England than in Belgium. It is not improbable that the law of mortality in Belgium, at the present day, coincides with the twenty years ago. Under the age of ten years the mortality in England is consi-

It might be denied that the proportion of food to each individual of the English population has been increased during the last sixty years, because the wages of labour, measured in wheat, has not been increased during that period. This objection is of no weight, because the mode of subsistence of the labouring population has experienced a great change, potatoes having constituted one of the principal articles of diet. Assuming that four pounds of potatoes are equivalent in nourishing power to one pound of wheat, and that six pounds of potatoes are generally sold for the same price as one pound of wheat, each labourer will have his command of food increased fifty per cent. In London, and probably in all very large towns, one pound of wheat is seldom exchangeable for more than three pounds of potatoes; consequently the labourer can obtain no increase of nourishment by expending his wages on potatoes instead of on wheat, and cannot satisfy his hunger with coarse food when the supply of plain food fails him. In small towns, but more especially in villages, a great increase of food is generally obtained by the substitution of potatoes for wheat. This difference in the relative value of wheat and potatoes, by causing a different degree of privation, may be the reason why the minimum mortality is attained one year later in large towns than in the country

46, Regent-square, Dec. 1835.

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London, Selunday, December 12, 1835.

Ir has been ordained by the Crown that arliament shall assemble for the dispatch In less, therefore, than two ionths from the present time, the Poor-Law |edical-Contract system, as it has been inctioned and enforced by the Government ommissioners, may become the subject of scussion in the Houses of the Legislature. broughout the profession it is agreed, ithout, apparently, a dissentient voice, that othing can be more odious, impolitic, and ony-hearted, than the existing arrangetents. Every where it is seen, felt, and eknowledged, that the contracts with which reident medical practitioners are forced to omply, as alternatives which are preferable the introduction amongst them of a host f vicarions, mercenary, and unfeeling adenturers, are calculated not only to inflict pon the suffering poor a vast aggravation t their miseries, but to excite in the minds f the immense body of hale English laourcrs, such feelings as no wise governnent would deem it rational to cherish.

The system, consequently, calls for instanancons abolition. But the Commissioners and l'arliament may very justly ask, "What s the plan which is to be sanctioned as a substitute?" and the Commissioners may

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it he thought that the discretionary power which is now exercised by the Poor-Law Commissioners should be abrogated, and that the supreme executive authority, in arranging all matters connected with medical contracts, should be invested in the Board of Guardians -if, also, it be deemed an obbusiness on Thursday the 4th day of ject of humane and necessary precaution. that a minimum rate of charge for the exercise of medical skill, and the supply of medicines to the sick poor, should be adopted. below which the mercenary and brow-beating jobbers should not be enabled to depress the interests of their victims, it will be necessary that a Bill should be introduced into Parliament for altering so much of the Poor-Law-Amendment Act, as relates to the medical treatment of the necessitous poor.

What, then, ought to be the scale of charges?-What ought to be the minimum of charge?-Under what conditions should the Board of Guardians exercise their executive medical functions ? -- These questions are at this moment of great importance, and on the share of attention which may be bestowed on them may depend, in a great measure, the lives of some thousands of the people of this country. Within a few weeks it will be necessary that a plan which is sauctioned by medical practitioners themselves, for placing the medical contract system in the Unions on a just and secure basis, should be placed before the legislature. We are anxious, therefore, that not a moment should be lost in considering the illege that it is not altogether fair to inflict | question, with a view to accomplishing a pracupon them so much censure, and raise up tical permanent improvement; and whatagainst them such a host of enemics, unless ever may be the views of our professional we prove that a better system can be adopted | brethren on this subject, we hope that they than the one which they have sanctioued. will be induced to communicate them to us, To this point, therefore, we are anxious to whether for publication in the pages of this invite the immediate attention of medical journal, or in the form of suggestions, to be practitioners. Where the Unions exist, the employed with effect within the walls of Fresca lan is in operation. Its permicious Parliament. Quite evident is it that the horse san there observable. These should cause of the suffering poor, and of the prorecliated, and the means of sub- fession, will make but a sorry exhibition in verting them state adoption of some other the House of Commons, unless some almost plan, should be straigly considered. If unobjectionable plan can be substituted for

the system which is now carried into operation by the Poor-Law Commissioners. widely diffused, before the diameter receive

What, therefore, is the scheme which medical practitioners would recommend?

In determining to found a national University in this metropolis, the Ministers of the Crown have taken a bold step, but it is, nevertheless, one which is in perfect keeping with the liberal measures which they produced and supported in the last session of Parliament. We cannot, however, avoid expressing our regret that it is intended to grant degrees in medicine in the new institution, and this feeling, which so strongly influences our minds, is shared, we find, by the great majority of our professional brethren. We have already in England alone, six bodies which are empowered to grant diplomas, licenses, or degrees, in medicine and surgery. It is unwise, therefore, to add to the number of those mischief-making or mystifying institutions in medicine, until, at any rate, the profession have had an opportunity of inspecting the report which is yet to be made by the Medical Committee of the House of Commons, of which Mr. WARBURTON is the able chairman.

We have not space to devote to this subject in the present number of our journal, but we may observe, en passant, that at a meeting of the Council of the London College of Medicine, it has been resolved to present a petition to the Crown, praying that no alteration may be made with reference to medical statutes or titles, until the Committee of the House of Commons has finished its labours; and, further, that in founding a new University, no monopoly may be created in favour of any particular institutions.

We cannot avoid remarking that the foundation of a new University in the metropolie of the empire is a proceeding pregnant with so many important considerations, that copies of the document which is to be framed for its government, ought to be generally and

the sign-manual of the Had R draf of the charter of the College of Surgeons, in the year 1800, been laid before the public at that time, is it possible that so detestable an instrument could ever have received the sanction of the Ministers of the Crown There can be no reason why the drafts o charters ought not to receive as much pub licity as bills which are introduced into th House of Commons. It is to be hoped therefore, on every account, that the draf of the proposed charter will be laid befor the public, so soon as the terms of its ar rangement are agreed upon by his Majesty' Ministers and the Members of the Priv Council.

On the 19th ultimo the following notic was issued from the Dublin College of Sur geons:—

"Dublin, 19th Nov. 1835.
"The Royal College of Surgeons in Irc land will hold a special meeting on Monda next, at two o'clock, to receive Mr. Kirby' resignation of the Professorship of the Theor and Practice of Physic. By order, "C. O'Kcefe, Dr."

Thus terminates, in disgrace and disarpointment, a job that was conceived in th worst spirit of corruption, and carried int effect by means which cannot be safel described. May all such execrable inva sions of the rights of the medical profes sion end in a similar manner, and may such be the just requital of all those who barte the gem of peace and integrity for the flect ing baubles of selfish and disreputable am bition. Mr. KIRBY cannot, we presume, b much surprised at finding his fate the sub ject of these aspirations, nor expect that th event of his Improper connection with the College of Surgeons would excite in his be half the slightest commiseration amongs his professional brethren. He waked in the "house of sin" with his every His commerce with its let was an act of free-will it sideration. He had a

Acres and the Commence

he moral n o have the consequences to his intended to destroy, is, we understand, more eputation of holding communion with hem. He had not even the temptations to which prudence would consider it worth vhill to sacrifice the better feelings of hunan nature, and the certain results of the exercise of such abilities and information as te poss; ssed. A professorship of the pracice of physic in the College of Surgeons was it no time of much pecuniary value, and at he moment he accepted it the prospects of ts becoming worth still less, were more obious. The science of medicine had been so evolutionized in character, and so enlarged n extent, that no man in Dublin, of Mr. CIRRY's standing, nor any one who was eduated in the principles of the by-gone school of physic, could expect to discharge the duties of such a professorship with success; while, o ensure the failure of such a speculation, here were arising in Dublin many young nen of talent, who were instructed in, and were about to establish, the doctrines of the new school. It was not, therefore, worth Mr. KIRBY's while to accept, under any circumstances, a paltry promotion, the profits of which he might have seen would be daily liminishing by a competition which he was out indifferently prepared to oppose. It is, nowever, but justice to him to believe that he was the least criminal, though the most inared party, in this diegraceful transaction. He certainly was not the crafty unprincipled lraftsman of a design which elaborately calrulated the advantages, while it insured the ruin, of a rival, under the pretence of conferring an honour and rendering him a service. He was but the weak, improvident, consenting, instrument in a plotagainst the privileges and property of a whole body of private in-

gs of the place, and ought | establishment which his appointment was prosperous this year than at any period of its former history. The humiliation of lecturing before a class of this compass, to a man who, in other days, was accustomed " his little senate to command," was the real cause of Mr. Kinny's retirement, and not a "fit of the gout," as he would have his contemporaries and the public to believe. It was, in fact, the class of the College School which took the gout; and if we are not very wrong in our conjecture, the disease will, in a short time, become general in other departments of the same establishment. Mr. KIRBY has thus been made, by an imprudent and unjustifiable compact with a corrupt body, to quit, at the most active time of life, the busy scene, and to seek in the retirement of private life, the reparation of his once brilliant reputation. This case may be a warning to those who would follow in his footsteps. From his career, the dupe or the knave who fancies he tricks, or is tricked by, a faction, may learn this lesson, that vices operate like age; they bring on discase before its time, and in the prime of manhood disclose a character, broken and exhausted.

But the render will naturally inquire "What was the conduct of the College, " and of the individuals in particular, by " whom Mr. KIRRY's sacrifice was accom-" plished?" Did they evince any compunction for the injustice which they committed on Mr. Kinny, and through him on the profession? Did they even observe the dictates of decency in covering the shame and discomfiture of their victim, by passing a worthless vote of thanks, or, by any other consoling expression, approve of the condividuals, which none but the most selfish duct of a retiring officer who had suffered could conceive, or the most insensible to intheir service? No; Mr. KIRRY's labours character could have executed. Both par- as a teacher, his favours as a patron, and der have, however, had their reward. Mr. his advocacy as a politician in the College alled to retire from a national | School, were not considered, on the occasion ill only procure for him | of his resignation, as worth even a resolution sesson; while the declaratory of the approbation of that virRESERVE A STORY

tuous and grateful Institution. The snnouncement of his retirement was, we understand, received by his colleagues with all that heartless judifference with which the practised seducer would hear of the miseries of his victim. The common tribute of respect which might be conferred on a porter or a clerk of the establishment-a vote of thanks - was withheld from Mr KIRBY! Far different were the motives by which they appear to have been actuated; other objects, of more moment than thanks to Mr. Kirsy, were occupying their thoughts. "Let the dead bury the dead," seems to have been the rule acted on by them with the most literal fidelity of interpretation and malignity. The provision of a successor out of his extinction-the conjuring up a new phoenix out of the ashes of the departed, to shed a temporary lustre on the school in Stephen's-green, was a much more important matter than a vote of thanks and idle regrets; and to this point they immediately applied themselves on the occasion. The account which we last week promised to give, from a correspondent, of the proceedings, we must again postpone for a week.

In recommending, last week, the paper of Mr. EDMONDS to the attention of the profession, as a document containing information respecting many important facts relative to which great secrecy was observed by those few persons who are qualified to form correct conclusions on the subject, the author thinks that some misapprehension may occur, which he requests us to prevent by stating, " that the universal silence which " has been observed respecting materials "which have been twelve months before " the public, admits of a more satisfactory "explanation. Nearly every writer whose " opinions upon the subject are of any va-" lue, has fallen into the error of conclud-" ing, that because the annual mortality of " the English nation, at all ages, has been "the English nation, at all ages, has been rently is, to admit personal diminished from one in thirty-eight to cone in forty-eight, therefore the mortality a previous course of the control of the course of the co

" at every age of life has been diminished." The present new material chow, that the mortality of persons above the ages of fifteen years has suffered no diminution; the mortality of infants alone having been diminished. It may not, therefore, be " reasonable to expect, that writers orgmor-"tality will assist to disseminate newlypresented facts, which are contradictory of their previously-expressed opinions. "The concluding portion of Mr. Ep-MONDS's article will be found at page 407 of this week's LANCET.

METROPOLITAN UNIVERSITY DEGREES.

To the Editor of THE LANCET.

SIR,-Being at present a student at Kino's College, and intending at some future period to present myself before the examiners of the university about to be founded, as a candidate for a degree in medicine, I consider myself to be partially interested in the question which has been descanted on in the article at page 389 of THE LANGET, to which my letter is intended as a reply, viz., Should residence for a given period in an university, and conformity to a prescribed course of study, be required to render a person eligible to graduate in the University of

But before proceeding farther I must premise, that although I am aware that you yourself advocate the principles which your correspondent has laid down, yet I am not deterred from writing, through any fear that my communication will be rejected solely because it is opposed to your opinions. No. Sir, I have long been a reader of THE LANCET, and never do I remember having seen an instance of illiberality on your part. I therefore forward this to you, relying on your known candour for its insertion, as much as if I knew that you cordially agreed with the opinions expressed in it. Neither indeed (considering it as a matter of policy) would it be wise to confine the columns of a scientific journal to the use of one party; for its reading being confined to men of a liberal education, who are accustomed to judge for themselves on every subject, and unbiassed in their sentiments, they never form a decided opinion on any point without weighing well all the arguments, pro and contra. With such readers, the cofore, no object can be attained by refusing free discussion on any matter.

The object of your correspondent annual is, to admit persons as a can them to merely on

he strongen as a certificate of good moral | very little; and there are also many matcharacter. When the proposition that a ters of general information connected with certificate required, I most cor-bially agreement comportant alteration the lecture, and of his knowledge of which ought to be made in the manner of obtaining it, for the deplorable facility with which certificates are now given is well known. Indeed. I have no doubt that they are frequently forged. What I now proceed to prove is, that although the scheme of allowing young men who are designed for a profession to obtain their education where and how they choose, might be better for a very few individuals, it would be almost ruin to the great majority. At present, when students, from a fear of being refused their certificates, are compelled to attend lectures occasionally, how many are there, let me ask, who never show themselves in a lecture-room more than three or four times a week? Perhaps your correspondent will this University. Certainly not, and theresay that they are more profitably employed fore it is so much the more to be approved in pursuing their studies at their own homes; of. All graduates are, at present, as a but this I am afraid will scarcely ever be matter of course, supposed to be gentlefound to be the case. No, I am ashamed men, and to be either of good families, or to say that even under the present laws, a to have received a polished education, fitting great number throw away that time on vice them for the society in which, as graduates, of every description, which ought to be spent in study. But still, owing to the lecture-system, they are compelled occationally to recur to their studies. Now, if these persons were allowed to study in what amination, and without being put to any manner they liked, the consequences clearly expense, being some of farmers, tradesmen, would be dreadful. They would most likely ide, their graduation would detract much be sent by their relatives to London or some from the respectability of graduates as a large town, where, instead of sendying, they body, and though, in a few instances, no one would squander away their money and time could object to persons raising themselves in the pursuit of dissipation, always patting from the lower classes by their talent, still, off the period of study until having entirely as a general thing, it cannot be too much ruled themselves in fortune and health, deprecated. they have disgusted their friends, and, in gradatio!) to apply themselves to trade, and close. I have not, I hope, said any thing perhaps linger out the remainder of their miserable and degraded existence in the is a feeble picture of the evils which I am satisfied would in numerous instances result from the misjudged act of leaving young men to chalk out for themselves their mode of study. Students, especially of medicine, are always, partly from inexperience, and partly from had companions, prone to vice, and this measure would. I am afraid, give them more opportunity for it. Such are my objections, treating this in a moral point of view.

Again, I am confident that to a certain extent the oral has a great advantage over the written method of communicating instruction to youth. There are many points connected with the different studies which It would be impossible to treat of fully in books although there is no doubt but that

it would be next to impossible for the examiners to form an idea in an examination of any reasonable duration. Also the weekly examination of the different classes by the several professors, is an advantage of no small importance.

Also let me suggest, that it is unfair to cast imputations on a body of men whose names are not even known, and who are not yet called into I may say political existence, which your correspondent does in hinting that the old method of study has been adopted by them as likely to be more condurive to their own case.

Again, he says that none but the comparatively rich will be able to graduate in

Being fearful of exhausting too much many cases, are compelled ehen quanta de- space, I must now draw this subject to a which can be construed as personally offensive to any one. As to the strength of my employ of some chemist and druggist. Such arguments, as compared with those of my opponent, that must be decided by the public.

I see that in your last number a correspondent would suggest, that the new body be allowed to confer degrees in surgery. Permit me to suggest that if this be carried into effect, a regulation should be made compelling candidates for the degree "chi-rurgiæ baccalaureus" to afford proofs of understanding drawing, as I am of opinion that this knowledge assists the anatomical student greatly. Also, that if a graduate in surgery, or, in fact, if any graduate, wishes to obtain the license of the Apothecaries' Hall, he should be exempt from the regulation which requires an apprenticeship of five years, and should only be obliged to spend one year in dispensing.

Allow me also to draw the attention of

by would benefit him for the support of the mother and sister of

the late Gilbert Burnett, Esq., lastiser on Botany in this institution. They depended entirely on his exertions for their support, and are now in a state of poverty. He was the last male descendant of Bishop Burnett.

I would also propose to the proprietors of King's College, and the University of London, i. e., the institution at present called so, that they should admit two young men annually in each department, giving them free ad-mission to every class until they have completed their studies in the particular pro-fession they make choice of. The objects of election should be young men of good connections, but destitute of the means of placing themselves in a profession, or giving themselves an education which might fit them to conduct themselves with credit in the society in which by birth they are entitled to move. This should, if possible, be kept secret from their companions.

Why should not the new University be empowered to confer a degree in architecture? Surely it is a science. The degree might, to avoid confusion, be Coryphaus, to rank as high as Mayister, and be taken two years after that of Bachelor of Arts. Anxiously expecting the publication of your next number, I remain, Sir, your obedient servant,

A KING'S COLLEGE STUDENT OF MEDICINE AND SURGERY.

THE WITHHELD MEDICAL-REFORM-ESSAY PRIZES.

To the Editor of THE LANCET.

Sig .- I have read with equal surprise and indignation, in THE LANCET of Nov. 21st, the letter of Dr. Epps, on the subject of the medical reform essays. A more flagrant breach of faith to the writers of the several essays which were so many months ago transmitted to Dr. Epps, it is impossible to conceive, than the statement contained in that letter, that "the Committee of examination have decided that there are not any three of the essays descrying of the prizes. On referring to the original conditions, published with the signature of Dr. Epps, as secretary to the Medical Reform Associations, I cannot discover any reference whatever to the abstract merits of the essays. They simply state, that " For the best essay will be awarded the sum of 50% sterling; for the second, the sum of 30%; for the third, the sum of 201." It was the comparative merits of the essays alone, then, that the Committee of Examination had to

dapide upon. With their intrinsic merits, far as the primes were conducted, they he had become fittle meritor make the primes were concerned, they had nothing to de, and however still meritori-ous they might be, providing the proposed conditions were attended to, the three buswere as much entitled to the prizes, as if they had actually come up to the beau ideal of perfection which the Committee now assume as necessary to render them "deserving of the prizes."

Of Dr. Epps I know nothing, but as an honourable member of a liberal profession I am sure it must be extremely painful to him to be made the medium of communicating to the public so dishonourable an instance of broken faith. That Mr. Hume can have sanctioned such a proceeding, I am unwilling to believe, but as the tressurer and only declared member of the Committee of Examination, he will do well to use his influence in obtaining justice for the writers of

the essays.

It would be easy to dilate on many circumstances connected with the proposed prizes of the Medical Reform Association; more especially the great delay that has taken place, - without any explanation,-the promise which Dr. Epps formerly made of an early decision, and the extraordinary effrontery with which further competition is invited for prizes which unquestionably belong to writers who have already contended for them. But, in the hope that a feeling of shame will induce the Committee to perform, without further delay, an act of justice which they must perceive to be in-evilable in the end, I shall for the present I remain, Sir, forbear.

Your obedient servant, PHILO-JUSTITIA.

Nov. 29, 1835.

APOTHECARIES' HALL.

To the Editor of THE LANCET.

SIR,-An instance having very recently occurred under my own observation of the treatment of students at Apothecaries' Hall, I am induced to forward the facts to you, in order that students may see the necessity of strictly adhering to the regulations of the Hall, however difficult of performance and mysterious they may appear.

A pupil who had entered to all the required lectures (perpetual), presented himself at the Hall, for examination in Latin, but being wholly ignorant of the form of registering, he had omitted to register during the time usually allowed. To obviate this he was advised to address a petition to the Board of Examiners. He did so, and was told to call upon the Secretary (Mr. . for an answer. This be has rewithout obtaining any,

[&]quot;Corypheus" means the Master, Chief, or Priceipal, in any thing. The degree therefore of "A.C. could not lead to any confusion, while that of "A.M.

selved, much too long, yet, as it was the now for certain that his petition was laid customary time allotted to all, I had no reason to complain, and reflected that I should in my turn derive benefit from the assistin by them comments on a select Mr. ance which my apprentices would afford me Watson what he had better do. Mr. W. during the latter part of their stay. Accordend, "I know nothing about the case. I ing to the present regulations, medical men un no more than a post-office to the Hall, are expected to dispense with the services You have your answer and there's the door." of their apprentices just at the time they referred to Mr. Watson, upon whom he and the pupils are compelled to attend a called, in my presence, for the tenth time; tedious routine of studies, subject to such but on giving his name and stating his busi- complicated regulations as are exceedingly ness, Mr. W. said that no such petition as annoying and harassing to them, and reflect his had ever been sent, and when I told the utmost disgrace and discredit upon the own hands, a few mornings previous, he allow insertion to these remarks, I am, Sir, declared that my statement was false; and your obedient servant, when I told him that we had been under the necessity of calling eight or ten times within three weeks, he said it was all "a lie," and that he had never seen either of our faces before. And this is all that my friend can learn of his petition. Is this the language which ought to be used by the Secretary of the Apothecaries' Company, to students praying . for information? Of his ungentlemanlike conduct I will say nothing, as it is only what students must expect in that neighbourhood. But he should remember that although he is Secretary to a Company who derive a great income by the contributions of students, he may live to see the abolition of that Company, as the result of the combination of those students with the thousands of practitioners who are already rendering their powerful influence to place medical education under the superintendence of a very different hody of men. I am, Sir, your obedient servant,

A MEDICAL PUPIL. December 5th, 1835.

. The name and address of the writer of this letter have been placed in our haads.

TERM OF APOTHECARY APPRENTICESHIPS.

To the Editor .- Sir, -- I cannot forbear noticing the very extraordinary conduct of the Examiners of the Apothecaries' Company, in making so many alterations in the regulations for apprentices. When I was bound apprentice, about eighteen years ago, I was distinctly told that it was necessary I should serve the whole seven years, prior to my attendance at the London hospitals. Two years after the expiration of that time, being established in practice, I took an apprentice, and was then told that the Court thought the seven years too long, and that they would be content with five years' actual serpitude; it now appears that they consider three years sufficient, which is surely unjust and though I certainly

He ton applied at the Hall, but was again are beginning to be most useful to them. him that I saw the petition in his (Mr. W.'s) Court of Examiners. Trusting you will

> A LICENTIATE OF THE APOTHECARIES' COMPANY.

TREATMENT OF PRACTURES.

To the Editor .- Sin,-The scientific observations of Mr. Radley on the treatment of fractures in late numbers of your invaluable publication, bring to my recollection the practice I witnessed when assistant to Mr. Clapham of Thorney, who has now been in the habit, for upwards of thirty years, of invariably treating fractures on the same principles as Mr. Radley. His sons, I understand, pursue the same plan. It is to be regretted that men of such long standing in the profession, and who have enjoyed such opportunities of gaining professional knowledge, do not communicate to the public some of the many valuable cases which must necessarily have thus come under their observation.- I remain your ardent ad-M. D. W. mirer.

Borough, Dec. 4, 1835.

MEDICAL MAGNETISM .- To the Editor .-Sir,-In the report of a meeting of the Westminster Medical Society, published in your valuable miscellany of the 5th instant, it appears that Dr. Epps thought proper to state "that a gentleman had offered to Messrs. Watkins and Hill of Charing-cross, 100 guineas, if they would produce magnets having the like power (referring to those prepared by Dr. Schmidt). They tried, but at last were compelled to acknowledge their incompetency." Now, Sir, we trust you will afford us space to give the most decided contradiction to that statement. Why our names should be thus thrust forwards to advance the views of Dr. Schmidt, we know not; but this we do know, that neither with the Doctor, nor with his magnets, are we in any degree acquainted, nor have we ever made any attempts to compete with him. Hence it is clear that Dr. Epps must have acven years, which I been labouring under some strange delusion

NOTE FROM DR. SCHMIDT. - To the NOTE FROM DR. SCHMIDT.— 10 IN-Billion. Sir, I am auxious to eap y to your question in the last Number of THE LANCEY "if Dr. Schmidt, withholds any information relative to his mode of constructing magnets," in the negative. It will be constructing magnets," in the negative. It will be obvious to you, but it making knows the chemical theory upon which I constaint in magnets I farmish the clue to similar results which are equally stationable by others. I saving found what I consider the right path, I point it out to the scientific world. Need I do move I I avail myself of this apportunity to thank you for the full and favourable report which you have given of the disensions at the II calminater Mellical Society, so mineral, or, as you p sperly term it, medical magnetism; and to ask you if any repurs of cases of care by the tournet will be acceptable to you'l I so, I should feel obliged by the publication of two or three complete ones, which I can authenticate. I am, Sir, your very obedient servant,

CHARLES SCHMIDT.

127, Regent street; Dec. 994, 1835. 137, Regent street; Dec. 9th, 1835.

*5° If Dr. Schmidt transmits to us, for publication, any cases which have occurred to him sloce his resi-dence in London, we will certainly endeavour to find room for them in our columns.

CORRESPONDENTS.

THE note of Argus is the product of a malicious mind. We believe that the private lecturer whom the writer attempts to vilify, discharges his duty more effectively and scientifically than any other private teacher in the metropolis. One thing is curious in connection with the menical

when he made the assertion, to which, in justice to ourselves, we have been compelled to advert. We remain, Sir, your obedient servants, Warkins and Hill.

5, Charing-cross, 8th Dec., 1835. by the pupil, but that he gets the whole of his knowledge from some teacher who discharges his duties to his class at his private residence. Now when a candidate who is known to have been the pupil—whener an inattentive one or not, - of a private teacher, happens to be pasuccessful, all the " recognised" gentry, and many of their idle pu-pils, exult at the defeat of the rejected party, and in their tumult of joy the lecturers often forget that the rejected person had been their own papil during more years than he had been of the private teacher during as many months. In other instances, parties who rejoice may be moved in their exultation by even less worthy feelings. A private lecturer, in cases of the rejection of his pupils, is wholly exonerated from blame, unless it can be proved that the competency of the candidate was certified, -cither orally or in writing, - previous to his application to the medical boards to be admitted to an examination.

> Will Humanitas, of Rochester, whose communication was inserted in THE LANCET of Nov. 21st, fayour us with his name and address? The one first sent has been accidentally mislaid. Will our correspondent object to his name being communicated privately to a gentleman who is actively interesting himself in an attempt to improve the medical arrangements in the Unions?

The communications from Mr. Way, the schools of the metropolis. Candidates, it is well known, are not admitted to examinate are all manoidably postponed for a week.

METEOROLOGICAL REPORT.

(Extract from a Meleorological Journal kept at High Wycombe.

Lat. 51° 37' 41" North. Long. 31° 45" West.)

Days.	Therm	ometer.	Baron	neler.	Rain.	Wind.	Weather.
	Highest.	Lowest.	ilighert.	Lowest.	Ins. Dels.		
Nov. 30 Dec. 1 2 3 4 5	50.50 49.50 45.50 47.50 39.75 43. 40.50	37.50 38.75 33. 32.50 32. 33.25 32.	28.96 29.12 29.35 29.40 29.68 29.95 29.93	28.86 29.02 29.17 29.37 29.47 29.88 29.88	0.0125 	S.W. S.E. S.W.	Excepting on the 1st and 6th, rain every day, with heavy mist. The 1st was remarkably ane for the season.

THE LANCET.

Vot. I.1 LONDON, SATURDAY, DECEMBER 19, 1835. [1835-36.

LECTURES

...:

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

BY M. ANDRAL

Physician in Chief to the Hopital de la Pitie, and Protostor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine or Paris.

LECTURE IV.

ENCEPHALITIS.

To DAY, Gentlemen, we propose passing in review the several symptoms by which inflammation of the brain is accompanied. The greater part of them, as you shall presently see, consist in certain modifications of the phenomena which depend on the life of relation. We shall commence with the most striking, those which cannot escape the notice of the most common observer. Many of these symptoms are produced by a greater or less trouble of nutrition. Let us examine them first briefly, and take up, to begin with,

Lesions of the Functions of the Digestive Apparatus in Acute Encephalitis.

In many individuals affected with encefunctional derangement of the digestive the seat of disorders more or less severe; and the digestive apparatus presents to us several notable troubles. And first of vomitclose. Here, as in many other circumstances, the symptom has its seat in the stomach; spal causy of the phenomenon is ther and a far distant organ. Least nausca, very fre-

_____ encephalitis. Sometimes the vomiting is observed only at the very commencement of the disease; sometimes it persists for several days, or even during the whole course of the malady, the patient throwing up an enormous quantity of bilious matter, or being unable to taste a drop of fluid without occasioning nausea, and rejection of the contents of the stomach.

In a great number of cases, also, we remark another symptom connected with the digestive tube, which, like the former, is an effect of sympathetic influence, propagated from the centre of the nervous system, and not a sign of disease in the canal itself. This is constipation of the bowels; a phenomenon very frequently accompanying the different forms of encephalitis. In many cases it is carried to the highest degree, and alvine evacuations are obtained only by the most powerful drastic purgatives, or the condition of the intestinal canal resists altogether any means that we can employ to overcome it. The vomiting, nausea, and constipation, of which we now speak, are frequently the only lesions of nutrition that the patient may present. The tongue generally re-mains natural (we suppose the disease without complication), clean; the abdomen indolent and free from pain, rather contracted than tumified, or tympanitic. It is of the highest importance to pay due attention to these latter symptoms, for the derangement of the stomach, especially when connected with headache, may very readily impose on the physician. The presence of vomiting &c. when it coincides with a natural state of the tongue and abdomen, and, above all, with phalitis, we do not observe any appreciable the absence of meteorism, is a sign of the greatest value, to distinguish at an early tube; but in the great majority of cases it is period those nervous symptoms which depend on an idiopathic irritation or inflammation of the brain, from typhoid and other dangerous febrile affections, where the lesion ing and names, two of the most striking really occupies the mucous surface of the symptoms by which the commencement of digestive tube.

These are the principal inflammation of the brain is frequently dis- lesions of the functions of the digestive passages which present themselves in cases of encephalitis. Let us now turn to

Lesions of the Circulatory Apparatus.

The disorders produced by inflammation se onset of acute of the brain on the circulatory apparatus are

twice in a river on the same day; after com- to ing out the second time he lay down on the bank and fell asleep, without his hat, exposed to a burning sun; on awaking he was perfectly speechless, though he was able to the abstraction of blood, in proportion to the walk home, apparently in good health. He intensity of the disease, the constitution of was bled and purged, and recovered his the patient, &c. Here the rules are speech next day, but lost it again, at inter-lessly the same as those we laid down when vals, during the three or four following days. treating of cerebral congestion; it is, there-He was dull and heavy, and complained of fore, unnecessary to insist, at any length, the back of his head; after a few days more, upon this point, particularly as we have abun-he had squinting and double vision, with ob- dance of matter to occupy the time allowed stinate constipation; pulse 60. After far- for the present course. ther bleeding, &c., the pulse rose to 87; but he gradually became comatose, and died have a second means, which has frequently twenty-five days after the commencement of been employed with the most decided bethe brain was found, in general, highly vas- flammations of the parts within the cavity cular, and a very considerable extent of it of the cranium; this is the application of places, much thickened."

organ.

Encephalitie.

the disease terminates rapidly in death : the patient does not survive the commencement the head, has sunk into a state of collapse of the attack more than twenty four hours. In other cases the march of the disease is more slow; it may be prolonged to thirty ar forty days, or two months; but if the patient continue to show symptoms after this latter period, we must consider him as lahowing under the chronic form of the dis- dued, but, still more, watch your patient ease. The termination of encephalitis is not less variable than its duration; the patient may recover, and then his recovery is either perfect or imperfect; in the latter case, the troubles which remain are generally connected with movement. Some patients conserve a strabismus for a greater or less period; others present a contraction of one or several fingers; finally, others are affected, it is often a matter of the for a long time after the subsidence of in- to recover the pat flammatory symptoms, with a well-marked stration into whi

The Treatment of Encenhalitis.

The first, and most pressing indication, is

After copious and repeated bleeding, we

the attack. After death, the substance of nefit in cases of encephalitis and other inwas in a state of ramollissement, mixed with cold directly to the patient's head,—a power-supporation. The ventricles were distended ful remedy when cautiously administered, with fluid, and the membranes, in many but it requires a good deal of care and judgment. A grand principle in the application This is a remarkable case of inflammation, of a low temperature, in cases of cerebral of the brain, where the first symptom was a inflammation, is to withhold this means unsudden loss of speech; and remark, that the til such time as the febrile reaction has been injury does not seem to have existed more brought down by sanguineous emissions. towards the anterior lobes of the brain than and other similar remedies. If the disease, any other point, though many physiologists indeed, has commenced without any re-would there place the power that governs markable acceleration of the pulse, in-the production of the voice. In many other creased heat of skin; in a word, without cases, the first accidents are not seen to- fever; then we may have recourse to cold wards the brain, but commence in the or-at a much earlier period. However, its gans of nutrition. We all of us know application is always attended with two how frequently meningitis is announced by micronvenicness, that render its manage-comiting. The irritation of the brain is pro-ment difficult. In the first place, if the inpagated to the stomach, and gives rise to flammatory reaction has not been sufficiently irritation and rejection of the contents of the | reduced, by the means we have pointed out, latter, before it has lasted sufficiently long to before the couployment of cold, we run a produce actual inflammation of the former great risk of aggravating the symptoms instead of calming them. In the second place, the effect of cold, at a low tempera-The Duration and Termination of Acute ture, is, in many cases, to throw the patient into a state of prostration and collapse that These are very variable. In some cases is very alarming. In some instances, the patient, shortly after ice has been placed on and even coma, which have been dissipated with the greatest difficulty, or terminated in death. You must, therefore, pay especial attention to this point, and when you employ cold, take care not only to see that all febrile reaction has been previously subwith care, and on the first appearance of prostration, reflect how far this symptom may not be an effect of the powerful re-medy you have applied. Perhaps this latter inconvenience is more to be dreaded than bi the former. In the one case you can subdue the symptoms of renewed febrile ac antichlogistic measures ; but

ACUTE ENCEPHALITIS.

Let us now consider the different ways in rience to determine in what cases it is applicable, cold may be applied. These are various. The first and most common is the Finally, we may employ cold under antate the patient by its weight. It is also employed the results cannot fail to be bene-necessary to warn you that cold may have ficial. very different effects on the sensibility of Repulsives are another very useful class of full exercise of his intellectual faculties.

we may follow the example of those who evert the water guttatim, drop by drop, from a short distance above the head; by this means the temperature is gradually reduced, and the effects which result are often of the most encouraging nature. Not long ago, I had occasion to see a young person who was labouring under all the symptoms of acute inflammation of the brain. We had recourse to the use of cold, under the form now alluded to; water was allowed to drop slowly on the patient's head, and a complete recovery took place. This case was attended in conjunction with M. RECAMIER, and remark, that no other active treatment of any kind was employed, although the disease presented itself with symptoms of a very bore nature.

Lould cite numerous other cases which

the services in a second about it.

application of ice to the head. It is essen- other form, viz. in that of general ablution. tial that this should be done in a permanent. The different modes of applying a reduced manner; the temperature must be kept temperature will depend partly upon the constantly at the same point. A temporary predilections of the physician, partly upon reaction of temperature is more likely to the specific object he may have in view; but, occasion the reaction we have already on the whole, we may conclude, that cold is a spoken of, than to produce any benefit. The therapeutic agent to which we may often ice should be pounded, and care must be have recourse with advantage in cases of taken that it does not incommode or irri- encephalitis, and that in whatever form it is

certain patients. In some cases when we remedies in the treatment of inflammatory place the ice on a patient's head it gives rise affections of the brain. We may apply them to a most unpleasant sensation that is sup-ported with difficulty. Sometimes this goes off; in other cases it persists, and may be-come so distressing as to compel us to aban-bear in mind that it is only at certain pedon the remedy altogether. In other cases, riods of the disease, that we ought to have on the contrary, the sensation produced is recourse to cutaneous irritants, viz. when of an agreeable and soothing nature. As the symptoms of reaction have been comthe temperature descends, the symptoms of pletely subdued by sanguincous emissions, excitement vanish; the agitation and delior by cold. However, let me remark, that rium disappear, and the patient recovers the some patients will not bear the application of revulsives to the skin; in many cases Instead of ice, some physicians prefer the action of a blister has been sufficient to the employment of cold offusions, at a tem- bring back all the symptoms that were disperature varying from 22%, to 18° or 16° sipated by a previous blood-letting; the agi-(centigrade). We can rarely have occasion tation recurs; the patient is seized with to go below the latter; it is quite sufficiently convulsions, and paralysis, or relapses into a low for every practical purpose. The affirm state of coma, immediately after the cutasion is performed by pouring water, at the neous nerves are stimulated by a sinapism. temperature just indicated, for the space of 1 am, therefore, very sparing of this form of two or three minutes on the patient's head, revulsives in cases of encephalitis, although after which we cease. This may be repeated in many particular cases their utility is in-once or twice during the day according to contestable. Thus, when the coma persists circumstances. Sometimes we prefer esta- for a length of time, when the sensibility of blishing a constant current of cold water on the skin is excessively obtuse, when the eye the patient's head; or, finally, in other cases, is insensible to light, and the pupil remains without movement, we may have recourse to energetic revulsives with advantage, in the hope of stimulating the powers of life, which seem on the point of becoming extinguished. This is a practice which is very successful amongst children. On the contrary, when the heat of the skin is elevated, when the pulse shows symptoms of reaction, when the erythema of the brain is betrayed by excessive agitation or delirium, then I would abstain altogether from the employment of a means which would in all probability but increase the existing degree of irritation. In cases of this kind I prefer addressing the revulsives to the intestinal canal, provided we have no signs of irritation or inflammation in the abdominal cavity.

When the belly is indolent and free from the efficacy of cold as a means of pain, the tongue clean and moderately husperebral inflammation; but it is mid, I have no hesitation in administering t know how to manage. active purgatives, with the design of promot-the property of the digestive tube. Several authors tain degree of expe- partake of this opinion. Thus, Dr. AseaCROMBIE (and I quote from his work in pre-ference, because it is filled with highly in-did not rights' depend upon this action on teresting and useful observations) says, "In all forms of the disease, active purging appears to be the remedy from which we find the most satisfactory results; and although blood-letting is never to be neglected in the earlier stages of the disease, my own experience is, that more recoveries from head affections of the most alarming aspect take place under the use of very strong purging, than result from any other mode of treatment."

We have now to notice another remedy which has been counted as a true specific in inflammation of the brain by many writers; this is mercury,—a means once looked up to with the utmost confidence in the treatment of encephalitis and several other inflammatory affections. In a question | sideration of of this kind it becomes my duty chiefly to lay before you the result of my own observations, and this I shall endeavour to do as briefly as the subject will admit. Mercurial preparations are employed under two principal forms to combat inflammatory affections of the brain; the first is in the form of frictions, which are usually practised either on the sides of the neck, or behind the ears. I must confess that I never saw any decided advantage obtained from the administration of moreury under this form. You can readily conceive that inflammation of the cerebral substance is a disease requiring the employment of remedies whose action is prompt as well as decisive. Now mercurial frictions have the great inconvenience of requiring a certain length of time for the introduction of the remedy into the economy, and before this the inflammation may have assumed a fatal character. Perhaps this form may be innocent, but it is one which does not merit any particular confidence. The other form, and it is a far more general one, in which mercury has been administered, is internal, and the preparation selected, by almost universal consent, is calomel.

You are all acquainted with the prominent part which calomel has played in the treatment of inflammatory disease, especially in the various affections of children; but here an important question suggests itself. Is calomel, as has been said, really a specific remedy in certain inflammatory disorders, or is its action rather to be referred to the purgative effects which follow its administration? This question can only be answered by a careful observation of facts. Go, then, into the hospitals, and obscrve what passes there; or, if you have already had occasion to follow several cases of inflammation of the brain, reflect upon the phenomena you have witnessed, and you will find that in all the fortunate cases the administration of calomel has been followed by decidedly purgative effects. We may landysis of these a

100

attribute. The predilection generally shown by practitioners for this preparation of mercury may be accounted for upon other grounds. Calomel is an excellent purgative, and suitable to a great variety of cases. oft does act in an irritating manner on the digestive tube; and, from its insolubility, it does not communicate any bad or nauseating taste; this latter circumstance is not without importance in diseases of the brain. where we should avoid every cause of irritation; it is particularly important in all affections accompanied by delirium, where we often have the greatest difficulty in inducing the patient to take the necessary medicaments. Let us now pass to the con-

Chronic Encephalitis.

Here the observations we have to make will be brief, for the disease bears a close resemblance to the acute form which we linve just terminated. The anatomical characters of chronic encephalitis are nearly the same as those we have given for the acute stage. However, induration of the cerebral substance more frequently accompanies the former than the latter. We also more frequently observe, as a consequence of this variety, the formation of abscesses in the substance of the brain, of cysts with strong, fibrous, well-organized parietes.

The causes of chronic encephalitis are the same as those which determine the acute form; and it may precede the latter, or succoed an imperfect cure. The symptoms also are the same; they consist almost exclusively in lesions of intelligence, of sensibility, or of motility; the march of the disease, however, is different, and it is in this circumstance alone, that we are to look for the differential characteristics of the two forms. In the chronic form the symptoms succeed one another more slowly. The intelligence remains intact for a more considerable period; the lesions of mortality are more uncertain, and the disease terminates either in a sudden exasperation of the accidents, or by producing a profound though gradual influence on the different acts of organic life.

Chronic Inflammation of the Cerebellum.

There is one part of the brain, which, as we before remarked, is but little subject to attacks of acute inflammation, but which oftener presents traces more or less well marked, of having been the seat of the chronic form. This part is the cerebellum. We might perhaps he able to collect eight to nine examples of chape mation of the cerebellum, who was simple, that is, similar lesion of

variety of symptoms accompany the disease Our remarks upon the treatment of in-in this portion of the nervous centre. The flammation of the ccrebellum, shall be very most striking phenomena certainly are connected with motility: here we observe the principal lesions. In many cases paralysis has inferior extremities; the scat of the paralysis is addifferent. we are really been noted as affecting the superior or the udifferent; we are not able to establish a greater frequency in the pectoral, than in the abdominal members. In other cases the power of the muscles seems merely weakened; the patient's gait is vacillating. In one single case the patient suddenly fell down. In other cases, however, we do not observe any lesions of movement; it is the sensibility which presents more or less remarkable modifications. Thus in two cases, the prominent symptom was a very acute sensibility of the whole skin, and after death an abscess was found occupying one of the lobes of the cerebellum. In one case the only lesion of sensibility consisted in an acute pain in the occipital region. In one several diseases of the cerebellum. This is especially noticed in cases where tubercles troubled with a constant nausca only.

Such are the symptoms that usually accompany chronic inflammation of the cereany general principle, or to say why at one open abscesses situated near canals early. time the same lesion should merely produce have aliuded to, the symptoms almost seem to be individual, and any attempt to generalize them in the present state of our knowferent points of the organs which are and is far from being uncommon. compromised in the disease. For the cerebellom this explanation is much more easily ascertained that the wrethra is pervious, and that nothing is the matter with it, treat the abscess as a common abscess only with the

short indeed. It is precisely the same as that for encephalitis in general; the main remedies being sanguineous emissions, cold, and revulsives.

ST. THOMAS'S HOSPITAL.

CLINICAL LECTURE -

ON CASES OF

ABSCESS IN THE PERINEUM.

Delivered in the Session 1835-6,

By MR. TRAVERS.

GENTLEMEN,-There are, I think, no case observed by Dr. Gall, the predominant cases under my care of more profitable obsymptom was blindness. We have already servation at this moment than those of fisnoticed how blindness is connected with tula in perinco, of which there have been and are now several here.

This abscess of the perincum takes place have been found imbedded in the substance under very different circumstances. Weoften of this part of the brain. It is not easy to have it quite independent of the urethra, as explain the reason of so remarkable a phe- we have abscess in the neighbourhood of the nonpenon. Does it depend on the connection of the cerebellum with the pour varolii, Local causes contribute to the formation of and, consequently, with the fifth pair of an abscess here. The injury of a blow, the nerves? Or are we to look for an explanation in the communication between the or walk, and fatigue of any kind, may set cerebellum and the tubercula quadrigemina, up a local congestion and a phlegmon here, from which latter you know the optic nerves which becomes an abscess in the perineum, partially arise? These are mere conjectures. It occurs in the cellular tissue, like a com-It occurs in the cellular tissue, like a com-Finally, in one case of chronic inflamma- mon abscess, having no tendency to com-tion of the cerebellum, the patient was municate with the urethra, which is perfectly sound and healthy. A full-sized bougie will pass readily into the bladder, and there may have been no previous affection of the bellum. How difficult it is to attach them to urinary organs, but it is always important to

An abscess abutting on a caust should have nausea, at another blindness, and at a third both an early and a free opening, to hinder loss of speech! In many of the cases we the inflammatory action from proceeding in the direction of the canal, or you will find it very difficult to prevent a sinous communication between them. The sinus may not ledge would be hopeless; perhaps this may be direct, but indirect, - not large, but small, depend upon the small number of Observa- - and the patient, after some days, when all tions we possess; let us then examine more, seems to be going on well, voids, at first a said let us hope, for the honour of science, few drops, and then a small stream of urine, that at some future time we may be enabled from the parineal opening, which prevents to explain this diversity of symptoms by the it from healing. The case is very simple,

> The treatment is very simple. mor, the principal derange abscess as a common abscess, only with the remarked, are ob-er of spetility, and you include no time in leaching and poul-tions, provided the evidence of matter is fairly perceptible. Bather, indeed, anticiwas it as

of cases is an inflammatory condition of the where, as I stated, the urethra is sound and lining membrane of the urethra, which has unaffected. supervened upon gonorrhea. You know Besides these, you may have another that an inflammation of the cells of the class. You may have, together with perspongy hody of the urethra is a simple and manent stricture, adhesion, forming creshould not not the state of the membrane,—false passages—that hernia humoralis, as it is called,—suffering small portions of the urine to pass swelled testicle,—is a constant cause of go out of the canal, more commonly taking norrhoeal inflammation. You know that place behind the stricture. Where the stricspasmodic stricture may exist to such an iture retards the urine, a dilatation of the extent as to cause perfect retention of canal occurs, caused by the impulse of the the urine for two or three days, and inflam-mation of the neck of the bladder, which by reason of this constantly recurring, a creates such excessive and distressing pain fissure or crevice at length takes place, in the act of micturition. You know that through which a small quantity of urine these are all consequences of inflammation permeates, remaining there for years with of the lining membrane of the urethra, not little or no inconvenience. In an old stric-

although the stricture is imperfect, - not vice or lesion which is so made, is less likely such as to prevent the person from parting to set up had symptoms. Palse passages with his urine, but such as admits of his part- are thus continually made with impunity. ing with it slowly, with difficulty, and under You may readily appreciate the difference preternatural exertion of the muscles which between the natural lesion which takes assist to empty the bladder,—there is an in-place as the result of permanent stricture created determination of blood to the nuck on the bladder side of the stricture, and of the bladder, and all the parts connected that which would take place in consequence with it during the operation; and the fre- of the penetration of the walls of the methra quency with which persons are called upon, by the hongic. In either case, however, I under such circumstances, to void their say, the artificial opening is made with comurine, occasions great aggravation of their parative impunity, provided it be of small sufferings. There is an habitual straining in extent; but, in either case, if it be large to the act of micturition, and all these circum- if the condition of the mine, of the prits, of stances predispose to the contiguous in the constitution, he such as to M likely to flammation, and the probable supervention carry on an inflammatory action, then, inof suppurative inflammation in the peri- stead of adhesive walls for the pasneum.

Now the mammation in these cases supplied and the consequences attending it through the inflammation of the urethra, cannot answer for the consequences. There the stricture, whether spasmodic or permatic plus, which must be got rid of their nent, and the consequences attending it through the arethra or through the consequences. which I have mentioned, cause and aggra- ments, and this will be follow vate the mischief in the perineum by deter- tion, a foreign and and mining blood to the parts, yet the abscess at the same time me occurs externally without any direct com-munication, originally, between it and the —keeping up the suppur

pate than delay the operation, by making a passage. Such a communication, however, free and deep incision; and in that way you is more likely to happen in cases in which will be very likely to save the urethra.

A very common cause of a second class urethra itself than in the first class of cases,

confined to the original scat of the gonor-rhea, which is within an inch or two from the extremity of the urethra, but trans-lated from thence to the bulb, the mem-disease. There is no danger of extravabranous part and the prostatic portion of the sation following their creation, for they are urethra, -all this being the result of neglect, so defined by the artificial cuticle produced or imprudent conduct, -venereal excite-by the athlesive inflammation which is inment, and other such causes. Thus inflam-stituted from the moment that the lesion matory irritation and spasmodic stricture or wound takes place in the lining memof the lining membrane of the urethra fol. brane, that extravasation will not follow. low gonorrhoza, which produces, by local An opening on the anterior side of the striccontiguity, inflammation of the sheath, and ture is generally the result of wrong treat-the parts surrounding the sheath, of the ment,—of a false direction given to a bougic, penis, and the parts situated in the peri—mot the result of the rive-a-tergo of the urine, from the action of the muscles in emptying Another class of cases is that in which the bladder. Anterior openings are found you have not spasmodic stricture of the to be contrary to the direction in which the arethra, but permanent stricture. Now here, urine passes, and the disposition of the cresage of the urine, the parts will take on the Now the inflammation in these cases suppurative process, and abscess will result.

stimulating the loughing, producing gan- and the cellular membrane covering the grenous inflammation, and then a free nenetration, on all sides, of the contents of this abscess, into the surrounding loose cellular texture of the perincum, there being nothing to oppose a resistance to an indefinite tent of extravasation.

An abscess in the prostate gland being confined within the sheath or fascia which contains those parts, will discharge itself after having produced a complete retention of urine. I have, on one occasion, passed a catheter below the prostate gland, when it has contained matter, and the urine has flowed, after the evacuation of half a teacunful of pus, proving that there must have been an immense abscess there. In such case, the whole inflammation has been confined to that one spot, and has terminated there, like an abscess of the wall of the intestine, within the canal; but this is very neck of the bladder. If matter forms in the parts forming the body of the penis, then extravasation will be the result, and the existence of gangrenous inflammatian is known feter it presents on being discharged.

If in such cases the stricture be imperconstances, as well as Mr. CLINE.

The effect of extravasated urine is to de-162 tion, in parts that are favourable to the extravasation, yet it becomes a question whether the extravasation has extended to the parts so discoloured, or whether the discoloration is merely a symptom of that sympathetic inflamination which the common cellular membrane takes on in the is diseased. In one of the worst cases that we had lately in the hospital, there was decable discoloration of the abments; and although there

muscles of the abdomen, had admitted the urine, and that, consequently, all those parts were condemned to undergo the sloughing process. However, I gave it as my opinion, having often seen such before, that that would not be the case, believing it to be only a sympathetic inflammation of the neighbouring cellular membrane. matter is of great importance as regards the result, and my observation proved to be just in this case. The man got perfectly well after the operation was performed. The after the operation was performed. simply inflamed spots supported freely on being opened, there being no dead substance at all in them, the puriform matter being perfectly healthy, and although sinous communications existed between the abscesses, they healed up kindly, as soon as the matter was discharged. This could not have been, if there had been any sinous comrare, and never happens, I think, in these munications of extravasated urine; because, parts, except in abscess of the prostate, in as I said before, I never yet saw, in a vast the portion of the urethra anterior to the collection of cases, a case in which the collular membrane did not die to the full extent of the extravasation of the urine, and was not cast off in the form of a slough.

The necessary operation, where an ahby the decomposed state of the pus, and the seess has not communicated with the arethra, consists merely in feeely opening the abscess. Where it is connected with stricture of the meable, so much the worse, because the dis- prethra, it is right to take up the treatment case will be the more troublesome. But the of the stricture as soon as convenient, after abscess may be combined with, or depending bacing discharged the abscess. I should, sin-ply on, a bursting of the methera, the re-thowever, he in no hurry to attend to this, if sult of accident, and without any disease, the person passes his urine freely; I would This happened to the late Lord Clark, rather provide for the full and free dis-While leaping a ditch his horse stumbled, charge of the abscess. But, in a case of threw hirs forward on the pummel of the inspermeable stricture, whether with or saddle with great violence, and burst the without abscess, the operation of cutting urethra. He became a patient of Mr. down upon it, and dividing the urethra at CLINE, who performed the only operation the point of the stricture, becomes necesthat could be employed in that case, - that sary. In hospitals, cases of extravasation of dividing the parts freely, and connecting occur very often, though cases of imperforate the criss of the arethra to an elastic cutters stricture, justifying the operation, occur but ter, and the case did very well. I have seldom. Yet I must say, that when they do heard one of his own family detail the circoccur, they do, according to my experience, perfectly well. In some of them you cannot introduce the slightest instrument with stroy the cellular tissue in all cases. But any justifiable degree of pressure. You canthough you have a block indicating inflam- not pass the best adapted metallic instrument into the bladder; even a small probe would not pass the stricture. In such cases the operation of cutting down upon the stricture becomes absolutely necessary. You place the patient in the position for lithotomy, and freely divide the strictured parts with the knife,-the parts not having been noghbourhood of some officer portion that changed, observe, by extravasation of urine, or the surrounding external inflammation. I am supposing that there is nothing more the matter there than the impermeable stricture. The operation is then not atgroins which was not tended with any considerable difficulty, the gentlemen enter- anatomy of the perineum not being altered both the cellular by inflammation or extravasation. The obthe integuments of the penie, ject then is to pass first a metallic catheter

the case of the bursting of the urethra, you are to proceed in the same way, and to connect the two ends by an elastic gum ca-

In the case of extravasation of urine, which will sometimes happen almost suddenly,in the course of forty-eight hours,-from the neglect, for instance, of a perineal or a half the wall of the canal is deficient, and scrotal abscess, the scrotum may become ordematous, swelling very rapidly, becoming almost as large as it is possible to ima- It must be, in part, an artificial passage. gine, and as black as your hat, the patient tion: nor need you where you have a large the perineum. The occasion is analogous to that of mortified hernia; you have no occasion to go about seeking for the ends of the not do so. You had better spare your labour, for the ends are placed in better appothat is entirely removed by the free division So, in the case of extravasated urine, having discharged the bladder, which you do by making an incision of several inches length it is labour in vain to look after the canal. you provide for the ready and imme You will find that after the urine has secreted, it comes away with the greatest freedom. The mischief is already done, and your placing an in you can adapt the treatment of the case, tallic or otherwise, with reference to its final purpose, much time you perform the more advantageously when the bladder has ever happens that the

into the bladder, substituting for that, as recovered itself, whon it is irrita-soon as you can, an elastic gum catheter. In bility, and when the sympathy between its suffering state and the system is at an end. Indeed the relief obtained from a free discharge of urine, as compared with a very imperfect and difficult discharge of that fluid, is inconceivable. The fever then specsides, and there is no longer any difficulty in passing an instrument, for the fact is that you have only therefore to take the direction which you know the canal should have.

So soon as the sloughs have been thrown being in a very bad way, in short, dying. off, the granulating surface begins to show Long before such a state arrives, and as itself on the sides of the wound. Wait for soon as it is ascertained that the urine is that; wait until the system has rallied, and making its way from the bladder into the availed itself of the relief afforded by the cellular substance, there should be a free in- operation, and then you will have no difficision made along the line of the perineum culty in passing an instrument, and in keepscroti to the whole extent of the extravasa-ing it in the bladder. But do not attempt tion. If the scrotum be not implicated, of to pass one before. The difficulty will lessen course it is not necessary to divide it; if it be, just in proportion as the process of filling it is right to divide it, and to do so upon the up and healing goes on. If you do not at line of the raphe. There the neest discharge tend to this you protract the good effects of is produced, the most equal and uniform. By the operation, for to pass the instrument is laying open the integuments on either side a proceeding of great difficulty, owing to of the raphe of the scrotum, you do not obtathe old sinuses which have formed in some tain so uniform a discharge as by taking cases, and to the totally altered and thick-the central line; and the incision may be ened condition of the perincum and the celmade there with the greatest depth, free-lular membrane. It is often a very difficult dom, and safety. The relief that follows, matter to find the extremities of the ure the enormous draining of purulent urine, thra, and you do not dilate the urethra or urinous pus, and the quantity of layers without considerable risk. A case occurred and shreds of cellular substance that are not very long ago, which some of you may discharged, is miraculous. You need not remember, where a narrow-bladed straight be solicitous of bringing the ends or the extended was carried in the direction of the tremities of the urethra finely together; that bulb of the urethra, behind the arch of the is a matter of little importance. It is far pubis, towards the bladder, to dilate the better to put the patient to bed. You do not stricture when the patient seemed to be on pass a catheter after cutting for the stone. the point of recovery. This was followed in that case you have no fear of extravasa- by a venous hemorrhage which, though we could not control it, and would by no means, opening made, partly by nature and partly under ordinary circumstances, have been by art, and in the line of the urethra and sufficient of itself to cause death, yet in the very exhausted state of the patient, did terminate life. The dissolution could only be attributed to that. However, it was a mortified gut; in fact, you had much better bleeding over which we had no control. Probably it was the vena profunda that was wounded. A plexus often lies at about the sition by nature than they can be placed by back of the bulb and prostate. Upon exayou; and, as to the stricture, the effect of mination it was found that the kuife had taken the direction of the bulb, onward to and the exit you have given to the slough. the bladder. I have seen a person for an hour, or an hour and a balf, or for nearly two hours, suffering the most dreadful agony, which may be got rid of as soon as you into the scrotum, and of a depth sufficient have given a free discharge to the extraonto remove the urine and morbid contents; sated urine and the sloughs, and in so doing discharge of the urine.

Well, then, there is another

hat time. The first to same the reflacion, because the instrument you let up inflammation of the lining membrane, hat time. vhich goes from matchform to puriform, and and in supportative inflammation, probably erminating in the destruction of the entire nucous membrane of the parts, besides coming up the irritation which you ought o subdue. I have so often found it necesary to remove the catheter, which has been utroduced at the heels of the operation, hat I am quite sure that in all cases it is vrong to introduce it, except where you are perating on undiseased parts, such as in sursting of the urethra, for in the latter ases it is important to introduce an instrunent, and there is no reason on earth why ou should not; but the same argument hat holds in favour of the practice in the me case, tends to favour the converse pracice in the other. Certainly, it is not right o introduce any instrument where the parts tre broken up by disease. Finally, let me epeat, gentlemen, that a free urethral insision is the proper remedy against the danrer of that extravasation which is evidently hreatened where the patient cannot pass a brop of urine, and you are unable to relieve nini in any other way against that consemence.

I may just name to you, that in one of the cases in the hospital, the formation of perineal abscess, without the smallest tendency to extravasation, was proved, by the perfectly permeable state of the urethra. The man was operated upon for the abscess it the time the nrine was passing. In unother case, also, in which the incision was made, both cases being cases of abscess ollowing gonorrhera, there was no stricture, and the instrument in that case also passed freely into the bladder. A third case was one which came under the care of Mr. SOUTH, when I happened to be out of town, where there was retention of urine, and where the operation of dividing the stricture was very successfully performed. This was a case unattended with extravasation; it happened in a man named Jones, who now passes muciform and not puralent urine, and who is getting better. The other was sbaces. A free division of the raphe scroti et perinci was made in that case for extravasation. The incision was both extensive and deep, and the patient went out perfectly well.

CLINICAL LECTURING .- I do not know any framan contrivance that can more effectually oblige a medical officer to study carecase of his patients, and at the cautious in the remedies he d himself under the neaccessed of every-public manner.

CLINICAL LECTURE

ON CASES OF

GONORRHIEL, POISONING FROM ARSE-NIC, IDIOPATHIC ANASARCA, AND PE-RICARDITIS.

Delivered in the Session 1835-36.

BY DR. ELLIOTSON.

GONORRHEA IN THE FEMALE .- Creceote. The first patient to be spoken of to-day is a French girl, admitted on account of gonorrhea. It appeared from her own account, that she had caught gonorrhoes several times. There was a very considerable discharge of a darkish colour, and slight swelling of one of the labia. She said that she had been labouring under the disease now for many months, but had been much worse within the last five or six weeks: she had very probably caught it afresh. She was ordered two drops of creosote in an ounce of water every four hours. The dose was increased to four minims, then to six, and then to eight minims. I gave her this, because I had heard that creosote has considerable power in gonorrhea. For myself, I have had no experience of it in this affection, but I thought the account probable, because turpentines have always had considerable reputation in gonorrheea after the inflammatory state was over, and creosote is very analogous in many of its properties to turpentine. During the whole time she was labouring under gonorrhea, she had suffered with pains of the head, and bones of the legs and arms, as well as in her shoulders and back. At the same time that the creosote was ordered her, she was directed to have a warm-bath every day. This treatment was begun on the 12th of August, and on the 29th it did not appear that the discharge was diminished. I myself have never seen any internal medicine do good in the gonorrhox of females, excepting where the case was inflammatory, and antiphlogistic measures were had recourse to; but I have always seen the greatest advantage where the inflammatory stage was over, and also in leucorrhoca, from the employment of an injection of the nitrate of silver. I am not satisfied that internal remedies are of the least use either in leucorrhos or gonorrhos, excepting so far as they overcome the inflammatory state, if the state be inflammatory, and so far as tonica, if required, may act by strengthening the body, but I have not seen gonorrhea itself controlled by any tonics, astringents, or specifics, given internally. There is, however, a local application, which is, I believe, recommended by many practitioners, and which has,

I think, far greater power over gonorrhæs | water and chalk andand leucorrhora than any other local application, where there is no inflammation; and that is the nitrate of silver. Some females will bear two, three, or more grains to the ounce, but it is always better to begin with a small quantity. I myself am in the habit of beginning with a quarter of a grain to an ounce of water. This I ordered for her. At the same time that this was commenced, the dose of creosote was increased to nine minims. On the 5th of September she complained of great bearing-down pain, said of September, without my seeing any rea- she went out perfectly well. son to believe that creosote had been useful.

ease at once, if given within the first forty- either generally or locally, eight hours, but after that time it has disease, and whether turpentine he employed or copaiba, it should not be until after the was exceedingly anxious to be under my inflammatory symptoms have subsided, and care, and made berself very unhappy that I presume also that not until then should she was not, and Dr. Tuomson was so creosote be given either.

case is one of poisoning from arsenic in a of organic disease about her, unless the girl aged 22. About three hours before her constantly albuminous state of the urine, admission she had swallowed, intentionally, which had been observed from the time she an ounce of the arsenic of commerce in entered the hospital, made it probable that some beer. Ten minutes afterwards she there might be some disease of the kidneys, became very sick, and on its being discovered, from something adhering to the dually, but no particular affection of the sides of the pot, that she had taken poison, chest or abdomen could be discovered a medical man was sent for, who gave her as medical man was sent for who gave her an emetic, the effects of which having subsided, she was brought to the hospital. Mr. Taylon immediately evacuated the contents of the stomach, by means of the the lower part.

good deal of burning personned a stomach during the night, but on the morning of the e stoniach 14th of September, she was nearly free from pain. She was afterwards ordered to be bled to a pint, for the next morning it appeared that she had suffered a good deal of burning pain in the night. But that had low almost entirely subsided. As she fainted when eight ounces of blood were taken, no more were drawn. The blood presented no morbid appearances. On the 15th she had some pain in the stomacii and bowels, and she felt as if the uterus was falling through slight tenderness. "She says that her her, but on examination by Mr. TAYLOR legand arms feel as if something were no prolapsus or other morbid state could be gnawing them. There was more tenderness detected. On the 10th, the pain was much at the large end of the stomach than at any diminished, and the pains in the head and other part of the abdomen. The tongue back were much less. She said, however, was much furred; the pulse 100 and weak; that the vulva was very sore; though ou examination nothing could be found the matter adopted except that of cupping her between with it, and she was discharged on the 15th, the shoulders, and on the 23rd of September

In the inflammatory stage of gonorrhom, When arsenic has been taken, the first it is necessary that the person should live object, it possible, is fully to evacuate the upon very low diet, and remain as much stomach; but after every particle of the at rest as possible. The greater num- poison may be supposed to be withdrawn, her of cases of gonorrhea become so vio-lent as they are, through the patient's in-quired. Arsenic, like many other poisons, attention to diet on the one hand, or not is a strong irritant to the stomach, and pruresting the body on the other. Walking duces gastritis while it exerts its poisonabout, and especially walking up and down ous effects; and very frequently after all stairs, is most injurious in this complaint, the poisonous effects have ceased, the pand, I believe, that very few persons would tient suffers considerably from the inflamed have a severe inflammatory gonorrhom, if state of the stomach, and bleeding, generally they would remain perfectly still, and take or locally, is absolutely necessary. Somenothing but dilucuts, -at the same time times, after other poisons have been taken, employing such antiphlogistic measures in there is more or less gastritis, recolering the the way of blood-letting as the symptoms lowest possible diet necessary, and fre-require. Cubehs will often arrest the disquently many repetitions of blood-letting,

IDIOPATRIC ANASARCA.-The next is a comparatively but little power; whereas, case of idiopathic anasarca. This was the after the inflammatory symptoms have subsided, copaiba has very great power over the under anasarca, and was under the care of Dr. Thomson. Just before her death she obliging as to gratify her wish, and she was taken under my care, only, however, to die_ Poisoning PROM ARSENIC. - The next in about a week. I could discover no sign

leura, and there was, flower, creatite, indication of the infammation of the subtance of This was very chesin, is there was a dull sound and soon i on percussion, and deficiency of respiration it the lower part, but she was far too exnausted for me to think of bleeding her, or plagning her with mercury. Indeed, I felt latisfied that nothing could do her good. Blisters, merely, were applied. She sank and died. I mentioned before opening her, that we should find the ordinary marks of nflammation of the pleura and lung; and that at the lower part of the pleura, we should find flakes of lymph and a quantity of scrum. These you will recollect were liscovered, and the lower part of the lung was found gorged with blood, so as to be in he first stage of inflammation. All these were recent effects. No disease, however, of any part could be discovered, except in generally seen, and far more minute. I cannot myself imagine that the dropsy was occasioned by the state of the kidneys. It lropsy which are called idiopathic. The mercury to ptyalism. This treatment pro-lisease of the kidney, in my opinion, could duced considerable relief." not account for her having gradually sunk, or for the dropsical symptoms. An albuminous condition of urine, I many years ago pointed out, does not indicate, neces- takes place. It occurs most frequently, I sarily, that there is organic disease of the should say, between the ages of 10 and 30. kidney, nor is there the slightest proof, in No case could be better characterized than my mind, that it indicates any affection or this. There was pain in the region of the disease of the kidney at all; for it will ap-pear suddenly in persons who take cold and down the left arm as far as the elbow. have inflammatory anasarca; it will go away It is very common for the pain to stop at as they are bled, and as the anasarca is the elbow, and I have seen it in many cured. To suppose that the kidney is or- cases stop an inch short of the elbow. In ganically diseased in such cases is impos- other cases it will run down the whole arm, sible, and that it is the effect of inflamma and stop at the wrist, and in many cases I tion or congestion of the kidney, is mere as have seen it stop an inch above the wrist. sumption. But I have no doubt that where It has been said by Dr. Andraz, that perithe nrine is constantly albuminous for a carditis occurs frequently without pain. I great length of time, in dropsy, there usually believe it frequently occurs without pain, is organic disease of the kidneys, which is according to the patient's account, but I generally attended by albuminous urine, have rever yet seen a case which I have though albuminous urine need not be atthough adminious time need not be the proved after death to be pericarditis, in femded by a discased condition of the kid-proved after death to be pericarditis, in new Indeed, some persons make albumi-which I did not discover pain upon examinous urine when they take certain articles nation, that is to say, on pressing down upon that cause indigestion. In those cases of chronic dropsy which

are not inflammatory, and which are un-accompanied by any organic disease, or any it was in this case. Here it was irregular. or or price disease that will explain the dropsy, It does not always seem to be irregular; I really believe the affection to be one of sometimes the pulse is found to be full, and the cellular membrane, and I have no doubt sometimes it is very small. Now the treat-

Mint that it was in a state of disease : but I myself have not had time to make these investigations.

Pericarditis .- The next case had been a well-marked case of pericarditis, which disease was entirely removed before her admission. The patient, a woman, aged 29, was admitted on the 29th of August. At the end of the first week in October, the report at her admission was, that "she had menstruated sparingly, and with great pain, this being the first appearance of the catamenia for seven weeks. A week ago she was seized with difficulty of breathing, pain in the chest, increased on inspiration, and a short dry cough. She had a severe shooting pain in the cardiac region, which went through to the left shoulder and down the arm as far as the elbow. There was also great tenderness over the cardiac region, he kidneys, and these, as I suspected, were on pressing the ribs down hard; and on ound diseased, but only to a very slight de-gree. Very minute granules were seen in up against the diaphragm. The action of the them, nothing like so minerous as are heart became rapid and irregular. There was extreme pain in the region of the liver, the lips were livid, the tongue was brown, and there was globus hystericus. She was appeared to me to be a disease of the sellular | bled three times in the arm. Thirty leeches membrane throughout, like many cases of were applied to the side, and she took the

Now, it is at this period of life-that is to say just before puberty, to the end of the young adult age, that pericarditis principally the pericardium, or pressing up against the pericardium below the cartilages. The acminute investigation with the mi- ment that had been adopted before her aden accurate mode of anato-mission, appeared to me to have entirely removed her complaint, at least so far to have subdued it, that no continuation or repetition of the measures then used were the most perfect form . medical govern necessary. She was in a state of extreme debility, her pulse was 106, but the local symptoms appeared to have given way so considerably, that I had very little doubt that if she was kept perfectly still, and allowed nothing but the mildest food, she would do well. I therefore contented myself with ordering her gruel, barley-water, and a pint of milk a day. Her gums were tender with the mercury which had been given, and her bowels were relaxed; she was therefore directed to take two ounces of chalk mixture after every loose evacuation. The gentleman who treated her before she came into the hospital (Mr. BRYANT), was a clinical clerk here a few months ago, and he seemed to have made the diagnosis with great accuracy, and to have treated her actively and exceedingly well. In fact, in all probability, her life was saved by his treatment. She went out on the 15th perfectly recovered, no medicine having been given to her after her admission, except the little chalk mixture to restrain the action of her bowels.

CASES OF

DISEASE OF THE HEART,

ELUCIDATING CERTAIN

DIFFICULTIES OF DIAGNOSIS.

By John Fosbroke, M.D., Physician to the Ross Dispensary.

"La méthode de l'auscultation à sans doute éclairé beaucoup le diagnostic des malutés du cœur. Elle donne souvent de très-utiles et d'indispensables renseignemens, et on ne doit jamais n'égligir d'y avoir recours. Mais seule, et anns l'aide des autres signes, elle ne pourrait que varement révéler d'une mauvère certaine l'existence de ces nataines, pas plus qu'elle ne pent, dans un très grand nombre de cas, décourrir seule l'existence des tubercles du pounon, on même d'une inflammation aigus de cet organe."—Puo-FESSOR ANDIAL.

Bedders wrote, in 1808, his excellent "Letter to Sir Joseph Banks" on the necessity of medical reform in this country, and pointed out the great strides which the French physicians were making in pathology and other branches of medical science, in consequence of the abolition of the old university schools, and the medical and surgical corporations, by the decree of Aug. 8, 1792, for they were close, illiberal, and corrupt; at the same time recommending, in 1803, the adoption of the present system, which was open, little and anti-exclusive. About that system, which has constituted, as a whole,

the most percess, he have the rence with the Franch in 1807, and the resident the Paris. When they had Lavolsier's, in Paris. When they had formed their establishments anew, he wrote to Dr. Berger, of Geneva, to complete his knowledge of the subject, and also concerning those other universities on the continent which were newly revived about the ime time, "ours alone," as he observes, "standing still, a stupid uniformity being the rice of all old universities." Beddoes (if I recollect rightly the information given by Mr. Higgins, of the Dublin Society, who was his assistant) was the professor of chemistry at Oxford, and he entertained the vain hope, to quote his own words, that " the day when a certain set of notions was to be thrust down the throats of society by mere partypraters, the owners of every monopoly, and their clerks in office," was over, and he proposed to "raise the brows of the parsons, the country gentlemen, and the merchantprinces, in every part of the kingdom," in behalf of medical reform. But Beddoes was driven from the head citadel of monkish bigotry and prejudice, for the premature liberality of his opinions, and taught that the spirit of the English universities might resemble those of France previously to their dissolution; for "the spirit of the univerhe said, "was at variance with the spirit of the age, and the spirit of the body of the universities was at variance with that of many of their most able members. The country was becoming enlightened; whilst those who studied with the intention of becoming public instructors, found themselves, upon leaving the University, where they had been educated, behind the world in many respects, and forced, as it were, to unlearn every thing, in order to commence their education anew. This was a state of things that could not last long, and the catastrophe was hastened by doctrines which, though long in openly manifesting themselves, and though opposed by all the influence of church and state, were not destined to be slow and ineffective in their ultimate progress." * These ancient and venerable institutions were, it is true, destroyed by the revolution, but they had been denounced by public opinion, and the spirit of the age, for thirty years before that event, + and now fell as the natural consequence of the spirit being wrongly directed, and reform not being conceded in time. 2 Beddoes, although, until towards the premature close of his days, influenced somewhat too much by his imagination, was not one of those men who obtain a character by more conning, and the interested voices of incompetent judges, but a man of

^{*} David Johnston, M.D., on Public Educa

France. † M. Bewline, Code Medicale. † Mignet and Johnston.

al powers and the night of mind. The hap- | were well if no such controversies ever enhas howers and sterngton pines are the mines was tracked the him to survive hose days or the second dominator, when hose days or the second dominator, when i man (to the second graph of Paley) might 18 well have put a rope around his neck as emonstrate against the abuses of catablished nstitutions. But his name remains to draw orth the sympathy which the memory of an old reformer excites. He instances, among the inny illustrious French professors who, elevated by merit, under the influence of reform, retrieved the feeble character of the profession in France, the energetic and talented M. Corvisart. He more particularly ulverts to the perfection at which Corvisart urived in all his discriminations and prognostics relative to diseases of the heart and great bloodvessels. Corvisart constantly brought cases of the most grave and obscure nature before the pupils of La Charité, and, with his scalpel in his hand, ultimately verified those changes which he had predicted. M. Horeau, a contemporary, states, that so astonishing was Corvisart's accuracy in organic diseases of the heart, that two-thirds of the thirty patients in the clinical wards, were admitted upon his bare suspicion of the existence of those diseases; and circumstances proved that he was rarely mistaken in any one of them.

But sure I am, from my own limited experience as an humble country physician, that the discrimination of the precise na-Here of such cases and their complications, and of one disease of the heart from another, is rendered, in many points, not yet quite so easy as the drawing of a line between a kettle and a cartwheel. When I am not working abroad, I am generally studying pretty hard at home; and I can plainly see that practitioners often meet with cases that differ from those regular diseases of the circulating system which are classified by pathologists, and which rather tend to baffle practitioners than to display their discriminating powers, if we judge from their hints, admissions, hesitations, suppressions, and uncertain language, both on the continent and in this country. The difficulty occurs, in practice, in numbers of instances, which never appear in print, and for very good reasons. To look into the heart of man, and detect " the hell that's there," is proverbially difficult in morals, but to pronound the nature of its fleshy maladies, is yet a harder task. For example: What a controversy has there been exhibited in this part of the kingdom between individuals (whom on both sides ! know and esteem) who, on the one side, have insisted that there was organic disease or the heart, and on the other that there was not, in the case of Mr. Bennett, which gave rise to the trial against the Eagle Office at Worcester!* It

sued to expose the fallibility of the profession. When it is admitted that we cannot distinguish between organic diseases and palpitations, in all cases, by the stethoscope alone (Dr. Mackintosh), - that hypertrophy occurs where there is no impulse, which is its pathognomic sign, and that impulse has occurred when there was no hypertrophy, that a plethoric state of the heart may produce the same signs as hypertrophy, -that pericarditis, in particular cases, may be con founded with dilatation (Andral), that time and repeated investigations only can decide whether there exists functional or organic disease of the heart,-when these things are borne in mind, the positive opinion tha organic disease does exist, cannot be made with too much deliberation. On the other hand, knowing that few men die from or ganic disease of the heart alone, but fron morbid action supervening on morbid struc ture (Professor Macariney),-that palpita tions and hypertrophy are only manifester at intervals (Andral),—that simple palpitations, and those palpitations which ar symptomatic of organic lesions, are liable t intermissions (Rostan),-and that active or ganic diseases of the heart are generall suspended for a time, to relapse suddenl and terminate fatally (Professor Home),an equal degree of caution is needful in de nying the existence of organic disease, upo a single examination instituted for the pur pose of filling up an assurance office certifi The advantage may be fairly pre sumed to rest with the parties who had th

I am going to introduce to notice a fer cases of disease of the heart. The two fire are not uncommon, but serve, notwithstand ing, to illustrate, in many points, the tw last, which are more obscure, and therefor more instructive. Many fields of patholog have been so thoroughly mowed as not t present a blade of grass, but this region not so utterly barren. "Where a fact is never exactly like the facts already observed, it is necessary, if I may so speak, to individualize without cessation. In this consists all the art of diagnosis, and it is for this reason that the instructed man who has seen most, is also he who ought to see best." (Andral.) Aware of the great difficulty of discrimination in heart cases, -of the double and exceptional import of the discriminating signs, whether those signs be communicated by symptoms or sounds, -1 submit every point rather by way of query than affirmation, and with the greatest diffidence to the profession. I quote solely the authorities of professors and hospital practitloners (most of whom I have heard) on account of their superior experience, and insert their names in parentheses for the sake of avoiding " he says," and " says he," and " he re-marks," and " he observes," and the like.

most opportunities of investigation.

CASE 1 .- Pulmonary Tubercles, with Dilatation of the Right Auricle, and Sumptoms of Hypertrophy of the Left Ventricle.

Mr. Henry Bellamy, of the Priory Farm, Goodrich, atat. 24, was affected April 27. 1833, with cough, and expectoration of roundly-formed erackets, which had followed the influenza. The cough was attended with symptomatic fever, and was of importance, because it had occurred before, in conjunction with pulpitations, and hemorrhage from the lungs in considerable quantities. After that occurrence his respiration and general powers were always feeble. He took calomel, opium, and James's powder, with an ammoniacum mixture, and after all fever and symptoms of increased action were removed, the Polygola mixture of the French, with Compound Tr. Benz. and Tr. Mur. Ferri. The cough was greatly relieved, and the respiration improved, and he had expectorated only a single clot of blood since the first attack. But excessive nocturnal perspiration came on, which wetted through the bed-clothes. These were restrained, at first, to two nights in the week, and they were gradually prevented altogether by superacetate of lead, with hyoscyamus, mineral acids in his drink, and citric acid with opium; but he still continued to get thinner. By the 26th of May, the cough and expectoration had ceased; he had recovered his general strength considerably, and had rather gained flesh, and he found the seat of irritation not so deep in the chest, but more at "the top of the windpipe." His chest was stimulated externally with tartar emetic, and the polygola was continued, with tartar emetic, ipecacuan., &c., which he never took " without relief of the cough, acting as if it went immediately to the part affected." In June all chest symptoms were removed, except slight cough, and occasional night sweats, but the debility, the shortness of breath, and the emaciation, continued the same. The citric acid, with opium, and extract of myrrh, again removed the sweats, and procured him refreshing sleep and easy expectoration, which had always been attended with violent straining of the lungs in the morning.

He continued to get better until the beginning of October, when he was seized with palpitation, to which he had been subject, at times, for years, previously to the attacks of hæmoptoe, and pain in the left thorax, extending from the bottom of the sternum, towards the spine, and occupying male hysteria. Much disordered nervous the space of a span. This pain, which was more or less constant, came on in an exasperated degree by stitches, and when he back. The cough was frequent, and expec-ioned of the tube, and those of four the toration was considerable, but there was no farmers, who were present. The pain on respiration. The respiration was the left ventricle was below audible at both sides of the chest, but less standard, and the pulse

the mot than at he bottom of the lohes, and it was much a long morous, diselsewhere; the flapping committees of the heart was very clear. I gave him the American remedy for consumption, Tr. Digitalis and Guiac., with Vin. Colchiel, and inserted a seton for the palpitations.

On the 25th October, the palpitation and fever were removed, the former having been greatly benefited by the seton, which he kept in for some time afterwards, but the pulse and general strength were much depressed, and the expectoration was too abundant, for which he resumed the Opium and Citric Acid, with the Polygola and Tr. Lyttæ. He now lay easiest on the affected side, but when he lay on his right side, he had violent stitches, which stopped his respiration, and set him gasping. In foggy mornings he was much worse. He got better again, and enjoyed a considerable period of convalescence, but his lungs continued weak.

Twelve months afterwards (20th Nov.) he was affected with such extreme shortness and hurry of expiration and inspiration, and oppression in the chest, that he could not walk the smallest distance without exhaustion. He had been free from this state until three days before, when a north-easter set in, and he had cough with thick expectoration in the morning, but without pain; wheezing occurred in the night, with in ability to lie on the left side. He had occasional circular tightness of the chest, girting him in at the sternum; less emaciation than three years ago, and swelling of the

But one of the principal symptoms was the very forcible action of the heart. This thumping of the heart came on most violently, with cold extremities, on lying down in bed at night, and shook the bed furniture. He was always purplish in the face, and in his youth he had been apt to turn of a blue or a violet hue in the extremities and face, from any chill of the feet, or from bathing in the Wye. The jugular geivered sometimes at night during increased impulse, but there was no constant turges-When sitting quietly and leaning cence. forwards, the breathing was easy, the voice strong, and the action of the heart not felt. When he walked, the respiration was nortal and stopped almost entirely. He was sometimes relieved, in this state, by tears, for he was subject to a sort of nervous attack, like action, to which the whole family are subject, was blend . with the organic disease. The impulse and so great at the hottom of THE HEART.

pressible i the right himself in the trachea. At the space between the left scapula and vertebrae, pectoriloquy was very distinct, but it was much more jarring, loud, and distinct, over the riet scapula. The voice, however, was naturally resonant. The respiration was dear everywhere, but blowy and schorous.

I now offered an opinion that the right ventricle was hypertrophied, and, from the ound, as well as the impulse, in concurrence with long-standing symptoms, that there was dilatation of the right heart. The hisory of the case favoured the opinion of orranic disease. The grandfather had died of ingina pectoris from ossification of the coropary arteries, and was examined by the late Mr. Paytherus and Dr. Jenner, hence derivng, I believe, the first fact on which Dr. lenner founded the incorrect doctrine aftervards promulgated by Dr. Parry, that angina vas generally caused by ossification of the intritious vessels of the heart. His father was affected with pulpitation and cough, and was conspicuous for venous fulness and purple endency of skin, combined with a nervous and hypochondriacal temperament. One siser is now suffering from irritable heart, with ymptoms partly nervous and partly indicaive of accumulation of blood in the caviics; another is subject to sudden deadness nd purpling of the skin, from slow ci. culaion in the veins of the arms.

ears ago, -that as he had been subject to it and violent action of the heart, more or less, vith weak and short respiration, for the last our years, and had improved in flesh and trength whenever the heart became more ubdued, -- that as the symptoms might arise he same time I could not but entertain erious doubts and apprehensions.

Nov. 24. 1 put him on a diet of hiscuit, ice, milk, and slops, and under the action of ntimony, internally and externally, which wered considerably the action of the heart, ut produced too much syncope in the first istance. He was ordered to refrain from hatever would hurry the respiration or irculation, but so soon as an amendment ok place, he rode to Monmouth Fair, and

tions were audible under pression of breathing; his pulse not strong;
The creptition aste and his respirations 40 in a minute, carried on were heard under the left by the shoulders and muscles of the chest clavicle, and the mucous rale was audible to and abdomen; the body in perpetual agitation; the lips and nostrils empurpled; the mucous rale in the larynx, and extending from the right clavicle down the right chest. Leeches, blisters, sedatives, and antispasmodics, were all useless, except that the leeches smoothed the way to the grave by relieving the dyspuca. It was strange how he would sink, like an hysterical woman, into a semispasmodic state of breathing, and then rally again, and be as casy in a sitting posture as in good health. extended from the right lobes to the bottom of the left and upwards, and after frequent sinkings and reactions he expired on Monday, Dec. 2, at 2 o'clock. On the preceding evening he called up every farm servant, and gave to every man the character for his services which he deserved, pointed out what alterations he intended to have made upon the farm, and discoursed deliberately with his family on their several affairs. remember a female in phthisis, who sent for me to see her die, conversing of it as of taking a journey, until nearly her last breath. There is a philosophy in deaths like these, which may be owing partly to temperament but greatly also to integrity of conduct, and to a nature free from the malignant passions.

Post-mortem Examination .- Mr. Thompson, a gentleman of skill, and surgeon to the Ross Dispensary, examined the thorax with I gave it as my judgment, that as he was me. The right auricle was twice the size of flected with hamoptysis so long as eight the left, but though dilated it was not thickme. The right auricle was twice the size of ened. The columna cornea were very strong, and well defined. The right ventricle was not dilated or thickened. There was much fat about the heart. The primitive vessels were not obstructed. The lungs were firmly bound by old adhesions to the rom chronic bronchitis, - and that as posterior parietes of the chest. The root atthisis rarely takes more than one year to of the lungs on the right side was more on through its course,-the pectorilogue purple and soft than on the other. They night chance to proceed not from thereu- were considerably occupied with gray tution existed whereahouts they were thickest. There were two cavities, one on each side of the spine; that on the right side was nearest to the posterior wall of the chest, which may account for the greater loudness of the voice from that point. There was no particular appearance in the bronchial tubes or membrane, except a frothy oozing from the smaller tubes.

Remarks. - The most singular circumstance in this case, is the fact that there as sezed with such a fit of dyspuces and was every symptom of hypertrophy of the tordinate pulpitation, that he burried to right ventricle, but no other organic affecexpands, threw himself into a chair, and tion than simple dilatation of the right authis arm on a table with his chest ricle; but it will be more in order to notice was somewhat recovered. in the first place the origin of the disease.

I cannot reflect upon the circumstances and rest open the circumstances showing a tendency to pulpitations and heart affections in the family of the patient, and aymptomatic. All pathon upon the early manifestations about the nervous and symptomic heart in his own case, without seeing in the among whom are Rossan. case something like a predisposition. M. Rostan says he has opened a thousand individuals with hypertrophies of the parietes of the heart, and has never known a case of hypertrophy or of aneurysm, that is, active dilatation of the heart, which arose, in a primitive manner, from an hereditary or acquired disposition, but that he has found invariably an obstacle to the course of the blood, and that hypertrophy without obstacle, is merely exceptional, and barely possible. The present case was certainly not one of dilatation by predisposition alone, without obstacle, for the phthisis itself was the obstacle, but I infer disposition, from the history of the case, and I cannot conceive how, if the heart be not influenced by original tendency to disease, the same obstacle should so often occur without that organ professor of La Salpetrière says, that the obstacle, and not the hypertruphy, is the disease. Wherein is the obstacle in those cases of hypertrophy by congestion, which, the country. Dr. Parry also thought that chial capillaries. (Audral.) exercise mcrely.

tion; simple nervous, simple plethoric, and rated. Induration of the pulmona

* Clinique Medicale, tom. 3, p. 531. 1 MS. Notes of Lectures by J. F.

but few, and Drs. Parry and Macintosa, somit the plethoric and congestive. For my part, I think that the first two, and sometimes all three, are blended (but more on this head in an express paper), and I think that the nervous and congestive were united it This case; or, in full, that original nervous irritability of the heart was combined with a liability to undue accumulation of venous blood in the right cavities, particularly on the contraction of the vessels upon the surface of the body. The symptoms and proofs of a nervous temperament in this case, - the coming on of the palpitations at night in the greatest degree .- and the fact, as we are told, that all palpitations not arising from organic but functional disease of the heart, more frequently affect the auricles than the ventricles, and the right auricle more than being affected. The experienced and acute the left,*-stamped the nervous character upon them. But though the occurrence at night is said to be characteristic of nervous palpitation (M. Laennec and Dr. Macintosh), the increase of action and of impulse of the according to M. Andral, arise from in-right ventricle upon the contraction of the creased assimilating powers of the part, surface circulation, and the crowding in of and a greater deposition of atoms than are absorbed into the circulating medium? That occasions of chill, gave to the case also the consummate pathologist moreover has given mixed congestive character. As there was a case of dilatation of the right ventricle, an obstacle in the lungs, so were they in a and hypertrophy of its parietes, without ob | measure symptomatic. It may happen, geneand uppersophy of its parietes, without on incessive symptomatic. It may happen, generative the auriculo-ventricular orifice, or rally speaking, that nervous palphtations are any other lesion, after inflammation of the pericardium and bronchial membrane,* and palpitations, arising from hypertrophy also, a similar case of simple hypertrophy of left ventricle, after latent pericarditis without tended with interruption of rest, as in the obstacle. When the properties of the advanced with interruption of rest, as in the obstacle. Wherein, again, is the obstacle case of simple nervous palpitation. In adin those cases of dilatation which arise dition to palpitation, the patient was next from congenital disproportion of the two affected with hamoptysis, and subsequent parts of the heart, - according to M. cough. Hemoptysis is a well-known effect Lacennec, the "most frequent cause" of of congestion of the lungs produced by paldilatation? Mr. Henry Cline was of opi-pitation, dilatation, or hypertrophy of the nion that the heart grew under diseases, right side of the heart, and is most frequent which rendered it liable to congestion,—and when caused by hypertrophy of the right that the greater quantity of blood pouring ventricle. The affection consists generally through it in those who are in the habit of in what MM. Corvisart and Lacennec term taking violent exercise, had a tendency to pulmonary apoplexy by congestion and increase its size,† an opinion considerably hemorrhage from the bronchial membrane, strengthened by the frequency of diseases or, as some pathologists state, by transudaof the heart in our labourers in this part of tion and exhalation from the minute bron-

there was a connection between dilatation, and accumulation of blood in the heart, tion, for the augmentation of the heart's aorts, and right pipe. Others think that volume, in complication with phthisis, conthe heart may hypertrophise, like the pugilist's or blacksmith's deltoid, from increased right cavities, with or without hypertrophy of the parietes, and seems to depend on the Occasional palpitations were the earliest obstacle experienced by the blood in favers symptom in this case. Authority and oh- ing freely the vascular structure of the lungs, servation point out three kinds of palpita- which is often, to a certain extent, oblitestance, stricture, obstruction

of the palests, artery or vessels of the served these symptoms, the existence of a interior of the first of the control of the circle of the c fection of the heart is slight, symptoms, but little marked, announce it during life, and auscultation may at most but recognise its existence; when more considerable, the symptoms may be more characteristic.

Auscultation is peculiarly fallible in these complications, for in a certain number of cases, the great extent of the heats of the heart does not indicate a morbid state of that organ, as they result uniformly from induration of the pulmonary structure, in which they may be extended with force under one or other clavicle, and it may be, in some individuals, even to the back. (Andral.)

The progress of the case also indicated dilatation. The palpitations were at first moderate, and occurred at longer intervals, the close the character of asphyxia. pulmonary artery into the lungs, than could ties; but there is a continual tendency to that change till it is effectuated, and all the causes, moral or physical, which produce any difficulty whatsoever in the circulation. singularly hasten the production of dilatation. But whilst the palpications are absent, the application of the hand or ear to the precordial region, will not discover anything unusual in the heart, and so long as there is no anenrysm, the pulse also will be case given.

The violet circulation, with disturbed respiration, formed a third indication of dilatation. Swelling of the face and violet discoloration of the lips, impossibility of horizontal decubitus, irregularities and intermittences of pulse, are so many symptoms that coincide with pulmonary phthisis, but do not depend on it. They announce an

The jugular turgescence during the more violent attacks of dyspnœa and palpitation, presented a fourth sign of dilatation of the heart and pulmonary congestion. The livid or violet tint, as in asphyxiated persons, which occurs in people with very troubled respiration, and in dilatation of the heart. is the effect of a want of equilibrium between the quantity of air entering the air-cells, and the quantity of blood to be vivified. If more blood than in the normal state is accumulated in the pulmonary vessels, a greater quantity of air is necessary in a given time. and consequently there is a sensation of oppression, and a drawing together of the inspiratory movements, which shows the introduction of an excess of air, and the opposition of some cause to the free passage of blood through the pulmonary vessels, prewith oppressed breathing and tubercular ceding, therefore, any other sign of the exirritation, but were on the whole slow; at istence of organic disease of the heart. In last both the palpitation and dyspnæa be- a further stage, all efforts are insufficient to came more formidable, and assumed towards | modify the whole of the blood accumulated It in the lungs. The blood, already changed, seemed to me that through the more irri- can no longer pass freely into the left cavitable state of the right side of the heart ties of the heart, whence reflux and stagnathan of the left, and its undue action, more | tion, and a new obstacle to the pulmonary blood was hurried, in consequence, by the blood in the right auxicle, great venous trunks, and parenchymatous tissues. When be received and circulated at an equal rate the veins bring back, more or less directly, by the left heart. Palpitation and dyspnora the blood towards the heart, there occurs may be manifested a long time, without any the greatest difficulty of respiration, then material change in the thickness of the increased asphyxia, and then, notwithstandheart's parietes, or in the caliber of its cavi- ing, the air enters freely into the vesicles, the feeling of suffocation, from the quantity of inspired air not being in proportion to the mass of blood.

But these symptoms are not unequivocal proofs of dilatation. Stasis of blood in the left auricle and lungs, dyspnera, cough, previous hamoptoe, and violet discoloration of the lips, face, and skin in general; stasis in the right ventricle and anricle of the same side. and all the venous system; are part of the natural. (Andral.) - All these phenomena leading symptoms, towards the end of an strictly accorded with the progress of the hypertrophy, arising from an obstacle of the aortic valves or thoracic aorta, before or after the giving off of the subclaviaus. (M. Rostan.) Besides, one of Laennec's tests of hypertrophy of the left ventricle is jugular turgescence. (Dr. Macintosh.) Dilatation may also be confounded with particular cases of pericarditis. There are certain forms of inflammation of the pericardium which influence the movements of the heart aneurysmatic state of the central organ of in such manner that a disturbance of the the circulation, that is, an augmentation of circulation results from it, giving rise to the its volume. With many phthisicals we have same phenomena as those observed at a charryed such a suffocation, that they were certain period of aneurysm of the heart. to keep themselves sitting up in their (M. Andral.) This authority gives a case of latent pericarditis, in which there came on, the overwhelmed them, all of a sudden, extreme dyspnon, increasing in intensity till it produced death by asphysia. The p.-m. appearances were, scrous tion could co-exist with increased impulse effusion into the pericardium, and simple by of the left yearricle of the heart, perfuphy: but though a perfuphy was without obstacle, which had been marked but evinced by this its sign, dilutation only was by slight impulse. He gives another ease discovered post morten, and the violence of monia. The oppression and dyspacea be- right ventricle were produced by the temcame more considerable, and all the symp-porary condition of the circulation of that toms of consumption were complicated with side of the heart and of the lungs;—that the those of aneurysm of the heart; the face ten iency to hypertruphy, produced by obcases of obscure pericarditis without pain.

logical opinion.

Abernethy used to term it, against the and conditions, in equivocal cases? sternum, in this case, could not come of sinple dilatation; for though dilatation renders with this subject that ought to be home in the patient more liable to sudden attacks of mind. One is, that organic affections of the palpitation and dyspuca than hypertrophy heart, accompanying chronic heorichitis with (Dr. Macialosh), the palpitations are at- considerable oppression, may be consecutive tended, not with increased, but diminished as well as primitive, and that organic disimpulse, with purple countenance and swollen jugulars. (M. Martinet.) I do not know that I ever saw or read of a case of simple dilatation in which the pulsation of the heart was not more feeble and more extended, except a case given by M. Andral, in which the contractions of the heart were more seusible at the inferior part of the sternum than at any other part, with a particular bruit: the only lesion was an enormous dilatation palpitations occur in pacamonia, pathisis, of the right auricle, with slight hypertrophy accidental formations in the lungs, or in the of its parietes. I also know that M. Laennee, tract of the great vessels, as in all other and others have considered that this shock, or impulse, cannot arise from simple palpitations, and that it is the distinguishing think they often arise in phthisis from symptom of hypertrophy. Knowing these contiguous irritation, and flatonial things, and that dilatation at all events ex-seted, I could not conceive how that dilata-bring on tightness and

of pulmonary phthisis, in which the patient the impulse was owing to mere palpitation, was seized suddenly with troubled respiration,—accelerated respiratory movements,—that the control of the control was puffed, the eyelids were a little infiltrat-structed circulation, had not existed long ed, and the lips were swollen and violet, enough to superadd the change of structure The left ventricle was slightly hypertro- to the change of action, as happens in some phied; but the real disease turned out to cases in which the symptoms of dilatation be pericarditis, without pain. He very reasonably thinks that the aneury-in did not existed long enough to produce the internal exist, merely because it could not have been hypertrophy which will sometimes ensue in formed all of a sudden. Some similar pine phthisis, notwithstanding the tendency of nomena characterize one or two other of his the heart in that disease to participate in the general diminution of the muscles of animal life and the general atrophy (M. Andral):-All these signs that "palter with us in a that, as aggrandisement of the heart's subdouble sense" exhibit the great dubiousness stance may exist without aggrardizement of doubte sense earning the great due to state and earlier and earlier and the weighing every individual symptom, and the history of a case; and then taking the transfer and the tracking of the court will not produce impulse without inverse and them taking the contractile energy of its fibres, particularly the court will not produce impulse without inverse and contractile energy of its fibres, particularly the court will not produce the court of the court without inverse and contractile energy of its fibres, particularly the court will not produce the court of the court will not produce the court of the court of the court will not produce the court of the court o time for the further lifting up of the veil, be-fore we presume to give a conclusive patho-culation is slow, so increased impulse may arise from an increased volume of blood and The peculiar circumstance in this case increased activity in the cavities of the heart, was the presence of the signs of hypertro-without increased autrition of its subphy, without its existence. We are told that stance; - and, lastly, that impulsion, as is the principal symptoms of an hypertrophy admitted by M. Andral, Dr. Macintosh, and of the right ventricle are, "a shock against others, new be produced by more polpitathe inferior part of the sternum, and much then in a vident degree, and cannot conseless at the left, the general circulation little, quently be set down as an unexceptionable changed, and some phenomena of pulmo-nary congestion." (M. Roston.) I know Should we not then always shape our opi-that the shock, or "thumping," as Mr. nions subject to these important exceptions

There are two circumstances in connection ease of the heart may produce chronic brouchitis, and, by congestion and distention, hemorrhage of the mucous membrane, and those muco-serons accumulations in the air passages and vessels which increase the dyspnosa, augment the pulmonary congestion, and set the affection of the heart on the quick march. (Audral.) The next cir-cumstance is, that common symptomatic maladies, near or remote, which produce an obstacle to the circulation. (M. Rostan)

sternum, and increase the irritation of came under my care in Dec. 1833, and died

The cases James Dean, 48, at Ross, was an example of their coincidence with accidental formations. About four years ago, after an attack of hamoptoe and cough, preceded by palpitations so violent that they shook the watch that hung over the bed, and compelled him to tie a shawl round his waist to prevent the impulse, he coughed up a solid earthy concretion as big as a nuturug, which, he says, is now in the possession of Dr. Thomas Evans of Gloucester. He has been under my care for dyspinea, evidently connected with fulness of blood in the right side of the heart and chest, consequent on engorgement of the liver. which is a frequent precursor of such affections. " Palpitations are known by the absence of the signs that accompany diseases of the heart," says M. Rostan. They are so in these cases, but not in such a case as I have given, nor in many others.

The diagnosis of pulmonary tubercles was as obscure in this case as the precise condition of the heart; they were probable from many symptoms; from the readiness of the lungs to become irritated to such a degree as to bring on coughing; the long confinuance of the cough after the attack of hemoptoe, and the persisting debility and wasting of flesh. But there was no dull sound on percussion, no absence of respiration in one spot or another, though it was certainly blowy and sonorous, which is said to indicate crude tubercles, surrounded by healthy structure; nor was there the weakness of murmur which generally occurs in the second stage of phthisis; the complexion was purple; the peaked and white face of consumption never made its appearance; the night sweats were common to himself and others of the family, from having irritable and nervous constitutions; besides those sweats, marssmus, and short and frequent breathing, are as common to chronic bronchitis as to phthisis; the catarrh of phthisis, which resembles ordinary bronchitis till the cite sufficient constitutional irritation to tubercles become so numerous as to create a new set of symptoms (Laennec), marked the real disease. The pectorilogue discovered towards the close, at a point where resonance only was perceptible, about a year or more before, rendered the diagnosis more right heart and lungs. M. Andral advocates unequivocal. We have cases of bronchitis decisive emissions of blood, when pulmonary mistaken for pulmonary consumption, the congestion and oppression ensue from dilaonly difference being the londer respiration tation; but, in other places, he demonstrates and resonance of the voice. (Dr. Macintosh.) that cases of dilatation do not bear blood-let-It is difficult to say whether the occasional ting well, and require a tonic treatment. It is pains of the chest were owing to muscular condemned by every other leading authority, affection, or depended on the formation of except under particular emergency. In this tubercles in the lungs; but in the latter case, the patient had suffered a so deadly

in 1834, and I fear I shall have another such case in Thomas Jones, ætat. 35, who has had ha moptoc, with disease of the mucous membrane of the alimentary tube. These are cases, says the celebrated teacher in the school of medicine, in the true spirit of medical experience and clear-sighted induction from facts, in which phthisis makes its debut very obscurely, in which the appearance of the first symptoms always succeeds a simple bronchitis, hamoptoe, or peripneumonia. Some present pneumonic, others bronchitic symptoms, but when convalescent they never recover their general powers, nor their em-bon-point, and they continue to cough. The diagnosis of tubercles is obscure, because the cough, the only local symptom which exists about the chest, does not suffice to characterize them, and the absence of strength, and the persistence of the leanness, are looked upon as connected with the antecescut malady.

If this state continues for ever so little, it should inspire a strong suspicion of organic lesion, and if the cough does not cease, the development of pulmonary tubercles is to be apprehended. It suffices to say that this cough ought not to be neglected, and the cure, as is too often the case, ought not to be abandoned to nature. Many dread the employment of active antiphlogistic treatment, because, say they, the subject is en-teebled and exhausted. But this feebleness, this exhaustion, depends, above all, upon the serious change which is forming in the lungs, and it is only by combatting this change that you can restore some strength to the patient. "An actual convalescence is almost never accompanied with this prolonged state of feebleness, and the rapidity with which strength and flesh return in individuals who have been kept a long time on severe regimen, provided no organ continnes diseased in them, is a thing truly remarkable." (Andral.

A moderate number of tubercles will exdestroy one patient, while another will live out the destruction of one lung. But I do not think the tubercles were so much the immediate cause of death as the oppression of the circulation and respiration in the deutic inflammation, and cause those of dyspuces and oppression, under previous hands to mine, that he had an instinctive the lungs. This case to it. He was placed between two fires and bleeding could only add to the debility in which there existed alarms, most evident of one or other disease, either of which was signs of dispepsia, of nine and the standing, sufficient, and one sure, to destroy him. (He have been completely cured. I third case, might have lived longer, had he been shut up in one room, in an artificial and equal temperature, and compelled to perfect repose of body and mind. But his active disposition rejected this plan, and by hurrying the circulation through the cavities of the beart and the bronchial structure of the lungs, he no doubt brought on the last and fatal attack. Exercise, in disease of the heart, will oring on severe dyspnæa and a feeling of suffocation, but, on the other hand, all affections of the lungs, which give rise to longcontinued and severe dyspnora, and habitually short and difficult respiration, and a feeling of oppression, may occasion palpitations and affections of the heart; and all causes, that upset the balance of the circulation, and produce an overflow of blood about the heart, may excite this class of affections, (Dr. Macintosh.)

I have reported this case, and reasoned on the symptoms at length, for one such case is a representation of a whole family, and supersedes the necessity of another of the kind. Such cases are not unfrequent, and a knowledge of them is very useful to the practitioner.

Ross, Nov. 14, 1835.

ON THE TREATMENT OF

PULMONARY CONSUMPTION

BY THE

INUNCTION OF LARD.

To the Editor of THE LANCET.

SIR,-During the last fifteen months I have experimented upon the effects to be produced on cases of phthisis, by administering nourishment through the skin, and with very evident success

My practice consists in simply causing the patient to rub in for half an hour every day upon the chest, back, and ribs, or on any other large surface, as much lard as can be absorbed in that time. In very advanced cases, this operation is repeated as often as three times a day. At the same time any urgent symptoms are combatted with the of stimulating the nutritive functions, ordinary remedies.

The effect of this treatment is, I find, to stimulate the nutritive functions of the body, will point out to him. For my own pant my increasing rapidly the patient's strength; experiments lead me also to think, that is to quiet the action of the heart, to allay exerts a marked control over scrolabour pain of the chest, and to remove difficulty of action. breathing. These effects are made apparent in fifteen or twenty days, and even carlier.

Out of four very severe cases of phthisis consumptive cases, was a which have been submitted to my care; two health generally enjoying

catarrhal, with tubercles, remains yet in doubt. The fourth, tuberculous, and complicated with dilatation of the cavities of the heart, a case of two years' standing, is progressively and evidently improving. In the third of the above cases, the patient, a lemale, was weighed on the 15th of October, when her weight, including clothes, was found to be \$3 lbs. She then commenced rubbing in the lard, and on being weighed on the 10th of November, she had gained seven pounds, and this increase of weight she has maintained up to the present date (November 21), weighing on the morning of each day, 87 or 88 pounds, and at night invariably 90.

A friend of mine, also a medical practitioner, has likewise made trial of my plan of treatment, upon what, in his opinion, was a hopeless case, of nineteen months' standing. The cough and expectoration have now nearly subsided under it, and the breathing and strength are restored. I am promised a detailed account of this case. which I hope to transmit to you, in a short time, as also that of other cases now under treatment; and whatever may be their result, whether they terminate in perfect or parcial convalescence, that result shall be faithfully recorded.

My immediate object in giving this hasty notice at the present time, is to invite those of my medical brethren who have hospitals under their care, to aid me in my experiments, by giving the treatment a trial Any professional communications bearing upon this subject, sent to me free from expense, whether in favour of or against the plan, would be esteemed an obligation; as upon a subject of so much importance, and leading to so much general benefit, it is very desirable to accumulate a body of facts, verified by the observation of others. Cases not far advanced have certainly appeared to yield with the greatest readiness to this remedy. But to the profession generally, I look to confirm or destroy my hopes of having discovered something in the shape of a remedy for this reproach to medical science. The plan has this advantage, that it may be combined with any other mode of treatment the practitioner wishes to employ.

What other forms of disease this power through the absorbent surfaces, is capable of combatting, every practitioner's experience

In conclusion I may state, th me to try the inunction

constant occasing to handle field, combined without the slightest benefit, and the vomitwith the adapted fact, that butchers ing being not only the most troublesome and their factors are remarkably exempt aymptom, but precluding all possibility of from that disease. faithfully,

EDGAR ASHE SPILSBURY, M.R.C.S. Walsall, Staffordshire, Dec. 7, 1835.

TRIAL OF CREOSOTE

IN SPASMODIC AFFECTION OF THE STO-MACH WITH VOMITING.

To the Editor of THE LANCET.

SIR,-The following case, illustrative of the non-efficacy of creosote in allaying spasorgan), is transmitted for insertion in your obedient servant,

JOHN WALKER, M.D. 353, Argyle-street, Glasgow.

pages 275 and 276, Dr. Elliotson relates one twenty drops of solution of mur. of morphia, case of neuralgic pain of the stomach, and when the symptoms induced were as violent two of severe vomiting, so successfully treated with creosote, that in one of the latter cases it was only necessary to exhibit cine a fair trial, it was again omitted for the medicine once; and in the other the adminiscration of a few doses checked the neither vomiting nor pain of stomach was vomiting, which had continued for some time, producing its usual effects of debility, six hours. The second dose produced vio-&c. From the very high esteem with which lent and immediate vomiting, with severe Dr. Elliot-on regards this medicine, I was pain of stomach. inclined to try it in the following case:-

Case. - A.B., etat. 22, an unmarried female. acute pain along the whole spinal column, at intervals. It was not increased by presgreatly increased on motion or pressure, and accompanied by two lateral curvatures, describing, in all, the letter s, and including all the dorsal and lumbar vertebra. There is no paraplegia; the uterus, bowels, urinary organs, &c., perform their functions regularly; the skin generally feels natural, and there is always some degree of appetite. Among the numerous symptoms under which this patient labours, the most distressing is constant vomiting of all ingests, of whatever temperature or kind, and generally from two to twenty minutes after they have been taken. This vomiting of food is attended with considerable pain; but frequently violent retching takes place when no food has been taken, and which is attelled by violent spasmodic pain of stomach, generally continuing from twelve to twentyar hours after the retching has ceased.

avery justifiable means had already

I remain, Sir, yours improving the general health, and as no-thing had hitherto tended in the slightest degree to check it, I felt inclined to try the creosote. It was, therefore, given according to Dr. Elliotson's plan, in doses of two drops in mucilage and water every six hours, but without effect. Next day it was increased to four drops, and in this quantity the first dose produced headache, and increased the vomiting and pain of stomach. The same quantity was again exhibited at the end of six hours, which only aggravated the former symptoms, and a short time after the administration of the third dose the headache became agonizing; countenance flushed, with great heat of surface; retching and modic or neuralgic pain of the stomach and pain of stomach very severe. It also acted voniting (without inflammation of that powerfully upon the bowels, producing six watery stools the first hour, with severe very able Journal, by, Sir, your most griping, likewise inducing painful micturition, and imparting to the urine a strong creosotic odour.

The medicine was now intermitted for twenty-four hours, and again commenced in In the 9th number of THE LANCET, at the same doses, but in combination with as formerly, with the exception of the diarrhea. Being still inclined to give the meditwelve hours, and afterwards exhibited when present, and in doses of only one drop every

Now as Dr. Elliotson says, "This was a case merely of spasmodic or neuralgic pain Has for the last three years complained of of the stomach, not constant, but occurring sure or hot ingesta." There was no pain after taking food, but merely a sensation of uneasiness until the offending aliment had been rejected, thereby leading me to suppose that there was no inflammation of the stomach, and inducing me to try the creosote, from Dr. Elliotson's representation of its beneficial effects in such cases. I found it not only failed to allay the vomiting and pain of stomach when present, but actually in small doses inducing them when they did not previously exist, and also producing other symptoms, which, in this case, would alone have induced me to lay it aside.

Many will at once exclain that in this case, the vomiting arose from the affection of the spinal column and nerves, and I do not deny but they in part did stand in the relation of cause and effect; but as the spinsl irritation and pain were subject to frequent and severe exacerbations, which ed to for the alleviation of the did not at all affect the vomiting, and as the which in this case arises retching was frequently worse when the of the ligaments &c.) back was comparatively easy, we are quite justifiable in concluding that the vom tings from the accordance of the concluding that the vom tings from the accordance of the concluding that the concluding the conclud period of three years. I am inclined to suppose (particularly as there is no appearance of organic affection of the stomach) that the irritation of the spinal nerves was, in the first instance, the cause of vomiting, and afterwards, that irritation being partly subdued, but the stomach still being accustomed to be relieved of its uneasy sensations by regurgitation, constantly recurred to this method, requiring for its suppression moral and physicial efforts more powerful than this patient seemed capable of exerting.

At the same time that this case illustrates the length of time which a person may live, with only occasionally retaining a small acts as a laundry woman for a most respectportion of food, it clearly proves that ereo- able family in this town, where her husband sote, like all other remedies, will fail in checking vomiting and pain of stomach without inflammation.

PURULENT URETHRAL DISCHARGES IN CHILDREN.

To the Editor of THE LANCET.

SIR,-You will probably think the following cases of sufficient interest to obtain a place for them in your Journal. I am, Sir, yours respectfully.

WILLIAM MOSS. Windsor, Dec. 5, 1835.

I was requested last month to see a little girl, three years of age, residing in Eton, whom I found suffering under every symptom of gonorrhea. She had swollen and inflamed labia, a thick purulent discharge from the vagina, and acute pain in passing the urine. On making inquiry, I uscertained that the eldest sister, who was eleven years old, had, in the preceding June, been affected in the same manner; and that the second sister (eight years old) had also, a few weeks afterwards, been in precisely the same state: the mother had neglected to obtain advice for them, as she fancied that the symptoms arose only from weakness, and the discharge therefore had continued on them in a slight degree up to that time. Two days after this visit I was desired to look at the grandmother, a woman aged sixty-six years, living in the same house, who was afflicted with one of the most frightful attacks of purulent ophthalmia that I ever beheld. About three days afterwards, the brother (aged six years) of the girls was affected with swelling and inflammation of the prepuce and glans penis, accompanied by a profuse discharge and pain in passing his urine, which symptoms continued to be very severe for some days. I had seen several cases of inflamed prepuce in children, pelvimeter, gave two such

cleaniness at least ? could trace the disease to no other, but I had never seen cases so decidedly marked, and of so infectious a nature, as the present.

There is no reason to suppose that these children had been infected from any venereal source, but it is probable that gong-rhosa may be generated in the genitals of the human female without any intercourse of the sexes, and, as I believe, without the communication of any specific virus. The parents of these children are very industrious, and, for their station in life, very respectable people. I have attended both at different times for several years; the mother has long lived as butler, always sleeping in the house; the mother has had no vaginal discharge or uterine affection. The eldest and youngest child have slept constantly with her for a long period. The other two children sleep by themselves. They have all been washed and dried with the same towels. The grandmother has had lencorrheea upon her for many years, which bas been suspended during the ophthalmia. She has had the use, I am told, of a towel exclusively to herself. Having simply stated these facts, I leave others to draw from them their own conclusions.

C.ESAREAN OPERATION,

PRACTISED WITH SUCCESS, BOTH FOR THE MOTHER AND THE CHILD.

By Professor STOLTZ, of Strasbourg.

JEANNETTE LIALF, twenty-six years of age, has been affected with rachitis since her infancy. At the age of ten she suffered from a severe attack, accompanied by convulsions, and followed by paralysis of the tongue. Since that period her growth has been completely arrested. She now measures only forty-four inches; from the summit of the coccyx twenty-six inches from the latter to the heels eighteen. Her head is very large, and disproportionate to the rest of the body; the spinal column is quite straight, and the chest well formed; the pelvis, though well formed, is very small; the limbs are curved.

This girl menstruated at the age of seventeen. On the 12th of November, 1834, she presented herself at the hospital of Schabourg, being eight months gone with child. An examination was immediately made, the vagina found to be short and next The antero-posterior diameter of measured with the finger

undus uteri assemble to the shift assemble and the movement of the child assemble that it was a state and healthy.

It resulted from this examination that the women could not be delivered at term, without the aid of a dangerous operation. In the night of the 19th of December the patient was seized with pains in the loins andlesire to urinate; labour-pains soon set in, and mucus tinged with blood was dis-charged per vaginam. The toucher showed that the neck of the uterus was effaced; its orifice was directed backwards and to the left side; the child's head, pretty large, was felt behind and above the pubis. At three o'clock p.m. the pains became more severe; the os uteri was now directed towards the centre of the pelvis, and very much dilated; the membranes became tense at each pain; the head occupied the same position.

Before deciding on the measures to be adopted, Messrs. Erhmann and Stoltz (the author of the paper) wished to introduce the whole hand into the vagina, in order to explore the pelvis with more care. The narrowness of the parts, however, did not permit the introduction of more than four fingers. The impossibility of a natural delivery being now evident, and all other means being judged insufficient, the cesarean operation was decided upon; the woman consented, and on an exploration being made for the last time, it was found that the os uteri was dilated nearly to the size of a crown piece; the membranes intact; and that the head of the child, having glided off the pubes, occupied the inlet, but a very small portion of the cranium projected into the cavity of the pelvis. The child was still alive.

Operation .- The patient being placed horizontally, and everything prepared in the usual manner, M. Stoltz having ascertained that no portion of intestine lay between the uterus and abdominal wall, made an incision along the linea alba, commencing two inches and a half above the symphysis pubis, and extending two inches and a half above the umbilions, which lay at the left side. The fascia transversalis and peritoneum being thus exposed, the operator seized them with a pair of common forceps, near the centre of the wound, and made an oblique opening, which gave issue to a little serosity; a concave probe-pointed bistonry was now introduced through the orifice made, and the peritoucum divided upwards and downwards along the whole extent of the original incision. In spite of the attention given to keep the abdominal parietes closely applied upon the uterus, a small portion of the intestine protruded at the lower chut was easily reduced. In order to whether the uterus had ro-lines. M. Stoltz slipped his the wound, and

Fiving ascertained that this was not the case, he immediately commenced incising the anterior wall of the uterus, slowly and by layers; the uterus here was about five lines thick; the last layer ruptured and exposed the membranes; the opening into the uterus was now enlarged, by gliding the index finger between the organ and its contents, and conducting a bistoury on the finger; before rupturing the membranes every care was taken to prevent the passage of the liquor amnii into the cavity of the abdomen. On opening them, from three to four ounces of water came away, and the fectus was immediately extracted by the feet.

The child, a female, began at once to cry; was strong and vigorous; eighteen inches long; weight five pounds and three quarters. The vacuum which now followed the uterine contractions rendered protrusion of the intestines, and effusion of blood, &c., into the abdominal cavity, imminent; these accidents, however, were fortunately avoided, and some minutes allowed to pass before the extraction of the placenta; this being done. the uterus retreated at once into the pelvis. a portion of small intestine at the same time protruding at the lower angle of the wound; this was easily restored, but in reducing it, a portion of epiploon became engaged in the upper angle, though here the wound was carefully compressed by a sponge. The epiploon was in turn reduced, but this being done with the fingers a little roughly, gave rise to such violent contraction of the dia phragm, with hiccup, as to threaten at every minute the expulsion of the whole content: of the abdomen; the hiccup gave way, how ever, on the assistant's acting more gently and the edges of the wound were nov brought together exactly, by four points o suture · strips of sticking-plaster, two inches broan and three feet long, were passed round the body and crossed over the wound and the whole was retained by bandages The operation lasted from twenty-five to thirty minutes.

The accidents which declared themselve: immediately after the operation, were long and stormy, and for a considerable time gave rise to the greatest inquietude; they are described most minutely, hour by hour day by day, by the author; but as they con sisted in the means generally employed for combatting irritation and inflammation, we do not think it necessary to reproduce then here. On the thirty-second day after the operation the patient left her bed for the first time, during an hour; on the thirty fifth the wound was completely cicatrized and on the 70th the menstrual discharge re appeared. The child, which continued to enjoy good health, was given to a nurse.— (French Gaz. Med., Nov. 21:)

Memoirs of the Royal Academy of Medicine, Paris. Fasciculus 1, 1836.

WE have just received the first Number for the approaching year of the Memoirs of the Royal Academy, but we fear the following enumeration of its contents will prove that the Committee of Publication have not been very happy in the selection of materials. The memoirs selected are .-

- 1. A Notice of the Plague of Moscow in 1771. By M. GERARDIN.
 - 2. A Memoir by Dr. Govraud on

INGUINO-INTERSTITIAL HERNIA.

Under this name the author describes a species of hernia, long known as "incomplete hernia," but never studied with precision. The viscera pass out from the abdomen through the superior orifice of the inguinal canal, or through an abnormal opening in the fascia transversalis, and instead of traversing the canal, to appear at its external ring, they become lodged in the canal itself, which they dilate, and in the neighbouring interstices of the abdominal parietes. Inguino-interstitial hernia, then, has its scat in the inguinal canal. When voluminous, it may extend towards the spines of the ileum, separating the inferior fasciculi of the small oblique or transverse muscles, from the fascia transversalis; it has two complete membranous coverings, viz., the sac and a prolongation of the fascia transversalis. The cavity in which it is lodged is formed anteriorly by the aponeurosis of the great oblique muscle, and the inferior fasciculi of the small oblique; posteriorly by the fascia transversalis; inferiorly by the reflected edge of Poupart's ligament, from which the fascia transversalis arises, and above by the lower edge of the transversalis muscle and a few fibres of the small oblique.

The cavity containing the hernia has two orifices; the one communicating with the abdomen is the internal ring; the external ring forms the external orifice; the neck of the sac is embraced by the abdominal orifice of this cavity. In old hernia, its external (?) surface adheres strongly to the edges of tumour formed by the effused blood de an contracted adherences together, and hence of sac of cellular tissue. The small would arises a well-marked thickening of the neck in the artery is distinct. A small of of the sac, which presents internally the lonated congulum indicate appearance of a defined ring. The hernia occupies. If we cut

may send fawards a pushespation through the impensal ring, and the formed of two parts, one contained to the inguinal canal and the neighbouring part of the abdominal wall; the other situate in front of the inquinal ring, or even in the scrotum. Mr. Lawrence describes a case of this latter kind. Finally, it may happen that the lesticle is arrested in its passage through the inguinal canal, the serous envelope continuing to communicate with the peritoneal cavity. A portion of intestine may become engaged in this sac, and thus form a true congenital hernia in the inguinal canal. Of this rare case the author gives an example in his second observation.

The third memoir selected, is on the effects of corrosive sublimate in the preservation of wood, and on the effects of this substance on the health of sailors. By M. KERAUDREN.

The 4th memoir is entitled, "Observations on the Cure of Wounds without Inflammation. By James Macartney, M.D." These consist of a few insignificant remarks on the eternal subject of waterdressing. It is to be regretted that principles which in themselves are sound, and worthy of being made known to our Parisian brethren, were not developed in a more complete manner than we find them in the two and a half pages, of which Dr. Macartney's memoir consists. We have heard the University of Dublin called "The silent Sister," and from the present specimen, we might suppose that she had only just begun to speak. What a pity that we cannot apply to her the text, "Out of the mouths of babes and sucklings" shall come forth-wisdom i

5. NEW EXPERIMENTAL RESEARCHES IN TRAUMATIC HEMORRHAGE.

This paper is by M. Amussat, whose researches have been principally directed to ascertain the nature of the changes which take place between the skin and the vessel, when an artery has been opened, and the bleeding has been arrested either spontaneously or otherwise.

When we remove the skin, we find the the ring. The folds of the peritoneum have uniform red colour, and enveloped in a kind of half of the toward, we find in homege-needs layer of carmiated blood; "the clear point, more or less large, of a lilacish-brown the to-morrow at Bicetre; woo he on these if multiple the depresed these conceptes. colour, and filled with a red clot, indicates the traject of the wound. This clot may be easily removed by a forceps, and then we find kind of canal, which always follows the direction of the wound, and leads to the injured point of the artery. These results differ from those obtained by Jones and Beclard, probably because they dissected the artery before wounding it.

M. Amussat concludes, from the experiments which he has made on a great number of animals :--

1st. That in closing the external opening into the skin, we close the canal of new formation by which the hemorrhage has taken place.

2nd. It results from the discovery of the central canal through the centre of the sanguineous tumour, that by following it we are conducted in a certain manner down upon the injured point of the artery.

3rd. That a mammelonated coagulum, of a deep or nearly black colour, indicates surely the orifice of the wounded artery.

6. BICETRE IN 1792. - ABOLITION OF IRONS IN THE TREATMENT OF THE INSANE.

This is a fragment from the unpublished works of Pinel by M. Scipion Pinel. is a very carious document, and is worthy of attention in more than one point of view. We reproduce it nearly literally :-

Towards the latter end of 1792, while the storm of revolutionary fury was raging in the centre of Paris, a scene of far different character took place at the gates of the city. For the first time the irons, under which the unfortunate inhabitants of Bicetre had hitherto groaned, were removed, and a system of humanity substituted for the regime of severity and torture that had so long prevailed in the hospital of insane. It was at this period that a man, relying on his knowledge and experience, and stimulated by the honourable desire of benefiting humanity, revolted against the idea of chaining up the wretched creaures entrusted to his care, like so many wild beasts in a dungeon. Indignant at this stupid outrage to human nature, he addressed himself to the authorities of the city. The answer was unfavourable. , Ping was treated as an aristocrat and a motlerate-terms at that time almost equivalent to a mandate of death. But Pinel was or easily arrested in his pursuit of good; with an cloudere commenwith an cloquence commen-

if, amidst the deranged, thou concealest a

single enemy of the people."

Conthon arrived on the following day at Bicetre. The appearance of the man was almost as strange as that of any of the deranged he came to visit. Deprived of the use of his lower limbs, and constantly carried about in the arms of a domestic, he looked like a fraction of humanity planted upon another frame, from the top of which, with a soft and feminine voice, he dealt out the implitiable sentence of death. Couthon came to see the patients himself, and visited them one after another. He was conducted to their quarter, but in the midst of cries and ferocious threats, interrupted only by the rattling of chains in some solitary dungeon, the republican was received with such a clamour of insults that he was soon compelled to retire in disgust. He turned towards Pinel and said, "Citizen, thou art mad also in desiring to unchain such un-governable animals." "Citizen," answered Pinel, "I have a profound conviction that the unfortunate wretches before us are merely untractable because they are deprived of air and liberty, and I have every reliance on means of a more humane nature.

Complete master of his own actions, Pinel now immediately commenced the exertion of his desire; but it was impossible to conreal the real difficulties of the task he had undertaken. To liberate more than fifty furious madmen without compromising the safety of his other more tranquil patients, was an experiment too hazardous; he determined, therefore, on beginning with twelve. The only precaution he thought it necessary to take was to preserve twelve strong waistcoats, in case they should be-

come altogether unmanageable.
The first to whom Pinel addressed himself was the patriarch of the house, the oldest inhabitant of this den of misery,-an English captain, whose history is unknown to all the rest, who had remained in the same cell, chained up, for forty-five years. He is regarded as the most dangerous of all the prisoners; his guardians approach him with the greatest circumspection, for once, with a single blow of his manacles, he laid a domestic dead on the spot. Since then he has been ironed with more precaution; but this increased rigour has only exasperated his temper, naturally furious. Pinel entered the cell, alone and calm. "Captain," said he to the unfortunate, "If I remove your chains, and restore you to liberty, will you promise me to be reasonable and not injure your neighbours?" "Certainly," was the reply; "but you jest; they are too much afraid, and so also are you." "No," said Pinel, "I am not afraid, for I have six men the education his pursuit, de-lines, "I am not afraid, for I have eix men behind me to execute my orders; but trust

my word; be confident and docile; I will his trony trans onged to list womenths, and give you liberty at once if you will merely he instantiate of feeling his out on this linen tacket instead of these deliverance. put on this linen jacket instead of these deliverance.

heavy tormenting chains.

The captain submits quietly to all the preparations, shrugging his shoulders without articulating a word. In a few minutes his irons were removed, and he was left alone in his cell, the door of which, for the first time, was wide open. Several times the unfortunate man rises up and falls again on the ground; the confinement of nearly fifty years in a sitting posture has nearly deprived him of the use of his limbs: at length, after a quarter of an hour spent in useless efforts, he succeeded in sustaining himself upright, and, with a faltering step, advances from the bottom of his dungcon towards the door. His first movement is to look up to the heavens: he cries out with an ecstasy of joy, "Oh, how beautiful!" During the whole day he is constantly in motion, running up stairs and descending immediately afterwards; the same expression constantly on his lips, "Oh, how beautiful! how com-fortable!" Towards evening he enters quibecomes useful in the establishment, exercising a certain degree of authority over rible delusions so common in our days. Endowed with a feeble intelligence, and easily seduced by fanatical impressions, he had conceived, in his severe and mystic meditations, that God had chosen him for " the baptism of blood;" that is to say, "for the duty of killing his Christian brethren on this earth, in order to send them more speedily to enjoy the pleasures eternally reserved for the select of God." This burlesque idea gave rise to an atrocious crime. He commenced his homicidal mission by plunging a knife into the heart of one of his own children. Declared mad by a court of justice, and conducted to Bicetre, he was tormented by the same frantic delirium for a long series of year. At length came calm, but without reason. He is now dull and silent; a fleshless spectre seated on a stone; his emaciated limbs are still loaded with the same chains which he formerly bore, and which he is now unable to sustain; they were left on, perhaps, as much through forgetfulness as with a desire to punish the cruel actions which brought bim to the house of the mad. For him there was no hope of amelioration. Pinel had him transported into one of the beds of the infirmary. His legs are so stiff and contracted that he for repeated excesses and is unable even to extend them. However, sipated his feeble resource

The third presents a striking contrast. He is a man in the flower of his age; his eyes are sparkling, his language is elevated, and his manners are dramatic. In his youth he was a man of letters. Endowed with a sweet and gay temper, and a brillian Imagination, he spun many a web of love and honour, which he transferred to his impassioned romances. He wrote without ceasing; and in order to bestow more time on his literary occupations, he at length shut himself up completely in his chamber, passing often the day without food and the night without sleep. In this state an unfortunate passion intervened to exalt his ideas still further, and finish what a too vivid imagination had already commenced. He became desperately in love with a young girl in the neighbourhood, good and virtuous, as they are all, in the beginning, but who soon became fatigued of the unhappy author. She was faithless, and did not even leave the consolation which might arise ctly into his cell; sleeps on a better bed, from a doubt. During a year his soul was expressly prepared for him. During a lapse a prey to bitter concentrated grief; when of two years more, spent at Bicetre, he even suddenly struck with the ridicule of weening for one so unworthy of his love, he passed from one extremity to another, and gave the other patients, who willingly submit himself up, without hounds, to every excess, themselves to his orders. His companion in It was in the midst of one of these orgies captivity is almost equally worthy of com- that reason broke down; and, conducted to passion; an old French officer who has been Bicetre in a state of furious mania, he was confined in irons for thirty-six years, during thrown, about twelve years ago, into his which he laboured under one of those ter-dungeon, where he still vainly endeavours to rend asunder the irons that bind him down.

> This patient was rather turbulent than dangerous; muchle to comprehend the good he was about to receive, nothing but force compelled him to leave his chains; once liberated, he commenced running in a circle round the court, until he fell exhausted and breathless to the ground; the care of Pinel, and the fastering attention which he bestowed on this patient in particular, soon brought back his reason; but unfortunately he must return to the bosom of society, at that time so agitated; the event was not long doubtful; he cast himself iato political agitations with all the ardour of his youthful passion, and on the eighth Thermidor his head fell upon the scaffold.

Pinel now enters the fourth cell; it is that of Chevigné, whose release from captivity is perhaps the most memorable fact of this remarkable day. Chevigné was a soldier in the French guards, and had only a single fault, that of being too much addicted to drunkenness: once elevated by wine he became quarrelsome, violent, and was the more dangerous, that his strength me prodigious. He was dismissed for

the a state of shame and poverty, which soon [89. During the period of famine he leaves overcame reason. This madness he thought Bicetre every morning, and returns with himself a general officer, and would strike an abundant supply of provisions which every one that did not immediately recognise his rank. It was at the termination of one of these quarrels, that he was brought to Bicilre in the most furious state of excitement; there he remained ironed for ten year more carefully so than his companions, as he had more than once broken his chains by the simple force of his arms; once, it is said, having procured a few minutes liberty, he defied all the guardians united together to replace him in his cell, before he had made them pass under his leg; and actually performed this inconceivable feat upon eight men who attempted to make themselves master of his person; from that day his strength became a proverb at Biectre.

Pinel had already discovered in this man the germ of a good disposition, concealed beneath an excitement which was constantly kept up by the cruel treatment he was submitted to. He promised to ameliorate his condition in a short time, and these few words of comfort at once rendered him more calor. Pivel announced to him the joyful news that he was about to leave his irons. "To prove that I have confidence in you," said he, " and regard you as one unhappy strangers. born to do good, you shall lend your assistance in delivering these unfortunate creaso tures, who have not their reason as you have, and if you conduct yours, if as I expeet and hope, I will take you into my own service, and promise to protect you for the rest of your life.

Never was a more sadden or complete revolution seen in the formun intellect. The guardians themselves are scized with asto-; nishment and respect at the example of thirty-five years before the publication of Chevigne. His chains are yet scarcely removed from his limbs, and behold him careful, respectful, following with an attentive eye all the movements of Pinel, and executing his orders with promptitude and address. Behold him pouring forth words of peace, consolation, and reason, to his nufortunate fellow sufferers,- he, who a few minutes back was sunk below their level. but now stands before them elevated by the proud consciou ness of liberty. This man, whom chains had demoralized during the fairest portion of his manhood, and who, doubtless, would have dragged along the whole course of his existence in this fearful agony of intellectual suffering, this man becomes henceforward a model of good conduct and gratitude; more than once, in the most dangerous storms of the revolution, he saved the life of his protector; on one occasion, particularly, he rescued him from the bands of a band of malefactors, who were wing him to the lamp* as an elector of in the cost pats of the lamps—

gold could not purchase at that moment of universal want; in a word, his whole life is a series of acts of devotion to his liberator.

Chevigné is more than a grand and sublime lesson for the science; he is a conquest made to humanity of an honest and faithful mind from the infamous barbarity under

which it had given way.

Next to Chevigné, in the neighbouring cell, are three unfortunate Prussian soldiers, chained there for a long series of years: no one knows the motive in which such rigorous treatment has originated; they are commonly inoffensive and calm, becoming animated from time to time in a language which nobody understands. The moment they perceive round them any strange assemblage of persons or things, they imagine themselves the object of hostile intentions, and oppose the removal of their irons with the utmost violence; when freed, they are nawilling to quit their prison, and remain fixed in the position to which they have been so long accustomed. The sentiment of liberty, so cherished by everything human, seems totally extinct in the bosom of these

[What a lesson in some of these facts!]

Die Erscheinungen und Gesetzen des Organischen, Lenens Von Gottfried Rien-HOLD TREVIRANUS. 2 B. (The Phenosiena and Laws of Organic Life, Se.)

The Biology of Treviranus was commenced the present work; and volume after volume slowly appeared, unfolding the fruits of persevering research, of continued experiments. and of genius such as has rarely been engaged in studying Life. The productions of the human intellect, in their development, -unlike the growth of trees, where the operation of every successive year makes natural additions to each part, and helps to carry out the perfect idea of their form .do not constitute the permanent materials of ultimate maturity; for the mind in its progressive investigation of phenomena, after endl as essays, and innumerable observations, at last discovers one point of view, before which all former conceptions are rendered imperfect, and are at once broken up and superseded. In the process of generalization, the last principle includes the former, as one serpent swallows up another. that serpent being itself swallowed by a later and a mightier. Hence, Treviranus found

that the investigations which he made in she progress of his own work, as well as the indicates, we must an attem in beings, discoveries of others, rendered changes newhere they lie haver to the large." cessary in the early volumes, before the last were begun. This consideration led him at last to abandon the attempt to complete the "Biology," which is instinct with genius, and, so far as it extends, is the most comprehensive, scientific, and profound investigation of vital phenomena, which has been published since the days of Aristotle. In the present two volumes he has presented the entire circle of physiological laws and their phenomena in a compressed form ;-

"The Biology," he remarks, "contains the history of the distribution of organic far if all the obscurities of these questions my labours, a too distant goal."

eulogizing the genius of the Germans, de- But to proceed with our translation :clares that nothing but the difficulty of protheir language has prevented many of their stition and unbelief. What is the earth, their language has prevented many of their with all its treasures, for the great mass of best works from becoming known to us, mankind, but a stage filled with forms withand shut out from this country some of their out any earnest signification? They pass Blumenbach had not been written in Laun, and if the work of Tiedemann had not been their language. He dies in abundance, sight translated into French, we might have sighing over the emptiness of existence and should not only hold the "Biology" of Treviranus in less esteem than it deserves, but should hardly know of its existence.

With what enthusiasm Treviranus has devoted his time to the study of life the introduction will show : -

" If," he exclaims, "the study of nature generally is one of the noblest occupations of man, the subject of our investigations especially deserves the attention of every educated person. To know himself, is the sage's first law. But no man can know himself.-can know either his mind or his body,-who does not compare himself with kindred beings. For ourselves, only single parts are susceptible of thorough investi-

Treviranus is evidently one of those men who think that nothing can be more pitiable than the observance of that severity of language which some practical writers desire to maintain by avoiding all expressions of feeling, and cautiously excluding all indulgence in the power of the imagination, not only in the formation of their style, but in their modes of thinking. None are too exact, though a few may be too cold. By referring to the Greek writers, to Bacon, and to Cuvier, it may be seen that nature is not exposed to view only in the form of anatomical prebeings, and of the revolutions of living na. parations. Simply to analyze is to leave ture. I have excluded this from the present, our work imperfect. The machine may be work, because it would have extended too advantageously taken to pieces; but to perhad been critically examined, and because ceive its operations the parts must be rein this department I had no personal obser- joined, when the contemplation of its evovations to add. Besides, the sun which was lutions will often excite the philosopher to with me in the morning, when I went to my renewed efforts, and may usefully imbue earlier work, now hastens to its setting. It him with a highly poetic feeling. The vois not the time for me to fix, as the aim of lumes of Treviranus combine a mathematical accuracy of reasoning, with the finest Byron, in an address to Goethe, while sense of what is animating in philosophy.

them from immortality. Certain it is that elevated and ennobled, preserved from onethe difficulties of acquiring a knowledge of sidedness," and restrained alike from superbrightest thoughts. If the Physiology of before their eyes without touching the in-Blumenbach had not been written in Latin, ward sense. They speak, but man is insenremained ignorant of those valuable works the monotony of day. The student and unto this day. It is not, therefore, astonish- lover of nature is in a world ever presenting ing that the profession in this kingdom him with fresh views, which would never let him grow weary though he lived through centuries All in it has for him a signification. He is no where a stranger, and no part of the earth is for him without charms, since he ever meets with nature. So did Stetter, caraptured with the study of the sciences, feel as happy in the desert Kamschatka as in a Paradise. He wished himself banished to Siberia, in order to quench his thirst for discovery.

"Such a spiritual life in the bosom of nature, cannot but nourish and sharpen the sense of truth and simplicity. Therefore was the natural philosopher J. Aug

^{* &}quot; Einseitigkeit" has been trans English before. Prejudice," @: ness," does not exactly east

his brother, the late Melchior, raised agents every interlandout thinker. An eld poet says, 'He who makes verses, thinks only on them, not on lying and deceit." This may be true. But it is not the same, to think of no unworthy things because the attention is withdrawn by other objects, or became the moral sense is elevated by constant occupation on noble subjects. can be no great poet, but there are many superficial natural philosophers, without nobility of thought. Yet he who attains to the heights of Parnassus, was already a great man ere he climbed. He who is not made morally better by the study of nature, has not been impelled thereto by an inward tendency and constraint. This does not hold of the study of living nature only, but of that more emphatically. A man may possess profound knowledge in mineralogy, chemistry, and physics, without reflecting on the great questions, what and whence are we ourselves? Whither go we? But he can never arrive at any certainty as to the origin of the infusoria without stumbling on principles connected with those questions. Furthermore, no science is more intimately connected with other sciences than the science of life, therefore no one is less likely to fall into narrow mindedness, than he who Vision, seeks to fathout this in all its parts. with all its various modifications in the various animals, can only be completely comprehended by him who is a proficient in optics, nor hearing without a profound know-The explanation of the ledge of acoustics processes of respiration, digestion, nutrition, and the development of animal heat, rests on chemical grounds. The doctrine of the geographical distribution of plants and ani mals, is strictly connected with physical geography and meteorology, as is the history of the former changes of living nature, with geology and archeology. And he who is master of these and many more collateral sciences, cannot proceed far in the knowledge of life unless he he a philosopher.

"In every living thing there may be recognised a forming and working of every single part for all the rest, and for the whole; also proximately for the species, and for other species. This design is only possessed by the living. Yet it betrays itself in the smallest of these, only by the magnifying-glass of perceptible parts. In all external movements of animals, and even of many plants, there is likewise an appearance of voluntary, and on the other hand, of necessary destination to action. We find this combination of freemm and necessity, especially in the exercise of the instincts of animals. All observations of that design, and of this appaat spontaneity in endlessly various modiand all reflection thereupon, lead tion."

What follows is somewhat obscure, yet it will be received with respect from the lips of one who has devoted a long life to the study of physiology; who has been a fearless champion of truth; who never wrote a Bridgewater Treatise; and who would never sing a hired hymn even to the Creator .-

"Therefore," says this enthusiastic man, "were all who have investigated the phenomena of nature, men of deep religious feeling. I will only recal to memory Swammerdam, Bonnet, and Linnæus. Their piety indeed wore the costume of their education and their age. But if Swammerdam appears doating in the theological applications which he made of his great zootomical discoveries, and worthy of pity when sitting at the feet of Bourignona, gloomy enthusizet: if Bonnet and many other naturalists of the last century, mistook their own wisdom for that of the Creator, they nevertheless sought, although mistakenly, that higher light whose reflection they had caught. He who fails to recognise this light in nature, sees unconsolable nothing in it, but an eternal circle of rising and setting. who in dreams, or in poesy, seeks words which answer to the light, finds not truth but a phantasm of his own brain. But to him who enters on the right paths by the study of living nature, its muse herself will be a conductress, who remains true when all abandon him; and like Leucothea to the shipwrecked, will reach a holy veil when the waves of destiny threaten to swallow him up.

The whole of this introduction sounds rather like the solemn chorus to a Greek drama, than the opening of a work on physiology, where the scene is the world, over which human beings and other living forms, interwoven like the Hours, move in endless procession, while their nature and relations are declared by one whose lips had been "touched with living coal from the altar."

The division of the animal kingdom. adopted by Treviranus, deserves attention.

"According to my view," he says, "there are two great divisions of the animal kingdom; the one consists in animals that possess a real spinal marrow enclosed in a vertebral column, which is wanting in the other class. In the first, the entire brain always lies over the mouth, enclosed in a proper bony covering, the skull. In the last there is always a ring round the mouth, formed either of one brainlike mass, or of several knots connected by nervous filaments; the brain-like substance lies partly over, partly under the last; it has no special, bony, or definal reason, which can horny capsule by which it is separated from the other internal parts of the head, and no

FROM THE ORGANIC LA



A COMPARATIVE TABLE OF THE CHEMICAL EFFECTS OF ARTHUR. CLASSES OF ANIMALS.

VARIO**O**S

	T		1	1		
Species of Animal.	Volume of Air Respired.	Carbonic Acid Excreted.	Oxygen Absorbed.	Nitrogen Excreted.	Nitrogen Absorbed	Observers.
Cavia Cobaya	7.1	0.48	0.00	0.32	0	
Ditto	13.8	0.55	0.80	0.19	0	Barthollet.
Ditto	0.9	0.47	0.68	0.13	0	Allen, Pepys.
Lepas curriculus	4.0	0.44	0.61	0.17	ő	Despretz. Berthollet.
Felis catus	15.5	0.66	6.98	0.32	ŏ	Despretz.
Columba domestica	18.8	0.96	1.14	0.18	ŏ	Allen, Pepys.
Ditto	23.3	0.99	1.58	0.59	ō	Despretz.
Bufo cinereus A	4.4	0.02	0.07	0.05	0	Jespies.
Ditto B	0.6	0.03	0.08	0.05	0	
Rana temporaria a	0.7	0 10		_	_	
Ditto after 3 days' }	0.8	0.14	0.15	_		4
fast B	0.35			_		Provencal.
Cyprinus tinca Apis mellifica operaria A		0.01	0.009	0.	0.001	Humboldt.
Ditto in the sun-)	27.2	0.82	1.35	0.53	0	[-zamboldt.
light and in active	48.6	2.25	2.77	0.52	0	
Bombus lapidarius A	3.8	0.31	0.43	0.12	0	1
Ditto B	23.7	1.70	0.4.5	0.12	٠,	1
Ditto c	10.0	0.72		= 1		1
Ditto terrestris in sun-		- !	_	_		
light	11.0	1.74	- 1	-		1
Ditto muscorum	46.2	0.64	0.82	0.18	0	i
Syrphus nemorum:	7.4	0.50	0.80	0.30	0	
Raupe of the papilio bras- \	2.8	0.16	0.00	0.10	0	12
sicae	2.0	0.10	0.28	0.12	U	E
Papilia rapæ A, after 28 1	8.3	0.72	2.26	1.54	0	3
hours' hunger 5	0.00		2.20	1.54	· i	i ii
Ditto B, in the period of decline	2.0	0.20	0.37	_	_	ایا
decline		1		1	į	1 %
days' hunger	27.0	2.65?	2.85		i	1 = 1
Ditto B, after 3 days hun-	-	i		1	1	1 1
ger, and weakened by the preceding experi- ment	105.0	1.50	2.35	-	-	Results of the Original Researches of Treviranus
Libellula depressa A	6.2	0.37	0.74	0.37	0	1 2
Ditto B	7.5	0.33	0.93	0.60	0	<u> </u>
Larva of the cetonia au-	i	•	- 1		- 1	اة ا
rata	6.1	0.04	0.06	0.02	0	0
Cetonia aurata A	2.9	0.21	_	_	0	5
Do Bafter 2 days' hunger	1.5	0.06	0.07	_	_	6
Melolontha horticola	2.0	0.07	0.17	0.10	0	23
arabus niger	4.8	0.23	0.56	0.33	ŏ	1
)niscus aselius	14.5	0.20	0.60	0.40	ō	إيها
lirudo gulo	0.4	0.03	0.09	0.05	0	-
umbricus terrestris	01	0.01	0.03	0.02	0	i
imax ater A	0.2	0.02	0.01	0.	0.01	1
Ditto B, weakened by the former experi-		0.034				1
the former experi-	0.5	0.014	0.078	0.07	0	(.
Ditto c	0.3	0.04	00-			
lelix hortensis A	0.5	0.04	0.05	0.01	0	A. Carlo
	U [0.10	0.09	0.	0.01	1.0
	0.5	0.15	016	n 1	0.0-	
	0.5 0.5	0.15	0.10	0. 0.01	0.05	

e nosterier part which process goes. the spinal marrow of can be compa mimals. This agrees with Lamark's division into vertebrate and invertebrate animals. They may be denominated animals with skulls, and animals without skulls.

" In all vertebrate animals, the anterior postion of the spinal marrow enclosed in the skull - the medulla oblongata - is of the same form as in man, and, in comparison with the brain, diminishes from man to the lowest degrees of this series of animals, in mass and in volume. According to the mimerical differences of this relation, four classes of these animals may be distinguished. I found the limits of the relative weight of the medulla oblongata and the brain, to be. -

In the	1st Class	between	1	:	85.0	and	1	:	6,5
	2nd ditto		1	:	24.3	and	1	:	6.7
	3rd ditto		1	:	3 6	and	1	:	3.2
	4th ditto		1		3.5	and	1	į	1.0

"On the other hand the lower animals possess, by virtue of their vital tenacity, the power, already mentioned, of absorbing more exygen, from a given amount of atmospheric air in which they are enclosed, than the higher animals, who die long before they have consumed the same amount of oxygen. The energy of their respiration is, at the same time, entirely dependent on the exist.

"The relation of the greatest diameter of the medulla oblongata, to the greatest di- lowing is a copy) from Dr. Stewart, prinameter of the brain, extends,

ln	the	1st Class from	1:6.85	to	1	:	1.20
		2nd ditto	1:445	to	1	:	1.1:
		3rd ditto	1:2.55	to	ı	:	1.57
		4th ditto	1 - 144	to	1		1 95

The first class embraces mammalia, including man; the second, birds; the third, amphibious animals; and the fourth, fishes.

The table at page 456 presents the results of his own, and of all other researches, on the respiration of animals, calculated on the supposition that the English is to the Parisian inch, as 0.938 to 1; that the temperature of the inspired air is 71%; the barometer at 30 carbonic acid = 1 per cent.

Treviranus gives a new, and certainly the only accurate method, for determining the He observes .-

restable organization, there be a higher larger degree of respiration. But there

atmospheric air is employed, and more carbonic acid is excreted. The mammalia, and birds in a perfect state, withdraw more oxygen from the atmosphere than amphibia and fishes in similar circumstances; birds more than mammalia; animals of aerial respiration more than those which live under water; many insects not only more than the molbiscæ and worms, but also than many amphibia, and when the temperature of the air is high, and they are in active movement, more than even mammalia and birds; an animal in the full bloom of age, more than the new-born, and the latter more than the embryo."

These researches are of the highest importance, and this is the only method of determining the relative intensity of respiration in different animals in different states of activity.

PHRENOLOGICAL SOCIETY OF LONDON.

SKILLS FROM THE MAURITIUS. - TESTS FOR PHRENOLOGY.

This Society recommenced its meetings for the season on Monday, the 2nd of November. Dr. Elliorson, the president, in temperature of the medium in which they the chair. At the preceding meeting the president had read a letter from Sir James M Grigor, inclosing one (of which the folcipal medical officer of the army in the Manritius: -

" Medical Department, Mauritius, Dec. 27, 1834

" Sir,-I am commissioned to forward to England, and to your care, the skulls of four human subjects, which are considered of sufficient interest to claim the attention of all lovers of phrenological science. This I am directed to do upon condition that they shall be presented to the Phrenological Society of London, upon an engagement to furnish a copy of the result of their examination. Should they decline agreeing to this condition, it is requested that they may be forwarded to the cultivators of the same inches; and oxygen in the atmosphere =21; seience in Edinburgh, and with the like injunction. The enclosed scaled packet contains matter relating to these skulls. This packet is to be retained in your possession unopened, until the report of the proportional force of respiration in animals. Society to which they are presented shall have been received; it is then to be opened, "We have yet no experiments by which it and the contents to be at your disposa, the can be determined, if, in the various stages observations of the Society, or a certified copy thereof, to be transmitted hither for the information of all concerned in this island. the facts which show, that in the The heads are numbered, and the remarks upon them, contained in the enclosed packet, bear corresponding numbers. With the as-

The foregoing account of the developments of religion. He confes of these skulls having been transmitted to kill, but maintained to Sir James M'Grigor, the packet mentioned innocent of the murder. in Dr. Stewart's letter was transmitted to the Society, containing accounts of the characters of two of the individuals to whom the skulls had belonged; these characters having been furnished by the Chief Judge of the Mauritius, Edward Blackburn, Esq. a zealous phrenologist. Upon the characters of the other two individuals it appears that no particular observations had been made. The following were the details of the names and occupations of Nos. 1 and 3; and the same with the addition of the characters of Nos. 2 and 4 :-

(

No. 1. The skull of Parillon, a native of Mozambique; a Government apprentice; and who died of phthisis on the 1st of Dec.,

No. 2. The skull of Pierre Gaya, or the Stutterer. This man, a negro slave, was tried on the charge of having murdered one of his comrades, and tried and convicted of a barbarous attempt to murder another, a female, upon the very slight provocation of accusing him of having stolen a pair of scissors. The latter crime was brought fully home to him, and the proof of fracturing his skull. He escaped on the the former only failed because the body of trial through an informality. He was afterthe deceased was never found, though dili- wards convicted and executed for a murder, gent search was made on the spot where supposed to be committed in revenge for an Pierre once declared that he had cast it; a moult offered to the family of the culprit, declaration which he afterwards retracted; who was of a high caste. His behavior im-and which, from its having been made under mediately after condemnation was brutally coercion, could not be admitted as full legal | savage, but heafterwards became more quiet, evidence. It is supposed that the budy was and died courageously. He seemed irritated curried into the sea by a flood. The description at his seatence, because no one saw him tion given of his character by his master and commit the act. He endeavoured to escape, other witnesses, his companions, and as it and severely stabled two persons who were was illustrated by examples which they i employed to take him. quoted, went to show that he was a man of | It thus appears, as Dr. Elliotson stated, great desterity in all matters of handicraft, that there were two skulls of ordinary and a clever and skilful workman, but of persons, and two of very depraved persons, desaltory and roving habits; that he was sly and cunning, and constantly stealing from his companions; that he was extraordinarily jealous, and while under the influence of jealousy, quickly rendered ferociously irritable, most abusive in language, and violent in acts. The attack on his first victim was caused by slight attentions shown to his comrade, by his master, for good conduct. He was most libidinous in tempera- cated each the character that was given of ment; two examples of the disposition are the other, in the MS., hy which they were striking. He made indecent propositions to a person in a class very highly above there was no possibility of mistaking the him; and only a few hours before his execution, on being kindly asked by his spi- being true, he had no doubt that the skull ritual attendant whether he wished to have marked 4 should have been marked 3, age any thing, he answered "Yes, a woman." any thing, he answered "105, a woman. that skull 3 should have been maked by His intrepidity amounted nearly to insensible. He added that he had written to the Man. hey at the place of execution; he mounted the ritius to this effect, confident that scaffold holdly, examined the axe, talked be discovered, either that a min freely to the executioner, and laid his head been made there, or the on the block without a sign of fear. Yet wrongly marked, it w he seemed to be impressed with some sense test phrenology. A

ittempt to that he was pected that he imagined, that as death had not ensued in the former case, he had a chance of escape if he could remove the impression of his guilt in the latter. On the plantation he was strongly suspected of frequently firing the sugar canes and buildings; certain it was, that from the time he was imprisoned to the present period, the burnings have ceased. He willed some money, which he had concealed in the ground, to one of his relations.

No. 3 is the skull of Jean Malay, or Malgachi, a slave who died of atrophy on the 1st of December, 1834.

No. 4 is the skull of Rhugoburg-Sing, an Indian, who was convicted in India of killing one man and wounding two others, under circumstances unknown to the writer of this note. He was transported to Mauritius, and was for some years employed there as a convict. He was violently ferocious, and had a strong propensity to destroy. Sometime back he was tried, for having, almost without provocation, knocked down two men with a staff, nearly killing one of them by

and that the phrenological characters perfeetly agreed with the biographical; the two former having probably been sent merely to occasion difficulty and put phrenology to a severer test.

While, however, one ordinary skull and one bad skull answered to the characters respectively given of them in the MS., it is remarkable that the other two skulls indiaccompanied. Dr. Elliotson remarked that character of the skulls, and that, phrenology that skull 3 should have been make.

LONDO

Monday, Dec. 7, 1835.

Dr. WHITING, President.

PLAN OF TREATING PRACTURES ADVO-CATED BY MR. RADLEY.

Ma. DENDY laid before the Society this evening, a specimen of badly united fracture, occurring below the cervix femoris; the head of the femur appearing to be almost twisted round, probably from the action of the muscles, so as to require some care in deciding from which side of the body the fractured bone was removed. The accident had occurred to a lady aged sixty-five years, from falling down six or seven stairs. A surgeon was immediately sent for, but he failed in detecting the exact nature of the injury, supposing, as no crepitus could be fractured. She was put to bed, and nature was left to accomplish the cure, the attendsuch accidents. This was what he Mr. D. would call, following Mr. Radley's plan of freely upon it. He considered that Mr. tageous method. Radley had only given an ex-parte statement. they gave pain; but this was reasoning from the abuse, and not from the use of splints; he (Mr. D.) had seen cases, and so must every practical surgeon, in which splints often relieved pain. And how? Why, by preventing spasms: and he was convinced that many cases occurred, in which the attempt to procure union without the aid of splints, would result in deformity of the limbs, and uselessness of those parts, as i in the specimen now before the Society, where, although union had taken place, full three inches were taken from the stature of the patient, who was crippled for life. The surgeon had failed to detect crepitus, because some portion of synovia interposed between the fractured extremities of the bone.

Mr. BRYANT thought that as the fracture was below the trochauter minor, the action of the muscles contributing to the badness of the union, this case was not a fair one to forward against the plan of treatment by Mr. Radley, who spoke not of

ment generally in the terms he had cmployed.

A GENTLEMAN observed, that Mr. Radley did not mention any cases of fracture about the neck of the thigh-bone, and thought that his plan was a good one, as Mr. Radley had lost only two cases out of a considerable number thus treated, and those would have been incurable under any treatment. Nor did Mr. Radley object to the use of splints, simply because they produced pain, but rather because, when they were dispensed with, leeches and the local applications could be most beneficially employed, and this he believed was the chief source of benefit derivable from Mr. Radley's plan of treatment. It was useless, perhaps, to omit the use of splints, if the other treatment were not employed.

Mr. CLIPTON believed that every new plan of treatment should be cautiously received, especially if the future welfare of the patient was likely to be affected if it did not succeed. In fractures, to bring and mainheard, that the neck of the hone might be tain the disunited hones in close apposition with little pain, was the object to be sought, but how this was to be effected by the simant stating his inability to afford help in ple use of pillows, he knew not. In the majority of cases the simple position would not do this; and without splints, ligamenttreatment, the doing nothing at all, and our union would result. If the splints were thus, by the specimen showed, doing worse properly adjusted, leeches and lotions might than nothing. Mr. Radley had put forth readily be applied; but on the whole, in his plan in so decided a manner, that he fractures of the lower extremities, he thought (Mr. D.) thought it justifiable to comment the double-inclined plane the most advan-

Mr. Hooven agreed with Mr. Dendy, that and, therefore, one that was not to be noticed splints rather prevented pain than caused it. and acted on. Mr. Radley objected to in a case of fracture of the tibia and fibula. splints in every case, because, as one reason, in which he had removed the splints, he found on the following morning that the woman herself had reapplied them, because she did not suffer when they were on, while without them the pain was considerable. He (Mr. H. was also quite satisfied that it was impossible to keep the fractured portions in apposition without splints.

Mr. ROBARTS mentioned a case of fracture of the tibia and fibula in both legs, that would set the question at rest. It first came under the treatment of a dresser at St. Burtholomen's Hospital, and fell under his (Mr. Roberts's) observation, producing at the time considerable impression on his mind, as to the great utility of splints in fractures. When the accident was admitted, great inflammation and tumefaction prevailed, and leeches were ordered. Excessive pain, however, continued, and was not relieved until the following morning, when one of the surgeons of the institution recommended the limb to be put into splints. Half an hour afterwards the pain was entirely gone : pretty tight pressure being used!

Mr. Criss regarded the last case as not bearing on the question at all. Would Mr. Robarts adopt the same kind of treatment

in all cases of fracture? He must confess | connection did exist | that he could not tell how pain, inflammation, and tumefaction, were to be relieved

by pressure.

Mr. DENDY wished that Mr. Radley's and for preventing the fractured extremities mercury, which might be relied on. wards attended the use of Mr. Amesbury's Mr. DENUY believed that rheumatism apparatus.

ley's plan of treatment was recommended, the muscles. nothing of fractures if it were true that all this form of disease, ends of fractured bones could be kept in Mr. Robarts be apposition only by splints and tight bandnges.

Mr. CRISP recommended that Mr. Radley's plan should be tried before it was condemned; for he had observed, and many others must have seen cases in hospitals, which would have done as well, if not better, without the confinement of splints, than

they did with them.

CONORRHOLAL RHEUMATISM.

Mr Hughes, after a closing word on the subject of fractures, requested the members' opinion respecting rheumatism when occurring in conjunction with generahea. He had lately had under his care an unusually obstinate case, inducing him to think that the two diseases might be peculiarly complicated one with the other. His patient first had gonorrhoea, and on exposure to cold an acute attack of rheumatism supervened, affecting the shoulders, the knees, and the muscles of the back, but most severely affecting the small joints of the feet. He treated it as rheumatic gout, with colchicum and small doses of mercury. Auother surgeon, however, was consulted, who immediately designated it as a case of gonorrhosal rheumatism, and ordered the patient to drink porter and take sarsaparilla, and apply iodine to the feet, but as yet without benefit. The rheumatism followed about a week after the appearance of the gonorrhoea, and the two had now been under medical treatment for nearly two months.

Mr. Pinchen said that he had met with so many cases of rheumatism occurring in conjunction with gonorrheen, that he had not the least hesitation in affirming that a and an enema syria

e two dis enses, hat what was the nection he was incapable f that conointing out, though he had observed it to manifest itself mostly in the joints of the lower extremiplan might ultimately be found to succeed. ties Bleeding and parging, as in common An apology was perhaps due to Mr. Radley inflammation, were the frequency be mostly from him, for speaking sharply of his pro-resorted to, calling in the aid of colchicum, posals, and now therefore he begged to offer but small doses of opium, as in the form of one. However splints might prevent pain, the Dover's powder, he had found exceedhe would answer for their preventing spasm, ingly beneficial. When these failed be gave of bones from grating the one over the other. answer to several queries he replied that he Mr. Dendy then related two cases, which in had frequently seen the disease prevailing the first instance were treated without in summer, and had found the patient resplints, and in which perfect success after-! cover without the aid of specific medicines.

prevailed at present very generally, but the Mr. Bryant observed that the more he disease assumed a neuralgic type. He said on the subject of fractures, the more begged to ask whether colchicum had been Mr. Dendy misunderstood him, and this found so effectual when it attacked the arose from Mr. Dendy's not bearing in mind 'neurilema or the substance of the nerves, as the seat of the fracture in which Mr. Rad | when it seized on the fascize and tendons of For his own part, he had He (Mr. Bryant) must confess that he knew found it quite an indifferent remedy under

Mr. Robarts believed that gonorrheal rheumatism, as it was termed, was confined to the joints. He had found an ointment composed of equal parts of strong mercurial ointment, and the ointment of spermaceti (aa. 388), and camphor (5j), the most effectual in protracted cases.

Mr HEADLAND did not doubt that a perfeet form of rhenmatism existed, induced by gonorrhora. He had a patient who never suffered from an attack of the one without experiencing the other, following each other apparently as a necessary consequence. There was this phenomenon attending such cases, that the swelling of the joints was less, in proportion to the pain that existed, when the attack was one of ordinary rhenmatism. He had not found colchicum under these circumstances an effectual remedy, but caloniel and opium had proved invaluable in his practice.

The PRESIDENT said he believed that rheumatism following gonorrhum, was totally distinct from any other species of theumatism, and that it certainly was a specific disease, requiring a specific remedy. Colchicum only afforded relief by lowering the circulation in the treatment of rhenmatism; he would say, that for muscular rheumatism colchicum was the best remedy; in neuralgie rhemnatism the antiphlogistic treatment was demanded; and in gonorrhoal rheamatism, or that form which affected the joints, he considered calomel and opium to be the most effectual remedy. So fully be the most effectual remedy. satisfied was be of the great efficiency of colchicum in muscular rheumatiem, did not fear to say that ninetelin of twenty would yield to the

A new patent by

MEDICAL SOCIETY. WESTMIN

Saturday, December 5, 1835.

Dr. Appraga President.

ECZEMA.

MR. HALE THOMPSON exhibited some specimens of cuticle exfoliated from the hand, so entire as to bear an analogy to a kid-glove. The patient was affected with eczema. The man was a carpenter, aged twenty four, pale, tall, and deeply marked with cicatrices of small-pox. He was admitted into the Westminster Hospital, 17th November 1835. The surface of the body in various places exhibits the cuticle in a state of desquamation, especially the thighs, the nammillæ, and the soles of the feet. The palmar surfaces of the hands and fingers have only recently parted with their enticle, and are extremely red and tender. The years ago he had small-pox very severely not add to the sensible properties of the after vaccination. He remained well for materials, combined with the liquor potasse, four years, when an eruption of vesicles which gave to the mixture a putty-like subguments being of a deep red; the red rash to Mr. Morson of Southampton-street. preceded the vesicles by a day or two, with preceded the vesicles by a day or two, with severe pain, heat, pricking, and itching; the of quinine were decomposed by the presence in a mixed desquamation of the cuticle, magnesia. With the local disease, there was consider- Dr. Johnson said he was not in the habit after, a second attack, precisely similar to therefore could not speak as to the result, the first, appeared; and searcely six months had clapsed, when symptoms of a third attack manifested themselves, followed by a general feeling of coldness. The man state.

time, as the symptoms were not ameliorated, he was ordered to return to the previous forms of medicines. The patient had not at either attack shed the nails, but they presented three distinct marks, showing thereby the degrees of growth during each attack; nor had the whole of the hair fallen off, but it was covered with an abundant scurf, and emitted a peculiar odour. The desquamation commenced where the vesicles were first observed, viz. at the upper part of the back, and about the axilla. He (Mr. T.) regarded the novelty of the case to consist in the periodical form it assumed, and he concluded by asking, whether this was a case of

The PRESIDENT believed that the case presented no new phenomenon, but would be found to coincide with the description given by Willan and Bateman.

Some discussion ensued respecting the vesicles in eczema, which the President said might be so small, that unless circumspectly observed, they might be overlooked.

Some remarks were also made on the comgeneral health is good, but anscultation de- bination of alkalies with quinine, which, tected an increase of the heart's action. Six however desirable, Dr. Jounson said would appeared over the body, of the size of pins' stance that fell to the bottom of the vessel. heads, the intermediate portion of the inte- For a knowledge of this fact he was indebted

vesicles shortly becoming bedded together, of the liquor potasse, why should it not be and presently discharging a watery fluid, by the two fixed alkalies? Ammonia, he the whole course of the affection occupying was confident, would do so, and he was about six weeks, and apparently terminating tolerably positive that it was changed by

able general disturbance. Twelve months of combining magnesia with quinine, and

STRICTURE OF THE COLON.

Mr. Salmon then gave the history of a that he did not take, for the last attack, the diseased colon which lay on the table. The powerful sweating medicines prescribed on preparation was taken from a lady, sixty former occasions. Up to the 24th of No years of age, who had enjoyed good health, vember, opiates to allay the restlessness, and but suffered from a remarkably costive conbleedings and effervescing saline mixtures, dition of the bowels for a long time. When with diareties, and an aperient dose every he (Mr. S.) was consulted (by the desire of alternate morning, were exhibited for the a physician who suspected it to be a case of pain in the head and rigors; at this date the introsusception), he presumed that a meeruptions at the back of the neck were found; chanical obstruction existed, as nothing had to be confident and containing serum, which then passed for the space of twenty-four might, without due care, have been taken, days, and two weeks more clapsed after his for pus. Mr. White then recommended first seeing her without any evacuation octonics, and the following were selected, as he conceived that the disease manifested a part of the patient to empty the bowels, servation periodicity: sixteen grains of the which was an important phenomenon, with the second quainie, forty-eight minims of the common the common terretain solution, in eight ounces the rectum. In order to institute an examination of the gut, an instrument two feet to the common times a day, for four long was provided, and stricture found to at the termination of which exist fifteen inches up, at the sigmoid flexure

of the colon. The means employed failed, | these miuries were so from as was anticipated, and the patient died. so severe, and were so without a doubt.

speck of blood.

An adjournment then followed.

ROYAL MEDICO-CHIRURGICAL SOCIETY.

Tuesday, December 8, 1835.

MR. EARLE, President.

WOUNDS RECEIVED IN DISSECTING.

HONORARY diplomas were voted this evening to Dr. Faraday and Mr. Cline; according to a proposition made during the iast session.

A paper was then read, on the treatment of injuries received in dissecting, by Mr. R. STAFFORD. The author remarked, that jected), but a quarter

nd became tal, as to h though he felt persuaded that had a careful worthy of considerable attention. Some examination, and a scientific treatment been persons supposed that a peculiar virus was adopted at an earlier period, a perfect cure introduced into the system through the might have been effected. At the autopsy, a wound, occasioning, by its influence on the a quantity of hard feces to the extent of three large chamber-utensils full, were found lodged beyond the stricture, and the colon, supposed that the symptoms entirely active the provider of the supposed that the symptoms entirely active the provider of the supposed that the symptoms entirely active the provider of the supposed that the symptoms entirely active the supposed that the symptoms are supposed that the symptoms which entered the the symptoms which ent when removed from the body (with the pended on the part injured, such as the rectum), measured at the caput coli, or sheath of a tendon in a person of an irritalargest part, fourteen inches in circumfet ble constitution or had health, admitting a rence, ascending thirteen, descending twelve, constitutional predisposition in either case. and at the situation of the stricture only But the author thought that the phenomena one inch and a quarter, and its coats had could only be accounted for on the supposition become exceedingly thin. This case, he that an animal poison was introduced into said, proved the possibility of detecting stric- the system, as the most rapidly fatal cases ture high up in the canal, and also proved often occurred where there had been but a the occurrence of stricture in the colon, slight abrasion, or a scratch received, and it was not probable that the sheath of a ten-A very long discussion followed. On the don had been wounded. Many cases also one side of the room it was argued that were recorded, in which no abrasion even great impropriety and danger attended the was discovered, the most minute inspection using of long intestinal instruments, and rendering it most probable that absorption that it was impossible scientifically to introduce them when soft, as in that state they author's object now was, to relate several could not be made to must be different scale. could not be made to pass the different angles severe cases which had fallen under his obof the canal, as their exact situation could servation, which he believed would tend to not be detected in the living subject. On the illustrate an appropriate mode of treating other side of the room these objections were the injured part, and meeting the formidconsidered as of no weight, Mr. Salmon ex-plaining that the composition of the bongie quently supervened. In the first case de-he used varied from those in ordinary use, tailed occurring to an M.D., the first from containing nine-tenths more of common symptoms manifested themselves on the bees-wax, and consequently requiring nine-tenths more of heat to make it soft, which, although introduced soft, hardened by de-grees as it remained in the body, first taking which the inflammation of the absorbents merely an impression of the strictured gut, rapidly extended up to the elbow-joint. The and afterwards dilating it, which was mani- ; Doctor was first awoke from a sound sleep. fested by the progress of the patient's health, as four a.m., with pain, which speedily in-No danger, he said, existed of piercing the creased. At eight a.m. the pulse was hard, coats of the intestines, his conclusions being beating 90, and having a thrill or jerk. He the result of ample experience, during which (Mr. 8.) ordered a calonet powder, and he had not once observed that the extre-lecches to the part affected, followed by mity of the bougle was ever soiled with a evaporating lotions, and a semna draught. At mid-day Dr. Lee called in, and found the pain and inflammation on the increase, the pulse small and irregular, countenance anxious, and the patient suffering from excruciating pain in the lumbar region, with involuntary tremonrs, and twitchings of the lower extremities; in fact, the whole nerv-ous system appeared as if it had sustained a most severe injury, such as was evinced after the bite of a venomons reptile. The nitrate of silver was applied to the injured part freely, and Mr. Lawrence was requested to see the patient. The tremours had continued, and the pains increased, and the skin was covered with a cold clammy perspiration, and hence the indications were, to alleviate the pains, and tranquithize the nervous irritability. Twenty leeches ordered to the hand, and media.
Dover's powder (which

uriate of new was substituted for severe, and although the mammation was which reme on the stomach; it as not necessary to repeat the aperients, sthe bowels were freely opened. Shortather, the pulse became somewhat less, after, the pulse became somewhat less, becember 1831, Mr. P. received a wound (works. com opening the body of a female who? he nature of the mulady, nor were the ab- single opening. orbents inflamed. Leeches were employed, ' pening of which, although no pus tollowed, nomas B., an attendant in a dissecting-oon, received a wound, followed by inflamnation of the absorbents. Lecches and the

ut the trembling, and the inflammation of applying for medical assistance, coma suc-ne absorbents, remained the same. An in-ceeded, and the patient sank. On an exaision was now directed to be made, but no mination of the body after death, it was us bllowed, and the leeches were repeated found that pneumonia had assisted in prot four p.m. he was better, and the pulse ducing the fatal result, which forcibly showed ad become more firm and strong. At this the necessity of not delaying to apply for re-isit, it was remarked that the morphia lief. Some observations were afterwards ensed to produce effect after the expira- made by the author on the propriety of ion of two homs, and that if not then regeneral blood-letting. Generally he thought cated the pains returned, when the exhibitinot advisable to employ it, owing to the on of half a grain arrested them and in-uced sleep. By persevering in the free This view seemed to he supported by the pplication of leeches, making incisions, result of the cases published by Dr. Duncan nd applying positives and warm formentation the Med.-Chir. Trans. of Rdin., who stated ons to the hand, with the internal use of that when employed, the patients never no muriate of morphia and fever diet, the rallied. The good effects of topical bleedatient perfectly recovered from his alarming were evident, and in those cases in ig and desponding condition; but in spite which it was used, matter did not form in I the active treatment, sloughing of the the axilla. With regard to the question, endons followed, inducing a contraction of how should the swellings be treated, whether he joints of the impregnated fuger. This pus was or was not formed, he (Mr. S.) ase, remarked the author, demonstrated - would recommend free openings, from the irst, the great utility of the sedative, and good effects following which, in the present he equability, in the present instance, of case, before it was known if pus was pres action. Secondly, the propriety of open-sent, that Mr. Lawrence was led to adopt ag freely the wound, although pus may not the practice. The author concluded by ave formed. Thirdly, the value of the briefly referring to various cases to prove itrate of silver, but to what extent it the propriety of laying open the parts early, slowled relief could not positively be showing that where not had recourse to firmed, as other measures to reduce death was the result. He also recommended he inflammation were adopted in combi- the support of the system by a tonic plan, ation with it. The next case was given other symptoms that arose during the prowell illustrating the hencht result, gress of the disease, being treated according g from opening the wounds early. In to the best methods laid down in surgical

Mr. Mayo recommended that a free ied of puerperal fever. As no puncture opening should be made in every point of cas perceptible, the patient did not suspect the swelling, not resting satisfied with a

athenis minamen. Lectures were to make the matter of the constitutional symptoms, however, rapidly increased in severity, and the tional symptoms were less severe, and the A MEMBER observed, that when the in-

Mr. MACOWAIN maintained that many cases of crysipelas presented symptoms conoved the tension, and the constitutional ymptoms abated, and after the lapse of hit precisely similar to those arising on the absention of animal points. the absorption of animal poison. He obvas quoted to prove the utility of the nitrate is the absorption of animal poison. He objected to the application of unmercus leeches, f silver. The fourth case was as follows: on the same ground that Mr. Stafford would

The President inculcated the necessity itree of silver were applied, and he was if free and early incisions to prevent the ill consequences of tension of the parts. He a spirk aperient. Under this treatment remothered the case of a pupil, where the symptoms were so terrific, that no hope for a moment was entertained of his recovery, the consequences of the case of a pupil, where the symptoms were so terrific, that no hope for a moment was entertained of his recovery, the consequences of the case of a pupil where the symptoms were so terrific, that no hope for a moment was entertained of his recovery, the consequences of the case of the case of the consequences. d being that period. The feebled, that the loss of the smallest quand constitution symptoms were then tity of blood would probably have sunk him.

He requested Mr. Lawrence to see him, and Mr. L. sanctioned (before he, Mr. L., taught the advantages of incisions) the opening of a tumour which had formed in the side. as the pain increased. One hour after, it was found that an alarming hemorrhage had occurred from the wound, of not less than thirty ounces, after which the pulse rose, and became fuller, and, contrary to the opinion formed from the debility present, the patient progressively recovered. Where the inflammation proceeded from the absorbents, and was characterized by red lines. he advised the free use of the nitrate of eilvor

Dr. LEE observed, that when no external traces of inflammation, or other symptoms, appeared to account for death, he believed the fatal event would be found to have ensued from the inflammation attacking the dccp-seated veins.

Dr. Elliotson related three cases to illustrate amongst other positions that matter could be absorbed in dissection, withit appeared, that the finger had simply been rubbed down an arm in a gangrenous state, when dry vesicles appeared on the patient's finger, unattended with inflammation, followed by pain and tumefaction of the side, which was opened without matter appearing. A remarkable phenomenon presented when the body was examined; all the visceræ were so soft, that the finger could be passed into their substance with the greatest facility. In the other two cases, dry vesicles also appeared under similar circumstances. The patient was of an exceedingly nervous temperament, and the symptoms were regarded at first as of a rheumatic nature, but shortly after, sharp lancinating pains occurred in the side, followed by swelling. The nitrate of silver was applied, and the redness disappeared, but matter formed, unattended with any further inconvenience; no other local symptoms appeared where the eruption occurred. But the same accident occurring to him (Dr. E.), the poison being imbibed from a similar source, and in the same manner, only slight local symptoms followed, unaccompanied by any constitutional derangement, in consequence of his being of a robust constitution, but the pimple remained for full two months. He concluded, from the facts he had observed, that the symptoms which follow, whether local or consti tutional, or both combined, do not result from the application of the poison to particular parts or structures, but rather depend on the peculiar nature of the constitution of the person infected.

The meeting then adjourned.



AT TUNBRIDGE WELLS,

TO DISCUSS THE OPERATION OF THE

POOR-LAW MEDICAL CONTRACTS.

AT a meeting of the Medical General Practitioners residing at and in the neighbourhood of Tunbridge Wells, held in that town on the 24th Sept. 1835, for the purpose of considering the effect of certain clauses in the Poor-Law Amendment Act, on their interests, and the welfare of the sick poor,

It was resolved, -That while this meeting disclaims any factions reposition to the new Poor law Commissioners, they feel it right to form a Committee for the purpose of watching the operations of the Paor-Law Amendment Act on medical interests, and that Messrs. West, Starling, and Way, be appointed such comm'tee, the members of this meeting, at the out an abrasion of the surface. In one case | sme time, pledging themselves individually not to enter into any contract for the whole, or any district of a union, with the guardians of the pour, excepting with the concurrence of the above-named Committee. The above resolutions were then signed in form by the members present, who consisted of the following gentlement :-

Isaac Haegraves. William J. West. William Wallis. Robert J. Starling Christopher Pentold. David Henry. W. Way William Wieden.

Peter Brown. John Sloane. Charles Trustram. E. H. Finley. Robert Gibbon. John Outtoridge. Jonathan Monckton. Stephen Monrkton. JAMES CORNWALL, Chairman.

Shortly after this meeting, the Assistant-Commissioner, Sir F. Head, and the Board of Guardians, gave notice to the medical gentlemen of the district, that they had decided on allowing 250%, per annum as the salary for attendance on ten parishes, comprising a large and widely scattered population, the former salary for the same attend-ance having been 470%. On the receipt of this communication a second meeting was called. and held on the 11th Nov. 1835, when

It was resideed,-13). That a communication having been received from the guardians of the poor of the Tunbilige Union, stating that they had appear tioned the sum of 252/, per annum for the whole medical and surgical attendance (excepting midwifers) in such Union, this meeting laments the prartice which has been adopted in other unions of obtaining medical efficers for the poor by threats, beld out to compel them to take the contracts on the appressive " d inadequate terms which had been proposed, and that they consider such a course as degrading to the m fersion and injurious to the pauper poor gent cases involving life), and that we for providing " efficient mention ance on the poor," easing 2nd. That trusting w

EDICAL DEPUTATION.

Of Consideration (men, capable of ervices, and the fat to meet them on something like fair and adequate terms.

3rd. That a Committee, conflicting of the four following gentlemen. be deputed to wait on the Board of Guardians at their next meeting, to present and supportake resolutions of this meeting. Mr. Monckton, sen. (or jun.), Mr. Cornwall, Mr. West, and the chairman of this meeting, or such other gentlemen of the present meeting as they may depute.

(Signet) ISAAC HARGRAVES, Chairman,

The above-named gentlemen (Mr. Way, in Mr. Cornwall's absence, taking his place) waited on the Board of Guardians, when the Chairman, Mr. HARGRAVES, read and presented a copy of the resolutions, and stated that he was instructed to urge on the consideration of the Board, that the medical men were badly paid at their former salaries, so that the offer now made, of little more than half that amount, was unjust to the pour, as well as to the profession. He re-showed, on the part of the medical men, quested also to be informed what the precise daties of the medical men would be.

Mr. Hargraves was here interrupted by Sir F. HEAR, who said that he would not give the least information to parties who on which the Board were proposing to act, came as the deputation had done; that the language of the former resolutions, as well as of the present, was highly improper to be used to him, and that it was evident the deputation bad come for the purpose of insulting and abusing him, and that such conduct -

could not be tolerated.

The CHAIRMAN of the deputation immediarely disclaimed the most distant intention of offending, much less of insulting, Sir F. Head, and the Board of Guardians, and though he still contended that the language complained of was that of truth, he would, in accordance with the feeling of the Board, and at the suggestion of an influential member of it, withdraw the objectionable words "threats held out" and "oppressive."

This proceeding was satisfactory to all parties but Sir F Head, who resumed his vituperative and insulting strain of language, endeavouring to impress on the Guardians and the deputation, that their language in addressing him was highly un-

becoming and improper.

The CHAIRMAN of the deputation upon this appealed to the Board to say, whether, having, in compliance with their wish, withdrawn the offensive words, Sir F. Head was justified in thus treating the deputation, and he (the Chairman) would now individually tell Sir F. Head, that he (Sir F. H.) back he right to speak as he had spoken, and that be (Mr. Hargraves) cared not, after his ent of the deputation, whether he felt er not. The Chairman was here but on again resuming he the assertion that out "to the medical

prable men, by quoting the words of Sir F. Head exame of Medical at Tunbridge, to the effect, that if the mee sick phor, we hope dical men of the Unions would not take the contracts on his terms (at the same time boasting that he had reduced them nearly, or quite, half), competent men from London would be brought down, who would gladly accept them for the advantage of an introduction to private practice.

Sir F. HEAD admitted that such had been his words, and angrily added that he would

repeat them.

Mr. Way next addressed a few words to the Board, and showed, by a reference to the resolution itself, that it could not be meant that that Board had used "threats," or were treating the medical men oppressively, but that on the contrary, they were hoping to meet them on fair and honourable terms. Mr. Way begged to ask the Board on what calculation or data they had fixed the salary of the medical officers, and, from a statement produced to the Board, he that the average remuneration of his own services in one parish, was only one penny for each patient actually attended, including medicines. He objected also to the principle as pressing most unfairly on one class; and observed that on such a principle, it would not be difficult, without for an instant impagning the ability of Sir F. Head to execute the duties entrusted to him, to find numberless individuals, equally qualified, who would gladly take his situation, with half the emolument.

Sir F. HEAD, in reply, acknowledged that the compensation was inadequale, and further observed that the principle upon which he had invariably acted was to give the preference, in the appointments, to those gentlemen who were already in possession of the parishes; and that notwithstanding what had passed, the same principle would, in the PRESENT INSTANCE, be adopted.

16th Nov. 1835, at an adjourned meeting, Ac. Ac.,

It was resolved,-1st. That this meeting receive with much concern the communication from their denutation, of the refusal on the part of the Assistant-Commissioner and Board of Guardians to after their decision as to the amount of salary to be given to the medical officers of this Union, and do express their deep sense of the injustice of such determination, as affecting the interests of the poor, as well as the medical profession in general.

2nd. That this meeting concurs in the expedience of accepting the terms named by the Board of Gaardians.

3rd. That Mr. West be requested to confirm the contract in behalf of the meeting for Tunbridge Town District, Mr. Monckton for that of Brenchley, and Mr. Way for that of Tunbridge Wells, and that in case of any difference of opinion, or difficulty arising, in defining the limits, or appropriating the portions of daty or salary, Messrs. Prince, Hargraves, and Cornwall, he appointed as referees, and their decision to be considered final.

4th. That on entering into the necessary contract with the Board of Gaardians, this meeting do request the gentlemen so contracting, to present a protest against the conduct pursued towards them, whereby they have been compelled to undertake duties, without anything like an adequate remuneration.

5th. That the following be the form of such protest :- " This meeting most respectfully, yet most firmly, protest against the conduct which has been pursued towards them by the Assistant-Commissioner and Board of Guardians, by which they have been compelled to accept of terms for their professional services, which they feel to be degrading to themselves. They have asked for, and have been denied, information as to the grounds upon which the Board have decided on the amount of their salaries. They have presented to the notice of the Board a statement of their past services and remuneration, and it has been admitted by the Assistant Commissioner that an adequate compensation was not allowed. It has been avowed that upon their refusal to accede to the proposed terms, strangers would be introduced into the districts, to the manifest injury of the present medical practitioners. Such avowal must be deemed as a threat to those whose interests are so intimately ; concerned thereby. They consider, also, that the sum proposed has been determined upon, without due regard to the required duties, and at variance with the remuneration allowed in other Unions. Under these circumstances, this meeting feels justified in declaring, that the manner in which its members have been treated has been unjust, arbitrary, and oppressive, and such as could not have been contemplated by a wise legislature."

(Signed on behalf of the meeting.)

On the day appointed by the Board of Gnardians, Messrs. West, Monckton, and Way, attended the meeting. There was also in attendance (but of course not with the deputation) an individual who, alone of all the practitioners in the district, had from the first declined acting with his professional brethren. The names of the members of the deputation were sent in, with a statement that they were waiting for an interview, and after some little time, Mr. Monckton was called before the Board, when the Chairman announced to him that he had been unanimously appointed to one of the districts, upon which Mr. Monekton replied that he thanked them for their unanimity, but could not thank them for the appoint-Mr. West was then appointed to another district, and in reply Mr. West said that he felt the appointment was forced upon him, and that he would give any one twenty guineas above the salary to perform the services. Immediately after this to the great surprise of the deputation, the indivillual above alluded to as not forming part of the deputation, was appointed to the remaining district without the least explanation on the part of the Board, or even the slightest notice of what had been done being made to the deputation!

25th Nov. 1835. - A gourned mecing, Se. Sc.

It was resolved, -14. That this meeting capro their deep sense of the apparent injustice which the Board of Guardians of the Tanbridge Union have committed, in appointing a gentleman who has been less than four months in the district, to the charge of the sick poor of four parishes, which have higherto, for many years, had the attention of five of the oldest practitioners of the place and neighbourhood, who were willing, if required, to continue their services for such purpose, on the proposed terms. This meeting feels, that such appointment has been made in violation of the principle and the public pledge of the Assistant-Commissioner himself,-pamely, " that those who already had the attendance of the parishes, should have the preference given them in the new arrangement." In the absence of all explanation from the Board of Guardians, the meeting is compelled to conclude that the appointment has been made, they will not say in a spirit of vindictiveness or resentment, because its members have dared to remonstrate against grievances imposed on them, but certainly without due consideration.

2nd. That the Chairman, with Mesars. Cornwall and Way, be requested to form a committee, to give publicity to the proceedings of this and former meettures, as they may think proper.

3rd. That this needing be formed into an association, and that it be called "The Medical Association of the Tanbridge Union."

Signed on behalf of the meeting, J. HARGRAVIS, Chairman.

A Copy of the above was then directed to be forwarded to the Board of Guardians, to be laid before them at their next meeting.

THE LANCET.

London, Saturday, December 19, 1835.

The proposal for establishing a national University in this metropolis, is exciting very general attention, and there are few persons to be found, even in the ranks of the bigots, who offer any serious opposition to the scheme, as it has been propounded by the friends of the Ministers. The founding of the Institution, therefore, is regarded as a matter of certainty, and the public have only now to consider on what terms, or "conditions precedent," the degrees or honours of the University are to be a what the lies are injurious to community, we are

ciples which con the unqualified sanction, not only of the well-informed people of this country, but of all the enlightened men of Europe. Assuredly. therefore, it cannot command so great an extent of admiration and respect, if the CHARTER OF INCORPORATION give to the conductors the power of raising up obstacles, in the form of CURRICULA, which shall prevent all persons, excepting the students of a few favoured institutions, from being received as the legitimate candidates for degrees. Such obstacles would create another monopoly of a scarcely less objectionable character than that of Oxford and Cambridge. The principles of government, in order to be just, must be simple; but there is neither justice nor simplicity in withholding from genius and talent their full share of honourable reward. The production of "certificates of attendance," too often given by the professor in the absence of any personal knowledge of the student, cannot increase the acquirements of the candidates, either in number or utility. If the great scholastic institutions which this charter, it is supposed, is designed especially to favour, do not dread a competition with the private, less ostentatious, more retired establishments, in many of which are taught the higher branches of knowledge, how can the conductors and supporters of the former honestly and reputably contend that all students ought not to be placed upon an exactly equal footing in the Examination Hall of the new University? If distinctions be made, if exceptions be introduced, they must operate as unjustly in London as they have already operated in Oxford and Cambridge. If it be not the object to confer honour upon the acquirements of genius, let an acknowledgment to hat effect be made at once; and if it be the intention to confer titles in learnnd science, as a species of reimbursement diture of so much money under het-and-certificate eye

London, upon prin- | fem, then, also, let that intention be honestly confessed. If the exceptions to which we have here briefly adverted, be actually made in the new charter, the public will naturally and correctly conclude, that there exists a desire, from some motive or other, to give an artificial value to the education of persons who are instructed in particular establishments. Such a proceeding is not fair. It is infinitely beneath the object of a great and liberal government, and the scheme would no sooner be in operation than it would be productive of very general dissatisfaction; the honours which it would be designed to confer, would carry with them no weight or importance among the enlightened portion of the community. We refrain, however, from now offering another word on the subject, in the hope that the advisers of the Crown will take the earliest possible opportunity of publishing a draft of the charter which it is their intention to frame for founding and governing the metropolitan University. When this document is before the public, then, and not until then, shall we be placed in a position to object, by petition and remonstrance, to the obnoxious clauses, if there be any such, in the new roval instrument.

> THE following note accompanied the communication which will be found at page 466 of the present Number of our Journal:—

> > To the Editor of THE LANCET.

Sir.—As secretary (pro tempore) of "The Medical Association of the Tunbridge Union," I am requested to forward for your information, and, should you think proper, for publication also, the minutes of the proceedings of our different meetings.

I have endeavoured to give you all the facts connected with them as concisely as possible, and our object in senting them is, through your means, to invite our professional brethren to form local associations, to terminate in those of the county, and under the idea that one or two gentlemen from each county might unite to form a deputation to his Majesty's Ministers, for the purpose of obtaining redress of the grievance, I am, Sir, your obedient servant, W. Wax.

Tunbridge Wells, Dec 1, 1835.

In placing this note before our readers we may state, that although we approve of the purpose therein mentioned, we consider that if medical gentlemen would but combine to suggest a plan for amending the state of the law with regard to the treatment of the sick poor in the new parochial unions, it would be infinitely preferable to making any application to the Ministers on the subject. It is not right either that the sick poor of this kingdom, or the surgeons of England, should be left to the mere mercy station, their respectability, or the benevo- is taken from the Courier of Dec. 12 :-lence of their intentions. Experience has It is the law, therefore, that must be made the members of the Legislature will be very hearty in their condemnation of the proceedings of the Poor-Law Commissioners, or their assistants, unless medical gentlemen can themselves point out what ought to be observed in making the contracts between attendants. We hope, therefore, should deputies from the county associations assemble in London, that they will visit the metropolis fully instructed by their constituents as to the plan for which the medical practitioners of England would be anxious to obtain the sanction of the Legislature. It is quite evident that there must be some definite settlement of the question out of doors before it can be brought forward again within the walls of Parliament.

The insertion of the communications of Mr. WAY would have taken place last week had not a want of space rendered their publication at that time impossible. The statements contained in the reports are calculated to excite the utmost feelings of indignation against the authors of the insults offered to the deputation, in the mind of every man of correct gentlemanly feelings who peruses them. .

the University of Edinburgh, ted by the death of Professor TURNER, has been conferred in a very honourable and flattering manner on our distinguished anatomist and physiologist, Sir CHARLES BRLL. The only thing we have to regret in making this announcement is, that the emoluments of the office are not commensurate with the value of those services which Sir CHARLES BELL has already conferred on mankind. The followof any set of men, whatever may be their ing paragraph relative to this appointment,

"The Refermed Town Conneil of Edinalready proved that the law is defective. hurgh have done themselves great credit hy their unanimous appointment of Sir CHARLES BELL to the important Chair of more perfect; but it cannot be expected that Surgery in the University of Edinburgh, We cannot conceive a more disinterested or praiseworthy discharge of public duty. There are at present several surgeons in Edinburgh, of distinguished ability, though unquestionably not one of them enjoys the high professional reputation which Sir C. Bell has deservedly attained, most espethe rule of law which should invariably be cially as a public teacher; but all applications for any individual excepting Mr. Liston, whose eminence as a surgeon is Boards of Guardiaus and parochial medical inniversally acknowledged, were entirely disregarded, and as soon as it was ascertained, by reference to Mr. Liston, who has lately settled in the metropolis, that he would not forego his prospects in London for any of the medical chairs in the University of Edinburgh, the members of the Edinburgh Council resolved, painful as it was to the feelings of some of them, not to pay the slightest attention to the private solicitation of friends, but at once to clect Sir Charles Bell, as by far the fittest individual who was willing to accept the situation, and thus to uphold the fame of the first medical school in Europe."

> Had Mr. LISTON accepted the invitation of his countrymen to return to Edinburgh, and taken the Chair of Surgery, he would have acted, we think, most injudiciously. Within the short space of time that he has already resided in the Metropolis, Mr. Lis-TON has succeeded in establishing her reputation equally well founded with that which he had previously acquired by exercise of his scientific attal Edinburgh. If he could be the to quit the Metropoliteby the offer of

of he Universit would have incarred an irreparable loss by his tecession from that establishment.

INTERCEPTED LETTER.

"DEAR DOCTOR MACMICHARL, - 1 am determined to print my last oration, as all my friends tell me that the Latinity of it is elegant, and that the whole is in good classical taste. Perhaps your friend MURRAY would publish it as a shilling pamphlet, illuminated with a view of Pall-Mall-East, as a frontispiece. I will undertake to sustain all losses in case he should fear to print it as a bookseller's speculation. It may give our sacred cause a lift, and we ought not to throw away a chance in these hours of convalsion and alarm. It will also promote friends in Lincoln's-Inn-Fields and Bridgeour interests to get it reviewed, a duty which con can desire Fengusson to perform in the they grant diplomas and licenses will of Quarterly, but pray caution him not to use course be freed by the Government from so much fulsome language-or what people, having anything more to do with the Colof good taste call flummery -us he did in lege and Hall corporations. In fact, the the review of my former orations. I require game seems to be altogether up, and what no puffing. My classical acquirements are to do and what to say I know not. It is, universally acknowledged. I desire him to indeed, most mortifying to me that I have write nothing laudatory of them, but to con-fine his critique to the scientific and high Government in their various arrangements.

Downing-street, and although at this early tampered with Sir Robert Pret and my call it, must soon burst, and therefore let us cerity, and avoid asking my counsel. hope that by early information on what the Government is contemplating, we may make my health, I must come to London at the at least some effort to parry the blow which latter end of the month. I will then make awaits our ancient and venerable institution. the necessary arrangements for getting up It appears that the 'Central Board,' the very the evening recreations at Pall-Mall East. name of which is sickening, and about which to accomplish which, however, I see many we heard so much during the Parliament- and serious difficulties. I must also call the ary inquiry, is contemplated to be formed attention of the Fellows to the sinews of in right carnest, the Government having war, a matter fraught with anxieties, as determined, to the joy I suppose of all the there have been so few monies received for liberals and radicals, to form such a Board, licenses lately. The College building is under the auspices of a Metropolitan Uni- already so heavily mortgaged, that it will weekly. This university is to comprise a require a much deeper financier than my-body of Examiners, to be selected from all self to keep the machine in motion, grades of the profession, except the teachers of the different schools, the Examiners of as it has ever done, my earnest solicitude, our own College, and, of course, the Council more especially as my dear nephew's fate of Encoln's lun-Fields, and it is intended in life has been embarked in that school. reac conferring degrees (following singureacy conferring degrees (following singureacy conferring degrees (following singureacy the example of our College), on | generally known that the vacated chair was
thible competent medical
not his chair, but that of Dr. Bisself H Awthe whence it has been this, this chair, but that of Dr. Bisself H Awned the second of the second

capital; the students establishment of such an University without horror. It strikes at the very foundation of our vested rights, and will wipe away, like a sponge, the whole of the certificate system, under which our esteemed friends have so greatly benefited. It will destroy all the exclusive advantages and privileges which our recognised schools and hospitals have so long possessed, and it must inevitably destroy those rational sources of income and emolument which are derived by all our present Colleges and Corporations, from the trade in degrees and diplomas, as no one can now be expected to disburse those large sums which we all demand for collegiate documents.

"You, my dear friend, are perfectly aware of the great difficulties into which we have lately been plunged in consequence of scarcely an individual having applied for a license from our College during the last two years, and if our funds are so had now, what will they be by and by? This metropolitan university will be no less fatal also to our street, Blackfriars, as those to whom moral feelings which abound in the oration. as I might, by some means or other, have 1 have received a most interesting, but, caused delay, even if I could not have got I lament to add, a most painful and vexations some important alterations made in the communication from my correspondent in plan. I now see the misfortune of having period I would not have the fact whispered, Tory friends, during their short reign, for I yet I tell you that the bubble, as the radicals suspect that the present men doubt my sin-

"Much as I may regret it on account of

that this enlightened body shall have the By-the-by, I should be glad if you could de-

these two eminent professors should not be I to live for a hundred there; but circulapointed, and which was with difficulty obtained for him by me, he was compelled to "I lament to hear of the illness of my accept from the little chance which he had dear old friend Madame Vestris. To visit his professorship. Moreover, such an office as Inspector of Prisons must be regarded as quite below the dignity of my nephew.
Things are, indeed, come to a sad pass
when one of our most learned Fellows, a professor, too, of King's College, is under the necessity of accepting the office of 'Inspector of Prisons.' Heavens! What a degradation for a man of classical learning light I feel in the prospect of again meeting and high moral feelings, to be placed in a them so soon in Pall-Mail-East. God bless situation where his chief associates will be you all. Ever yours, criminals and their safeguards! Do, therefore, endeavour to let it be generally known. — and MACLEOD might be desired to give a paragraph on the sub-

had a competent successor to the vacant specim of any person who where to examine it chair of materia medica among our Fellows. Fourtreet on which the resention to this -I am Sir, for although it may be quite within the ca- | Kinnerton-street, Dec. 0. 1835. pacity and calling of a licentiate to teach the difference between rhubarb and inccachanha, yet we must not give those sub-ordinate licentiates a footing in the Strand. We must get PARIS, if possible, to close with the proposals that have been made to him, and you must explain to him fully how matters stand. Express to him my high opinion of his talents and moral characterthe elevated position he fills in the scientific world,-the gigantic powers of his mind,-the celebrity of his numerous writings,-and, shove all, the unbounded sentiments of friendship which I have ever entertained for him, and the great anxiety I have always felt to assist him in life. These, and all these sentiments, properly explained to him, one after the other, from day to day, will most likely induce him to acquiesce at once in my wishes, by accepting the chair. He is a shrewd-enough man to see that neither profit nor honour can reward him for the toil and vexation which he will endure in compiling lectures to deliver to empty benches; but he must be tree to empty benches; but he must be caided, and brought over by promises of better things and better times; though, better things and better times; though, better things and better times; though, better things and letter times; though, better things and better times; though, better things and letter times; though the letter times the letter things and better times; though the letter times the letter times the letter times; though the letter times the l

these two emment processors should not be confounded, and mistaken the ohe for the other, because I am well aware that the to make a we now the sum of the conformal sum of the c cause.

in the Strand of obtaining emolument from her is a sufficient reason for my hastening to London. Pray call and tell her se with my love. I am confident that, knowing her so well as I do, I can be of use to her. She is a charming creature, and I am not the only one who would miss her, as she certainly has always been, and still is, a general favourite. Remember me kindly to all the Fellows, and express to them the de-

" November, 1835."

Ject,—that the newly-appointed inspector of prisons is Dr. Bisself HAWKINS, formerly professor of materia medica in medica in King's College, Strand, and not my dear nephew Panny HAWKINS of the Middle with the manufacture of the practice of physic in King's College, and registrar of our college.

"My anxiety has also been directed to the material materials in the material is the first of the materials and a connectent successor to the vacant that the in the material is connected to the material is the first of the practice of the processor to the vacant that of the larger streaming class. For the touch of the processor to the vacant is precised for any prime when the larger streaming class. To the touch of the supplies that have entered is therefore, make a mech larger streaming class. To the touch of the supplies that have entered is the prime and the provided and the pr KINNERTON-STREET SCHOOL. - To the

Surely A Friend of THE LANCET is mistaken. He will, however, greatly oblige us by stating, at once, in confidence, his reasons for believing that the author is Mr. R. We can show good reasons, at present, for doubting the correctness of the allegation.

Very many of the communications lately forwarded to us will be inserted. Want of space only, in appropriate parts of the Jourual, has yet kept them from publication.

A correspondent informs us "that Dr. Webster only lectures at King's College for his friend Dr. Hawkins, and until Professor Paris undertakes the duties of the chair of Mat. Med." We have not had room for the long communications from various parties who feel interested in this complicated affair of appointments and retirements and reappointments. Did Dr. J. ****** really wish his letter to be published?

ERRATA.-Page 411, line 10, for approprie

THE LANCET.

Vor., 1.]

LONDON, SATURDAY, DECEMBER 26, 1835.

[1835-36.

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER SITY OF PARIS.

BY M. ANDRAL,

Physician in Chief to the Hopital de la Pitie, and the Principles Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculte de Médecine or Paris.

LECTURE V.

INFLAMMATION OF THE SPINAL MARROW.

Ir has long been known, gentlemen, that the contents of the vertebral canal are subject to inflammation, as well as the contents of the cranium, but it is only within latter years that the disease has been studied with great care and attention.

Inflammation of the spinal marrow, known by the name of myelite in the important work of M. OLLIVIER, may be distinguished into two forms, the acute and chronic, but instead of pursuing each of these forms separately, I shall lay before you a general idea of both together, taking care to dwell on the characteristic points that are peculiar to each.

The Anatomical Characters of Myelite.

or inflammation of the spinal marrow, are the same as in encephalitis; it is, therefore, unnecessary to recor to them here; you have the same injection and thickening of the same suppuration in the interior of both tissue, we may have a vacuum produced, organs: indeed, this is a necessary conse- or a true canal, analogous to the normal one

The same of the sa

this affection. From the united effects of ramollissement and suppuration taking place in the substance of the spinal chord, and gradually operating its destruction, we sometimes have a very remarkable circumstance produced, viz., the nearly complete separation of the spinal marrow into two distinct parts. In some cases the abscess has been found so extensive, that the superior and inferior portions of the chord were mercly held together by a few ragged shreds. Of this we have more than one example in the science.

The lesions accompanying inflammation of the spinal marrow may vary in seat, from one extremity of the chord to the other. Th myelitis may be general, or it may be par tial, and the latter form is fortunately muc more frequently observed than the former When the myelite is thus partial, it may oc cupy any portion of the chord; but it is usual to distinguish it into three principal forms, as it may affect a portion of the spinal marrow corresponding to the cervical, the dorsal, or the lumbar regions. Again, whatever part of the length of the chord may be involved in inflammation, this latter may occupy either the whole thickness of the chord, or its anterior, or finally, its posterior column only. All these subdivisions are not made for the sake of arrangement: they will present themselves to you in practice, and are of importance to be noted, because in many cases they give an explanation of the nature of the symptoms we observe.

Besides the divisions which we have just pointed out, the inflammation may engage either the white or the gray substance of the spinal marrow; the latter is much more frequently attacked than the former; and when the inflammation occupies the centre the membranes; the same induration or of the chord, giving rise to a softening of ramollissement of the nervous substance; its substance and destruction of the nervous of the chord, giving rise to a softening of quace from their identity of structure, which exists at a certain period of foetal However, diseases do not occur with the life. I had an opportunity once of seeing a frequency in the one as in the other. case of this kind in an old man: the centre of the substance of the spinal mar- of the chord contained a canal hollowed out which we have not many op-by the suppuration, and which at first sight M. Velpeau pub-might have been mistaken for a natural atriking example of cavity.

The Causes of Myelite

are the same as those of encephalitis. Inflammation of this portion of the nervous centre may equally be produced by external violence, such as blows, falls on the back, &c. It is also frequently produced by disease in the neighbouring parts, especially in the bones comprising the vertebral column. Finally, inflammation may be occasioned simply by too strong an action of the part. You know that encephalitis is sometimes occasioned by intense study, over-exercise of the intellectual faculties, violent passion, &c.; in the same way, neglect may be produced in cases where the action of the spinal marrow is carried to a high degree of intensity. Thus in animals which have been over-worked, or which are compelled to make violent and long-continued muscular efforts, M. Dupuy has found more or less trace of inflammation of the spinal chord after death.

The Symptoms of Myelite.- The division of lesions occurs according as the functions of nutrition or of relation may be deranged. In the first place we may have several of what we may term negative symptoms: the intelligence is usually intact, we do not observe delirium &c., if the inflammation occupy no other part than the spinal marrow; the patient is free from headache, giddiness, and other symptoms of cerebral irritation. We are, however, to except cases where the inflammation engages or may extend to the upper part of the coord; when the medulla oblongata becomes implicated in the disease, we may observe agitation, delirium, coma, and other phenomena, arising from the proximity of this part to the great centre of the nervous system. The derangements of mobility naturally occupy a principal part amongst the symptoms of myelitis; they are very various, and predominate over all the others. In some cases the faculty of motion is extensively compromised, and hence after death you will generally find that the inflammation occupies the anterior pillars of the spinal marrow. This pathological fact is perfectly in accordance with the physiological experiments of M. Magenbie, who as you know has proved that the anterior columns chiefly preside over the motions of the body. The seat of those lesions of mobility will depend entirely upon the part of the spinal marrow that is inflamed. Hence they vary with the divisions we have just now established, as the cervical, dorsal, or lumbar portions of the chord become implicated. The faculty of motion, then, may be lost in the superior extremities; in the trunk and muscles of respiration; in the lower extremities. All these parts may be variously affected, and perhaps the only general principle we can lay down is, that the lesion of motility affects all parts of the muscular vertebral canal is

500

system which receive their series from below the inflamed point prical prical chord.
All these part of present various lesions of motility such as convulsion,
paralysis, contraction, see; there are, however, some exceptions to the general rule
now laid down. Thus in the Physiological
Journal of M. Magradie, you will find a
very remarkable case related: the cervical
portion of the spinal marrow presented a
considerable degree of ramplissement in
its anterior columns; the upper extremities
were paralyzed, but the lower limbs preserved the faculty of motion intact. Here,
then, the influence of the disease was not
propagated downwards.

A second general principle to be deduced from the cases of myelite which we have observed ourselves, or which have been published by others, is, that when the inflammation commences in the lower portion of the chord, producing paralysis of the inferior half of the body, it has always a tendency to mount upwards; you will first observe a paralysis of the abdominal muscles: the chest next becomes affected; and, finally, the upper extremities lose their power of motion. This is a principle that you should remember, for it explains the trouble of respiration and other grave symptoms, that we often witness in the latter stages of myelitis.

We have now to inquire into the nature of those

Lesions of Motility

to which we have pointed, as the principal characteristic symptom in inflammation of the spinal chord. The muscular action may undergo various modifications, according to the seat and march of the disease, the lesions of motility being more or less marked according as the inflammation may take on an acute or a chronic form. In some patients we do not observe any true paralysis. The only modification of motility which they present is a certain weakness and loss of force in the extremities sometimes. Sometimes the paralysis attacks a single finger, then gains the rest in turn, and gradually ascends up the arm. Some patients complain of nothing but a feebleness when they would grasp any object, an incapability of executing their accustomed motions with energy. Others, again, are attacked with convulsive motions in some of the muscles. The paralysis may come on in a gradual manner, being preceded for months, even a year, by weakness in the limb; or, on the other hand, it may declare itself in a sudden and unexpected manner. This latter for is much more rare than the preceding, because chronic inflammation of the spine marrow is a disease more frequently with than acute myelitia. the existence of infla

spasmodic con alight; the pal length of time. There are patients in sively through its mass. whom inflammation of the spinal marrow declares itself by an attack of convulsions, companies myelite is increased by motion and then we chiefly remark them in the of the body; in others this is not the case; active stage. Sometimes these convulsive the movements are executed with freedom. can be distinguished with difficulty from it; of this an example was published lately by an interne of the Hopital des Enfans Malaof motility we have now laid before you. The cause of tetanus has without doubt often escaped the researches of the anatomist; but inflammation of the spinal marpatient only terminate by his death.

of motifity connected with inflammation or chronic myclite, pressure made upon the of the spinal marrow; and here we might spinous processes of the vertebra may give ask ourselves the question so often sug-irise to a greater or less degree of pain; this gested by a review of cerebral diseases; is a fact which is proved by frequent ob"How comes it that the same lesion pro-'servation, though we cannot exply explain duces such a diversity of phenomena?" We how pressure can influence the sensibility have explained to you how many of the dis- of a part so deeply seated, and protected in orders accompanying this affection consist in so complete a manner. lesions of the intelligence, or of movement; and we saw, in particular, how the latter establishing the existence or absence of this function undergoes a great variety of modi-symptom is to run the finger downwards fications. Inflammation of the spinal mar- along the bony ridge formed by the spinous

row may also evince itself by

Lesions of Sensibility (in the neighbourhood) of the Spine),

ready pointed out; they exist chiefly when ter, and then pass it along the line of the the posterior pillars of the spinal marrow spinous processes; when you arrive over are implicated, and this confirms what we have said in the last becture on the experiments of Mackaule, Bell, and other physical sologists, on the different functions of different parts of the chord. These le-different parts of the chord. These lesions of sensibility may exist in the imme- the patient evidently laboured under an indinte vicinity of the spinal marrow, or may flammatory affection of the chord, or its present themselves at various points of membranes; I therefore think it should be the hody more or less removed. In the first abandoned for the former, which is much case, that is, where the derangement of sen- more sure and satisfactory. sibility occupies the spinal region itself, we may observe a pain situate immediately over hasten to warn you that the existence of that point of the vertebral canal which cor- pain upon pressure over some one point of responds to the inflamed portion of the spi- the integriments covering the spinous prohad marrow; or, on the other hand, should ceases of the vertebral canal, is far from
the Cyclic be general, compromising the being a certain indication of myelite. We can

on of some of the mus- covering the vertebral spines, may be parcles; at others a symptoms are more tial or general; the first being much more light; the parameter to the sormented frequent than the latter, because inflamma-with what are called exampt, and this may tion is more frequently confined to a small be the principal phenomenon for a great portion of the chord, than diffused exten-

motions assume the character of chorea, and and the only sign of lesion exists in a small portion of the canal, not discoverable unless pressure is exercised directly upon it. Sometimes the pain is singularly influenced by a des. Finally, tetanic symptoms may join change of position; there are patients to themselves to the long catalogue of lesions whom the horizontal posture is intolerable, and who cannot lie down without suffering a degree of pain which compels them constantly to observe an upright position.

Although the spinal marrow is deeply row may give rise certainly to tetanus, as it seated in the centre of a bony canal, and sometimes does to chorea; the symptoms covered with a variety of parts, such as are then terrible, and the sufferings of the bone, ligament, muscular tissue, and skin, tient only terminate by his death.

Yet experience has established beyond all thus you see how various are the lesions doubt, that during the existence of an acute

The most ordinary method employed for processes. When you come to a sensible point, there is the seat of the disease, and its extent may be estimated according to the ef the Spine), limits of the painful integument; another existing either alone, or accompanied by method sometimes recommended by ansome other of the symptoms we have all thors, is to dip a sponge in very warm was

But before we go any further, let me e length of the nervous pulp, we may never affirm the chord to be inflamed from the condition of tenderness, passing into this one symptom alone; the reason is evident. Reflect for a moment on the number and variety of parts submitted to pressure, when you run your finger along the spinal column in the manner just pointed out. An

affection of any one of these tissues may length of time by acua clearly give rise to painful sensations, and limbs. To the to which we even the more readily as they are more cannot too strongly three your attention. superficial. Let us enumerate briefly these several parts. In the 1st place, commencing from within outwards, you have the fibrous tissue, and this you know is one frequently subject to rheumatic inflammations; hence the sensibility of the integuments may be nothing but a simple rheumatic pain. 2nd. Some one portion of the osseous canal may be diseased; the intervertebral cartilages may be ulcerated, the bodies of the vertebra inflamed, the spinous processes themselves more or less extensively carious. In all these cases, pressure will necessarily produce more or less pain, without the nervous pulp being at all implicated in the malady. 3rdly. The symptom in question may depend upon a true neuralgia of the spinal marrow, a disease whose existence has been established upon authorities that we cannot contest; rachialgia then may produce tenderness along the dorsal region. though it differs essentially from inflammation; indeed, the pain by which it is accounpanied is in general more severe and excruclating. Finally, the disease may be confined exclusively to the membranes of the chord, and the modification of rensibility which now occupies us, will, in that case, be connected with a lesion to which the substance of the chord itself may be a complete ; stranger.

Levions of Sensibility in more distant parts.

So much for Icsions of sensibility in the peighbourhood of the canal. In a second form we said the pains might occupy a distant portion of the body, the limbs, for example, the abdominal region, &c.; or may follow the trajects of the great nervous chord. This species of pain sometimes accompanies the disease through its whole course, and is constant; at other times it is intermitting, and does not affect the patient except at certain intervals. It plays a most important part in the history of mycmore than common attention. In more than one case these pains in the limbs have imposed upon the physician, simulating in the closest manner a rheumatic affection, or other pains, and withdrawing his mind from the real source of the disease, to search after another that has no existence. You will find several examples of this, as we may call it, false rheumstism, in authors, where certain painful affections of the limbs were for a long period of time the only remarkable symptom; and where their subsequent termination in a dangerous disease indicated, though 200 late, the origin from which they were derived.

In certain cases the development of innerrow is preceded for a very considerable a total annihilation

some of the Remember then that the principal affection may commence by sympathetic derangement of the generality in a distant part of the body; that this lesion may exist for a long period without any apparent connection with the chord; and finally, that inflam: .ation of the nervous pulp may reveal itself by no other symptom than pains, more or less acute, in some one of the four members.

Let us now turn to a contrary case, viz., one in which we have

Myelite accompanied by a Diminution of Sensibility.

not by a derangement, but by a diminution, or even a complete loss. In most examples that we meet with, the loss of sensibility is partial, commencing in a particular portion of the body, as for example, the fingers, and then gradually extending to the root of the body. But sometimes the whole surface is equally affected. We do not find any trace of sensibility on pinching the integuments all over the body. The lesion is here general; but observe a curious fact, one of those exceptional circumstances which present themselves so repeatedly in the study of nervous diseases, and which we are mable to explain upon any anatomi al principle. Even when the loss of ser it dity is, as we have raid, general-when the whole body scens equally withdrawn from external ruspressions, you will sometimes feed a few points of the fut gama ats, parhaps a single line, in which the faculty of you attour still lingers, while all around it, as it were, dead. We have witnessed more than one case of this kind. It is a curious point in the lastory of myelitis; for how can we explain the fact that out of many parts supplied by the same nerves, receiving their hervous influence from the same portion of the spinal marrow, one remains perfectly insensible, while another, distant but a few inches, or even lines, conserves its power of perception intact. In a far greater number of cases, however, the lesion of sensibility is not so extensive; it may consist in a single engourdiscement, or numbers of certain parts of the body; this is chiefly seen in cases of chronic myelste, when the nationt experiences no modification of sensibility except in the upper extremities; the fingers, perhaps, are numbed; the patient has a tingling sensation in the extremities; sometimes the whole arm is cold, or he is quable to warm bimself, and complains constantly of a sensation of chilliness.

Thus you see how inflammation spinal marrow is accompanied by symptoms of derangement motility, varying for muscular power in

, weakness, or sensation. Y show encephants. It is a considerable weight bles of the function of nutrition. The same had fallen on the patient's back, and struck class of symptoms not unfrequently accomshow encephan panies inflammation of the spinal marrow; some force; the individual was immediately let us now turn to the spinal first as reseized with difficulty of deglutition, caused gards

Poubles observed in the Organs of Digestion.

A certain number of cases of myclite are characterized by a greater or less difficulty of deplatition: the patient is unable to symptoms which belong more peculiarly to swallow either liquid or solid aliment with encephalitis; we have romiting, and this facility, it is only after repeated and long-continued efforts that he can pass his food along the lock of the mouth and pharynx. deranged; the patient is obstinately consti-This phenomenon is more easily explained patch, and we cannot obtain alvine evacuathan many other derangements of the motile tions, even by employing drastic purgatives. power which we observe during the course. The difficulty of moving the bowels in teta-of a myelite: it certainly is connected with hus is well known; does this depend on the paralysis of one or more of the muscles composing the pharyox and upper part of the esophagus; hence arises derangement in the function of deglutition; hence is pro- then we may have general fever, with its other diseases, and give rise to a complete extensive, the patient is usually free from error in the diagnosis. Thus you may have fever; the skin remains cool, and the circuwe observed great difficulty of deglotition, between them; but however this may be, with paralysis of the torque; these were for the fact is no less certain and worthy of atsome time absolutely the only symptoms tention. Some individuals, instead of palsoon carried off the patient. On examining ment; it is that of a young lady who prethe body, we found the cause of the symptoms sents all the signs of inflammation of the inst filluded to, not in the brain, but in the spinal marrow; she is compelled to observe spinal marrow. We found all the anatomical characters of acute inflammation at the whenever the action of the spinal marrow superior part of the chord, viz. great types—in the production of voluntary movement is tion, with softening, of the nervous substance. toms, for you all know that the nerves she falls into a state of weakness and faintimmediate vicinity.

us one, and should put you on your matory fever, too well known to require any notice. The second species usually accompanies that may seem insignificant, are followed by the most cardents. Mons. Foundary and declares itself either by palpitations and other irregular actions of the heart, or

lightest shade of modified | wer communicated to me, a short time ago, a my, in our last lecture, case exactly similar; there the cause of the by paralysis of the muscles of the pharynx, and also, as in the former case, with paralysis of the tongue.

In some individuals we observe as derangement of the digestive functions, a set of spinal marrow being implicated in the disease?

If the Circulation be troubled.

duced a symptom to which we would call ordinary phenomena thowever, when the inyour attention. Or it may sometimes simulate flammation of the spinal marrow is not very a patient labouring under many of the lation is not accelerated beyond its normal symptoms of angina, such as uncersiness standard. But the circulation becomes often about the throat difficulty of swailawing, deranged in a manner that cannot be attri-dee; these phenomena may persist for a con-buted to febrile excitement. Mons. Serres siderable time, and resist all the ordinary was the first who called our attention to this means, because they depend, not upon an phenomenon, which is a very remarkable inflammation of the nuceous membrane of one. In some cases the patient is conthe pharyux, but in a tene, chronic inflam- stantly tormented with more or less violent mation of the spinal marrow. I had occasion pulpitations of the heart, and the trouble of to see a very remarkable case of this kind, this organ may even be carried to such a some time ago, at the Maison Ronale de degree as to simulate closely anenrysm: Sante, it was that of a female, in whom, we may, perhaps, explain this symptom by long before the appearance of paralysis in the direct action of the spinal marrow upon the limbs, or any alteration of sensibility, the heart, and the immediate communication which she presented; the disease, however, pitations, show a singular tendency to faint; at last assumed a more rapid march, and I have an example of this now under treat-Here then was an explanation of the symp- culation becomes immediately affected, and which go to the pharyux, and a portion of ing, from which nothing preserves her but the lingual branches, are given off from this an abstinence from all motion. Thus we part of the spinal marrow, or at least from have two species of derangement in the circulatory organs accompanying myelitis. The fact which we have now cited is a One in the acute stage, the simple inflam-

by fainting and a momentary suspension of time to attacks of dy the circulation. Let us now examine

What influence is exercised on the Respiratory Organs in Myelite.

We cannot doubt but that inflammation of the spinal marrow modifies this function in a considerable manner, especially when the inflammation occupies that portion of the chord from which the intercostal nerves are derived. When the disease is situated lower down, the patient may remain free from symptoms of dyspnæa for a length of time: this we can readily conceive; however, in almost all cases when the mulady has been prolonged to any considerable period, the respiration becomes embarrassed. and, in virtue of a law which we laid down in a previous part of the lecture, every myclite has a tendency to ascend from the lower portions of the spinal chord to the superior. In encephalitis, or inflammation of the brain, the pneumogastric nerve becomes implicated, and the respiratory functions are eventually deranged, from the trouble of innervation in the central organ of the nervous system. In myelitis, or inflammation of the spinal marrow, the circumstances are quite universal, or nervous, very cenerally asserted in anadose, influence is no longer cerebral, or nervous, very cenerally asserted in anadose, consideration of desinner resident vessels accreting the perspiration cease to the intercostal nerves; the muscles of the chest cease to act, and respiration is gradually extinguished. In some cases the diaphragm is chiefly affected. This important muscle is occasionally struck with paralysis, or ceases to act with its accustomed energy. In other cases the action of the muscles is inordinate. Finally, we sometimes have occasion to observe cases where the actions of the diaphragm instead of being performed with regularity, as in a state of health, become spasmodic, and the pa-tient is distressed with a constant hiccup.

The definitive result of the various lesions of the respiratory organs which we have just enumerated, is to produce sooner or later a degree of asphyxia, under which the greater number of individuals who die from inflammation of the spinal marrow. succumb. The influence, then, of myelitis on the respiratory functions is well established, and sometimes the first signs may be discovered long before the disease has sufficiently advanced to modify the motions of the chest. I will relate to you a case which I saw this summer :- A young man had suffered for a length of time from a fixed pain in the upper part of the cervical vertebrae: this was accompanied by a bruit de cracquement, whenever the region of the neck was ments of certain physiologic submitted to examination. During the connection between the positionance of this pain in the region of the spinal marrow and the spinal marrow, he was subject from time to reproductive propensity.

sof the most violent character, suffocation; which fid access of imminently to threaten his existence : this lasted for a few minutes and then went off, to return again at an uncertain placed. Upon examining this case with some attention, we thought the symptoms depended upon some disease situated in the articulation of the first cervical vertebra, giving rise from time to time to displacement and strong compression of the spinal marrow. You can understand that if the attacks of suffocation to which we now allude had continued during a long period, they might naturally enough have led one astray, and given rise to the idea of asthma: indeed, perhaps, we might not go too far, if we were to say, that certain species of this latter disease, which most authors regard as depending exclusively on an organic lesion of the heart or pulmonary tissues, might be traced to derangement in an organ far from either the respiratory or the circulating systems. It now remains for us to ask.

Are the Secretions modified in Myelite!

Yes, certainly, inflammation of the spinal marrow does modify them, though not in cumstances are quite different. Here the nuv remarkable degree. You will find it in a diminution or loss of the incchanneal act when the limb is paralyzed; in a word, powers which dilate the chest. The inflamed that such portions of the body as have lost portion of the chord no longer stimulates the power of motion do not perspire. This may sometimes be the case, but it is far from being a general rule. I have seen many cases which prove the contrary. There is another fluid which is modified, but merely in the mode of its exerction. Several patients affected with inflammation of the spinal marrow, cannot urinate well; however, observe that this does not depend upon any diminution or change in the secretion itself; the incapacity of prinating is here one of the phenomena of paralysis, and the secretion is retained because the bladder is unable to expel its contents. Having thus briefly noticed the modifications of secretion, we come to a question of great interest, and one which has given rise to considerable controversy, viz.,

How far are the Reproductive Organs influenced by the existence of Myelite!

Here the facts upon which we can depend are very few; however, I may tell you, that I have seen a patient affected with acute pain along the dorsal region, with pains in the limbs, convulsive movements, and other similar signs of myelite, in whom there isted at the same time a very considerable excitement of the genital organs, sugpriapism, &c., and this confirms the

chronic m has been o flammation 3 known to bring on complete impotency. The facts to which we have just now alluded, and several others that we possess, are not to be neglected because they are not, perhaps, as complete as we could have dewired: if we cannot derive from them any rigorous conclusions, they seem at all events to indicate that the spinal marrow is not derangement whatever in the organs of gestation.

The Diagnosis of Myelite.

seat, intensity, and duration of the malady. Let us then pass to the diagnosis of invelite.

On reflecting upon the numerous lesions of sensation and motion which successively present themselves during inflammation of the spinal marrow, you might think it an easy matter to form a correct diagnosis of the disease, and distinguish it from all other organic affections, but this is not the case. It is by no means easy to determine, in all cases, that the inflammation is situate in the marrow alone, or to discriminate its accompanying symptoms from certain analogous phenomena that occur in the course of other maladies. There are several circumstances which may lead you into error; let us hasten to point out the leading ones. In the first place, the osseous tissue composing bodies of the vertebree may be the part

The training of the second

an exactly opposite state whether the early symptoms depend on a true inflammation of the nervous pulp of the chord, has here been chord, or on a similar affection seated in the bony canal surrounding it.

There are cases where the phenomena of inflammation of the spinal chord are belied, if we may use the term, by other maladies of a different nature, where the functions of this part of the nervous system are notably deranged, without any trace of organic change existing after death. This is a fact altogether foreign to the normal accom- upon which you may rely with certainty. I plishment of copulation. In the female sex have seen many examples of it myself, and we also observe a certain number of facts therefore speak with more confidence than that are worthy of attention. Thus authors if my assertions were founded upon the tes-relate that acute inflammation of the spinal timony of others. I have witnessed many marrow in prognant wom in is accompanied cases in which paraplegia had existed for a by abortion. The nervous irritation gives considerable period of time, yet I was unable rise to premature contraction of the uterus, to discover any trace of organic lesion in which expels its contents before the period the spinal marrow, although I examined the of materity has arrived. In another form of myelite, where there is little reacchief, and the bones which compose the tion, but a greater tendency to collapse, the canal, with the most scrupulous attention. nterus partakes in the general impression, It may seem strange that so grave a lesion is struck with inertia, and the acconcheur of motility as paraplegia should exist for a having in vain tried to stimulate it occurraction, is forced to have recourse to artificial change of structure in the organ which remeans of delivery. However, these phe gulates voluntary movement; but such, I nomena are far from being frequent or repeat, is often the case. The same thing general. The premature expulsion of the is seen in the brain. As we advance with foctus is by no means a necessary conse-the present course you will have occasion quence of myelite, and you will see many to see many other examples, and to convince women who present the symptoms of my yourselves that in nervous diseases the true clitis in a well-marked manner, continuing cause of the functional disorder but too to bear the fruit of conception without any often escapes the researches of the most experienced anatomist. On the other hand. we have grave and extensive lesions of the brain, which declare themselves by no symptom whatever. We have cited cases of ra-From the observations which we have mollissement, of suppuration, occupying a now laid before you, you may perceive what considerable portion of the nervous suba variety of symptoms accompany the de-stance, and yet the phenomena of sensation velopment and march of inflammation of and motion were absolutely unaffected. These the spinal marrow, according to the nature, cases deserve to be compared and contrasted with the former; they show the immense difficulties that surround us in every step we take in the study of nervous disorders, and point out the necessity of observing with minute care the most trivial points, in the hope of one day arriving at the solution of questions which at present are beyond our comprehension.

In numerous cases of myelite the symptoms are so equivocal, so slightly marked, as to escape our notice altogether. In many other cases we have phenomena, which, however grave, we cannot attribute to any permanent organic change of structure. we have seen an hysterical female who remained paraplegic for several days, and then suddenly recovered the use of her lower extremities. In other cases the patient becomes blind, or has an obstinate contracand yet it may be impossible to up tion of one or more limbs, and yet these ion externally. Here, then, symptoms will disappear more suddenly greatest attention, and no than they were produced. Again, look at the ball, to determine the paralysis that sometimes accompanies

poisoning by lead, or what is called "co-| Mesers. GRIFFIR, TEALE posenting by lead, or what is called the lica pictonum." Here certainly we have no realize the part, and English to gene-injury of the spinal marrow. In these, and ralize the part, with the observed, many other cases, the lesion, whatever it and reduce them to certain principles. Let many other cases, the lesion, whatever it may be, escapes discovery; it is in vain that you will seek to explain the functional derangement by an organic change. Unfortunate is he who obstinately persists in such a path. Truths that are familiar to others will escape his notice, or be rejected without examination; the search after a chimera will distract him from more solid oursuits: he will remain for ever at the portal of science; he may knock, but will never enter.

Dr. Esquinor relates a case in which the lower extremities were completely paralyzed during life, and what do you think he found on examination of the body? He found two cancerous masses occupying each anterior extremity of the cerebral hemisphere. Here, certainly, according to the received ideas, the lesion should have occupied some portion of the spinal marrow. This is a remarkable case; we find the brain usurping. as it were, the functions of the chord, and giving rise to a lesion of movement which is especially connected with diseases of this latter organ.

Another observation, equally worthy of attention, was published a short time ago in the bulletins of the Anatomical Society. Here the patient also suffered from paraplegia; the lower extremities were paralyof the disease was naturally sought for in the spinal marrow; but the nervous substance was every where perfectly healthy. It was observed, in opening the body of the patient, that the bones were remarkably friable, and this led to further researches, which revealed the true seat of the disorder. The heads of both thigh-bones were completely destroyed, and hence the pseudoparalysis, as we must call it, depended not upon a want of nervous influence, but on the simple circumstance that the limb was incapable of being moved, because the upper part would not stir. We merely notice this case to show, how necessary it is in medicine to observe everything with the strictest accuracy; for although pathological anstomy may not give the key to all the functional derangements that present themselves in the course of disease, yet we should never neglect to pursue it with ardoor, and scrupulously examine every circumstance that may tend to throw light on their nature and causes.

Simulations of Myelite.

In speaking of the diagnosis of myelite, we mentioned that certain affections simulate in a very close manner diseases of the spinal chord: it is only within the last few years that this part of the subject has been studied in a regular manner, particularly in England and Germany, where 14, of Run's Magazin for 1

BEL, HINus enter into some details upon the subject, which is not without interest, especially as you will not find it the standard upon in any of the works in your hands; indeed the subject is one new to myself, and I am indebted for my information to the analysis of the works of Messrs, GRIFFIN and Ens, published by the Gazette Medicale. If you wish to refer to these, you will find the annlysis of Mr. Grippin's work in No. 18 of the journal for 1835. The notice of Mr. Ess's was published a very short time ago in No. 46 of the same journal.* The gentlemen whose names we have just quoted, describe an

" Irritation" of the Spinal Marrow,

whose principal characteristic is to produce a symptomatic irritation in some other part or organ of the body. It is not inflammation, but a disease sai generis; in a word, what we call "irritation;" and leaves no trace of organic change after death. Let us see how they establish the existence of this malady. Suppose the patient is affected with palpitations of the heart, weight and construction about the pericardial region; a feeling of suffocation, frequent pausea, fainting, Ac.; they exercise pressure along the tic. On examination after death, the seat spine, and when they come to that portion of it which corresponds to the irritated part of the spinal marrow, they pretend that all the symptoms are aggravated by the pressure. When the stomach is the organ chiefly affected, pressure over the spine increases the nau-ca, the vomiting, the pyrosis, the pain in the hypochondriac region, and other signs of gastric irritation. If it be the head, the exphalalgia and nervous pains are considerably augmented. Whenever phenomena of this kind are witnessed, that is to say, whenever according to Dr. Ess. "a sensibility of a greater or less portion of the spinal marrow to external pressure, coincides with a corresponding pain in some other organ, which we can augment at will by that pressure, the disease consists in an irritation of the spinal marrow, whose scat is indicated by the tenderness of the rachis." According to Mr. GRIFFIN, it is not necessary that any temlerness should exist over the region of the spine. If pressure excite pain in the distant organ, the point of the spine at which this phenomenon commences, is the part affected, although it may not itself be the scat of any lesion of sensibility.

All this may be very true, but it remained to be verified by further observation. must confess that to me the idea of pr

J. C. HARRIST STATE OF THE STAT

^{*} Dr. Enu's paper to :

ste upon a sin creasing, at will, headsche, or other part of the body, especially when the spinsl marrow does not exhibit any symptom of disease, — all this, I say appears to me to par-take a little of romance. However, we must we said before, all this remains completely examine the subject more carefully before we can judge. In medicine, facts are not to he rejected because they may seem a little extraordinary.

The observations of the same physicians tend to establish that a great number of neuralgic affections, attributed commonly to the fifth pair of nerves, really depend on the to. This they establish in the way just al- resume the luded to. The patient has, perhaps, a pain in the superorbital region, in the jaw, &c.; pressure over the upper part of the cervical vertebra invariably augments this pain, if connected with spinal irritation; hence the the spinal marrow, and not in the branches The respiration is often embarrassed; in some cases the patient has accesses of suffocation, always increased by pressure on tribute in a great many cases to irritation having been implicated during the course of of the spinal marrow, and we can admit it of the disease. ourselves amongst the causes.

Again, Messrs. GRIFFIS and Exs speak of a peculiar pain in the region of the sterdays ago I had occasion to see a case that toms of reaction, you must take blood from one would have been inclined to arrange the arm; if the fever he mild, you may conunder this class. A gentleman called upon tent yourselves with an application of leeches me at my house for advice; the only symptoms at my house for advice; the only symptoms in presented were, a well marked according to circumstances. In cases of sense of tenderness in the skin covering the chronic myelite, a good deal of reliance may sternum, together with an habitual dyspnuca. De placed on cutaneous revulsives, particu-I examined the pulmonary and circulating larly on moxe, or the cantery. Some phyammed the philosonary and circulating larly on moxe, or the cantery. Some payme with care, and could discover not act on the skin; while others direct their attention chiefly to the intestinal canal, and the large passed my flugers pressing upon passed my flugers, pressing upon the patient's babit, or the object they may have in view. tenight be modiparted ; how-

of the spine in- ever, the case I now mention is merely a negative fact, and proves nothing against the facts distant established by Mesers. Ens and GRIPPIN. In the abdomen this irritation may simulate several maladies, such as vomiting, colic, to be verified before we can admit it into the science: moreover, it is only an extension of the facts which we have noticed when speaking of myelite and its symptoms. But it is probable that some forms of asthma may depend upon inflammation of the spinal marrow; yet there is still a vast distance between the two ideas. So much for the irritation of the spinal marrow now alluded doctrine of "spinal irritation." Let us now

History of Myelite.

The duration of this disease is very variable; sometimes it may terminate in a few true seat of the disease is to be sought in days; at other times it is prolonged for a considerable period, and may last for eight of the nerve, as we have been accustomed or ten years. It may terminate in a cure; to think. In the chest, this affection may but whenever inflammation of the spinal give lice to symptoms which simulate marrow is well marked, the disease is grave, phthisis. A cough more or less obstinate is and the prognosis unfavourable. In cases the most common symptom of irritation of where death results, this latter termination may arrive in a different way: 1st. By extension of the inflammation upwards towards the brain: we have already noticed the tendency of myelite to propagate itself upthe superior nerves. Many observations wards. 2nd. By extending to the respiraalso show that several pains existing about the pasietes of the chest, and mistaken for the uniation, depend on this same "spinal" the Where none of these three organs is affordated, the united that the same of these three organs is affordated. incination, depend on this same "round; affected; the patient sinks gradually; he becomes in much more trobable, and is wastes away; the exposed parts of the body phenomenon is much more probable, and is wastes away; the exposed parts of the hody consistent with what we know of the effects submitted to pressure ulcerate, and he dies of chronic myelitis. A disease of common in a state of complete exhaustion. A certain occurrence in practice, one that you will number of patients affected with acute inflammation of the spinal marrow go off in frequently meet in certain females, is near raigin of the mammae; this affection they at-

Treatment of Myelite.

Upon this point we shall be very brief. num, which is always aggravated by pres-sure over the spinous processes. Three encephalitis. When accompanied by symp-

ST. THOMAS'S HOSPITAL

CLINICAL LECTURE

ON CASES OF

DISEASES OF THE JOINTS.

Delivered in the Session 1835-6.

BY MR. TYRRELL.

LECTURE I. - DISEASES OF THE HIP-JOINT

GENTLEMEN, -I intend to-day to address to you some observations on diseases of the joints. I have under my care at present many of those cases, and as the histories of several of them have been collected, I shall briefly relate the particulars, subsequently commenting on them, in order that you may trace the progress of diseases affecting the articulations so far as you are thus afforded the opportunity of doing so. Perhaps no subject in surgery is more important. They are productive of extreme distress to those who are the subjects of them, and the surgeon cannot be too careful in investigating them, and in distinguishing the means of cure. To four cases, in particular, I shall now direct your attention.

Case 1 .- The first case is that of a patient with disease of the hip-joint. The hip is as frequently affected as any other joint, and perhaps its diseases are of more importance than the affections of any other joint. There is a man in Abraham's Ward, named Edward Carpenter, aged 56, from Bermondsey, who was admitted on the 8th of October, under my care. He stated that he had been regular in his habits, and that ten days previous to his admission, while lifting a sack of seed weighing about three bundred pounds, he experienced a sudden and severe pain in the left hip, extending to the loins, which obliged him to discontinue his work. On the following day, the pain still continuing, he obtained relief to some extent from cupping upon the buttock, according to the directions of a medical man to whom he applied. Pain in a short time was felt also in the knes, extending down the internus. Blisters were applied at this time, but without much benefit.

On admission he had a dull aching pain, principally situated at the anterior and inner part of the knee; and this pain was more articularly aggravated towards the evenpain. The left buttock was somewhat flat-tened. Pressure over the posterior part of the hip produced only triffing area. the hip produced only trifling pain. Upon Case 2.—Septime further investigation this limb appeared to aged 19, residing the rather longer than the other; this intemperate in seemed to arise chiefly from the chiefly of on the 8th of

and the same of th

slight wasting of nent of the thigh produced stone res of pain. The pain. the knee was not increased by flexion or extension of the log. The sleep was dis-turbed by the pole at night. His general health was pretty good.

I directed an occasional aperient to be given, of senna and salts, and officred a moxa, of about the size of a shilling, to be applied to the left groin, about an inch to the outer side of the femoral vessels. I further ordered that he should have a grain of the acetate of morphia, with a view to allay the pain and to procure rest, and that

he should keep his bed.

13. The report to-day was, that he had rested better at nights, and the pain of the knee somewhat diminished. The slough of the moxa, though partly, had not entirely, se-parated.—Next week the account was that he complained of pain on the inner side of the knee, extending down to the ankle. Pressure did not produce so much pain. The discharge from the mova was trifling. 1 found at this time that he had been used to a certain quantity of stimulus, and as his general powers were failing, I directed that he should have a pint of porter daily, in dition to the medicine which had been to dered.

27. The mova is discharging freely, and the pain is greatly relieved. He can move the limb without difficulty. The limb appears now to be of the same length as the other; sleeps well at night; the appetite and general secretions are good; howels open.

30. He is not quite so well. The pain in the knee has become more severe. He has had but little rest at night, and the moxa has ceased to discharge. Probably that, and a change taking place in the weather just at this time, would account for the ag-

gravation of symptoms.

November 3. Pain in the knee severe, particularly on the inner side. Pain in the bip, upon pressure on the anterior part, but not much when pressed posteriorly. I directed another moxa to be applied, in consequence of the aggravation of the symptoms, to be placed a little lower than, and anterior to, the first, which was a little more inner side of the leg, as far as the malleolus distant from the joint than I could have wished.

11. Up to this period he has been progressively recovering. The pain in the knee is but triffing, and pressure on the hip produces no pain. There is slight numbered down the inner side of the leg, but only

about five months and the state of the first trace, which obliged him to discontinue his labour for a time. His pain was relieved by rest, so as to enable him to resume his work; but he had not entirely got rid of it. In the course of the second day after he had returned to his work, the pain came on more Severely in the knee, and he then applied for medical aid, and had blisters placed on the knee, but without any beneficial effect. On his admission, he complained of an aching pain on the anterior and inner part of the knee. I examined the hip-joint, and found that pressure on the groin produced pain; sudden abduction of the limb also produced pain. There was no appearance of the limb being longer than the other, but there was a little flattening of the buttock. As his tongue was not clean and his rest was disturbed, I gave him a small opium; and the symptoms being trifling; I ordered an emplastrum lytta to be placed on the groin.

14. The pain in the knee is somewhat relieved; he rests well at night; complains of headache. He was now ordered to repent the blister, as the former had closed. I had only directed that it should be dressed with simple ointment, or a positice. A week afterwards he had no pain, except on pressure being made over the anterior part of the hip-joint. But six days afterwards there was a relapse, and he complained of pain in the knee, particularly on the outer side of that joint. Pressure over the anterior surface of the hip-joint gave rise to pain. Any movement of the hip whatever, was attended with uncasiness. I now directed a moza to be applied to the groin. At this time there was no indication of any disturbance of the general health. Still I have no doubt that that disturbance of the general health had commenced which was afterwards observed.

Nov. 3. Pressure increases the pain. He says he has a general numbress of the foot. having, as he states, caught cold.

- than usual, and he has a cough. He was now directed merely to take a little efferveseing mixture.
- 5. Passed a bad night, and complains of Sas. to be applied to the

at he has had !

but little rest; the soreness of the epigustrium continues, but the skin is moist; pulse a little softer, and the tongue getting clean. In conrequence of the cough and pain, I directed him to have some of the Dover's Powder, and to take a drachm of the spiritus ætheris nitrici, a drachm of the sirup of poppies, and ten drachms of the camphor mixture, -a medicine calculated to act in some degree as a dinretic, and also to keep the secretions of the skin and bowels a little excited. Next morning it was found that he had passed a better night, but he still complained of pain in the knee, which was in-creased upon any motion of the hip. Pressure over the anterior and inner part occasioned more pain. Twenty minims of ipe-cacnanha Wine were now directed to be added to each dose of the medicine.

29. The rest is much disturbed by the pain in the knee, and the cough is very distressquantity of calonicl with half a grain of ing. Yesterday there was a good deal of pain in the left hypogastric region. There is pain in the epigastrium. The breathing is rather hurried; pulse 84, and very compressible; skin cool, and bowels open. I directed that he should take a small quantity of mercurial medicine, and that there should be a blister applied over the left hypochondrium. This is the case as it presents itself at present; the local affection is aggravated, and the case is a good one as illustrative of points which I shall presently note.

Case 3.—The third case is one of chronic inflammation of the fibrous capsule of the hip-joint; it is the case of Thomas Lachev, aged 11. residing in the city, admitted October 7th, into Abraham's Ward. He states that about four months ago he experienced a sudden pain in the left knee, but from no particular cause of which he was aware, and that it always increased towards evening, and after taking exercise. For this he was admitted into St. Bartholomew's Hospital, when he had two issues placed upon the hip, just over the trochanter major. It is now quite clear that he is labouring Those issues having relieved the pain, under the full effect of febrile irritation, he was discharged as cured. In a short time, however, the pain returned with increased violence, and in about a week af-4. He has still more general symptoms of terwards he was admitted into this hosfever; severe pain in the head; skin hot, pital complaining of pain of the anterior tongue furred, howels open, pulse quicker part of the hip upon pressure over the trochanter major. Any motion of the joint increased the pain. His rest at night was disturbed, but his general health was pretty good. From the severity of the disease and reness about the epigastrium. He its duration, I directed the maxa to be emtook a dose of rhubarb and calomel, ployed; and from the feebleness of the is likewise ordered to take the house general powers, which were rather below the former did not act. A blis- par, I ordered that he should have some porter in addition to the ordinary dies of the house. The affected limb was longer than the other.

13. Very much relieved. The affected

limb is still a little longer than the opposite ! Pressure produces slight pain.

21. The lengthening of the limb is but fibrous chi much better.

sented as cured.

was admitted into Queen's Ward on Sepand the blisters were kept open, but she derived no advantage from them. Upon her admission she complained of pain of the anterior and inner part of the knee. The pain in the hip was more severe than it had been, and was increased by pressure over the trochanter major. Her general health was much deranged. I ordered that a moxa should be applied over the trochanter major. which gave but little relief. I then directed that a second moxa should be applied to the groin, which relieved her considerably,

Oct. 4. There is less pain; she sleeps better at night; perspires towards morning; the left limb is nearly an inch longer than the right; the buttock on the affected side is flattened, and the general health is impaired.

13. Much improved. To take the decoction of sarsaparilla twice a day.

20. Little alteration.

24. Pain a little greater; passed rather a bad night; the limb apparently is somewhat smaller than it was upon her admission.

28 Pain rather severe, but it does not disturb her rest; there is evidence of additional weakness, from copious perspirations; the discharge from the moxa has ceased.

Nov. 5. Rests tolerably well at night, and the moxa is nearly healed.

11. Pain in the knee yesterday, and increased by the slightest motion of the hipjoint. No pain in the knee to day. Can bear pressure better on the posterior part of the hip, but when pressure is applied autoriorly, it produces some pain. I ordered that a second moza should be applied.

Disgnosis, Pathology, and Trentment. - and the sound parts, from the loins to.

These cases all have reference to diseases of the knees, you would see the design the same articulation, and three of them the butsock on the ad present very nearly the same symptoms. In division between the the first case we find that inflammation was being lost. produced in the hip-joint by a riolent sinsin. obliquity of 2

we know that e attached to the oint, their tend trifling; the pain has subsided, and he is being connected with the capsule itself; so that by violent exercise, such as raising a 29. I found he could walk without pain; heavy weight, there might be laceration of there was now no lengthening of the limb; the tendons of the muscles, and of the the left buttock had nearly regained its fibrous capsule itself - a very probable cause natural size, and he was on this day pre- of such inflammation. We find the pain extending to the loins, probably from some Case 4.—The next case is one also of slight strain of those parts, and not as being chronic inflammation of the fibrous capsule; connected with injury to the hip. After in-of the hip-joint. Sophia North, aged 26, a flammatory action had been set up, and simbousemaid, living at Farnham, in Surrey, ple means had failed to relieve the patient, was admitted into Queen's Ward on Sep-latin at the anterior and inner part of the months ago she received a blow on the left hip, from a fall. The part in a short time became swollen, and she experienced con-siderable pain in the joint, and also at the thing, and pressure produces an aggravation that is a point of importance. The fibrous siderable pain in the joint, and also at the that is a point of importance. The fibrous anterior and inner side of the knee. The capsule of the hip-joint is very extenpain was of a dull character, and disturbed sive, but not so extensive as the mu-her rest. Leeches and blisters were applied, cous or the serious membranes. We know that in inflammation of the peritoneum, the pericardium, the pericranium, and so forth, inflammation extends very quickly along them. But if you take the capsular ligament of the joints, you will often find organic thickening taking place at one part of the ligament, while the other parts remain unaffected; and the pain of the anterior part of the joint denotes that the morbid affection is confined to that particular part. This is indicated by the sympathetic pain which affects the knee; and it is upon the anterior and inner part of the knee that the patient feels the pain. You can account for that by recollecting the armomical structure, and the distribution of perves to those parts, -the division of the anterior crural nerve, and the saphenus major and minor, one of which is continued to the foot, and the other is lost above the knee, on the inner and anterior side. It is of much importance to attend to this, because the closer in contact with the affected part that the remedies can be applied, the more likely are they to be of service. Frequently you will find that there has been an indiscriminate use of applications, or abstraction of blood, over the posterior part of the hipjoint. You generally find that blisters or moxæ are applied there, which are not likely to do one wixth of the degree of good that they will do if applied to the groin, near the sent of the disease. It becomes, therefore, of much importance to ascertain accurately , the symptoms, and whence they proceed. Next, there is flattening of the affected

buttock. This is the case in all the patient Taking a posterior view of the diffect

lengthening the affected limb, the Library aid, admit of a difference in the rists of the ilium, the state of the affected side, and for that purpose he is upon the application of very slight force, continually throwing the weight of his body. We have thus an explanation of the period of the p

you would find that you could draw the head of the femur from the acetabulum, to the extent of about an inch, or an inch and a half. The head of the femur, then, is kept against the acetabulum, in the healthy state, by the influence of the surrounding muscles. All the muscles which pass over the hip-joint have a greater or less influence of this kind, but more especially those which are immey connected with the joint. Accordingly had that if, with forcible means, we pull new logs, the healthy femur is still kept the acetabulum, by the tension and muscles; whereas the sepad bone from the aceta-

immediate seat of disease. The muscles amongst other modes of examination, tries of the leg become affected, so that its power the length of the two limbs. He is surprised a much diminished. The condition of the to find a difference of an inch or more in glutei muscles gives rise to this flattening of the length of the two; but then he fields he buttock, when the patient is in an erect that there is free motion of the joint of the position, occasioned by the want of con- affected limb, and not a great deal of unraction that results from the adhesion of easiness created by the movements. Now if he integuments over the affected part. It he was not aware of what I have just mens, therefore, from the loss of the natural tioned, he might pursue his inquiries to power of the muscles to contract, that you satisfy himself whether there was not really have that appearance. On the sound side a dislocation; but recollecting what I have the proper muscular contraction takes place | stated, he is aware that this occurs from the The affected limb is frequently said to be result of the injury,—that the muscles lose longer than the other; but the fact is, that their contracting power for a time, and, as a person who is the subject of an affection a consequence, allow of the separation of of the hip is always endeavouring to relieve the head of the femur from the acetabulum.

We have thus an explanation of the pain obliquely upon the sound side. The one of the knee, of the flattening of the buttock, crista ilei may be thrown an inch or an and of the apparent lengthening of the inch and a half higher than the other; and limb. We may also explain the diminished even if you put the patient into bed, in the size of the affected limb. In the case of such recembent position, you will still find a an injury as I have alluded to, we know slight degree of difference in the length of very well that the larger muscles, those the two limbs. But there is another very important point when that is the case, there will be an apto be noticed, which gives use to the apparate parent difference in the circumference of rent lengthening of the affected limb, even the two limbs, because all muscular fibres in when the patient is recumbent; and that is a healthy condition have constantly a tenderous the formation of the hip joint. The capsular ligament of the joint, which comes it through, as in amputation, and you will from the acetabulum, embraces, as you are immediately observe that there is a strong aware, the head and neck of the thigh-bone, disposition in the fibres to contract. By symand owing to its construction this joint ad pathetic influence, therefore, the muscles of mits of motion in every direction,—abduc- an injured limb become flaccid, and lose tion, adduction, flexion, extension, and I may their tendency to contract, therefore the disay, every intermediate metion. We know ameter of such muscles will be different from that the capsule is longer than is absolutely that of sound muscles. There may be the necessary to retain the articular surfaces of same extent of muscle, but still, if you meathe one bone in contact with the other; so sure them, you will find that there is a difthat if you were to strip off the whole of ference in the diameters. However, after a the materials from the capsular ligamout, time, or from disease, the muscles actually diminish in size; there is a diminution of the muscular fibres. This becomes very apparent in a case where the disease goes on to ulceration, or even to a more extended

stage of disease.
We have seen in each of these cases, that the pain is increased in the knee on motion of the hip-joint, and not increased at all on motion of the knee-joint. These are important points for you to keep in mind. Again, you find, in the second case, that the patient described himself as having ex-perienced an injury of the knee, and he but; whereas the sepa-bone from the accta-played, as having been directed to the knee-the difference in the alone,—blisters and leaches,—but they did n; and that may, as not afford relief. Now a surgeon should, in

such a case, immediately direct his attention in the retirials of the to the hip joint, where he would find the in as we have trid to the hip-joint, where he would find the tar as we have the search the form true source of the disease. But the point is of the disease. But the point is of the disease. The disease is that the knee, and resulting from disease in that the currentling, point out the situation of the joint, it will necessarily be increased by modificate and the particular tenture affected. tion of that particular part of the limb. If, therefore, we find, upon putting the finger over the ligaments of the knee, or on pressing the synovial membrane, that the pain is not increased; or, again, if we flex or extend the leg, which may easily be done withthe motion does not increase the pain, then we must immediately look to the hip, knowing that sympathetic pain of the knee is almost the only symptom which indicates in the case I now allude to. Examination of the knee did not enable me to detect what I have to say by-and-by.

The pain in these cases being aggravated influence the disease. joint. The same is observable in inflammation of the pericardium, and the same in find blistering the chest do good. Againflammation of all the fibrous tissues, blistering the abdonen in peritonisis, The patient is perhaps well in the day, but towards morning or evening the pain is applying counter-irritation to distant a greatly aggravated. It is a kind of inter-has a good effect as regards the distant mitting pain, of a dull, aching, but not land of the disease, wherever it is a land of the disease, wherever it is a land of the disease. cinating or lacorating character; quite sol- ways better, wherever you ficient, however, to disturb the rest, and se counter-irritant as a produce exhaustion in that way. Such, then, tease as possible.

ent symptoms

We way know, from Now as re in these instances. the observation of circumstances which I shall relate in connection with other cases, that the disease has not extended to the synovial membranes, nor to the cartilages; out moving the hip-joint, we discover that It has not extended so as to produce ulceration or disorganization of those parts, but consists simply of slow inflammation of the fibrous tissues, therefore the remedies to be employed are not of a severe kind, conincipient disease of the hip-joint. So it was stitutionally, nor very much so locally. In the first place we ought to ascertain whether the disease is connected with, or dedisease of the knee; I therefore proceeded pendent upon, any peculiar condition of the to an examination of the hip, and a super-system. We find in most of the cases be-ficial examination of that joint enabled me forc us, that the general health is good; at once to ascertain the disease was there, there is only one case out of the four related, Again, the situation of the pain affecting in which the state of the general system in the knee is not that which is the result of fluenced the disease. In two of the others disease of the knee-joint itself. The pain the patients became a little exhausted, perwhich has been observed in most of these haps from confinement to bed, and the discases, has been of the anterior and inner charges from the moxic. I was induced part of the articulation; and we find that from this circumstance to give them a quantitate denotes the situation of the disease to tity of such stimuli as they had been used be of the capsule of the hip-joint, for each loo. But as to the loved applications, or mapatient complained of pain in the kneet agreement, the first, and perhaps, the most impact of the control of the cont when pressure was made about an iach to portant object is, that the parients should be the outer side of the semoral artery, over the kept at rest. They will find out the position situation of the capsule; but on all parts which is most comfortable for themselves, posterior to the trochanter major and tube-rosity of the ischium, when pressure is made, some support under the ham; a mail pil-you find they suffer but little. When the low, for instance, between the ham and the pain in the knee results from disease of the bed, and keeping the limb flexed. They knee itself, you will detect that cause by will themselves move the pillow as they pressure upon the knee, or motion of the move the position of the limb. It is not knee-joint, as it will then arise from fibrous accessary to confine or restrain the motion disease of disease of the synovial menchane; of the joint entirely. Murely moving the you will appreciate this more distinctly from limb in bed may be sufficient for the confert of the patient, and not likely injuriously to We find that the at night, is indicative of disease affecting the best mode of relieving the inflammation of fibrous tissue. You see this very clearly in the fibrous tissue, which is generally a sub-inflammation of the sclerotic coat of the eye. You can detect inflammation of this texture irritation; and we know that counter-irrivery readily, seeing that the surrounding tation to a distant part from that which is structures are free from inflammatory ac- affected, and to which you can make no imtion, it being alone the seat of disease: and mediate application, is often productive of when thus singly affected, we have symp-good. For instance, we find blistering the toms, such as I have mentioned, indicative of head or neck in diseases of the brain, pro-inflammation of the fibrous capsule of the ductive of headfell results. So in pagemonia, or inflammation of the pleura, we even in enteritis, is advantageous.

are of inflammating the brain, or of the make a greater call upon the constitution nembranes of the the state of the state neck. Again, if we apply a blister to the in such cases a repetition of blisters is in-interior part of the chest, where the parietes finitely better than keeping one perpetually are thin, we effect more good than by ap open. If it be a disease that will not yield dying it posteriorly. There the parts are to a blister, or a repetition of blisters, it is ery thick.

I have directed your attention to the situation of the pain in these cases. If the min be in the anterior part of the knee, you will find the disease to be at the anterior part of the capsule of the hip joint. If it be n the ham, the patient will experience more min behind the trochanter; and in such a case, instead of employing the moxe, as we save done in all these cases, in the groin, I should apply them on the posterior part, between the trochanter and the tuberosity if the ischium, over the posterior surface of the capsule of the hip.

When the symptoms are very slight, I have often found a blister on the surface combined with attention to the secretions, suppose it has proceeded to some extent in the library tissue, it is better to resort to the more severe remedy of the move. The we have thought it necessary to procure move is the description of counter-irritation rest by artificial means, by morphia or which we now usually employ, and a very opinin. The quiet produced in that way is more severe remody of the mova. The good mode of activing counter-irritation it is tayourable to the restoration of the natural I have known patients who have bad the state; and your medicines or local remedies move applied, and have had issues formed have a much better opportunity of doing have given the preference to the moxa, though one might be disposed in the first instance to say that they would rather object to the moxa, and be content with the other. Still, any of these will have the same beneficial effect.

It is not my practice here, and this is the result of experience, to keep the moxa open | we find that the cure has been interrupted by the use of any extraneous matter, so as to j by general disturbance. The patient, as he form what is usually denominated an issue; nor to keep a blister open. The cases I have related are, three of them those of adults, and one the case of a boy; but this is a very common disease at an early period of life, more common than at a more advanced age. Children at the age of two or three years, immediately on beginning to make progression up to the age of puberty, show a disposition to the setting up of such disease. In such children it is not an ancommon practice to employ a perpetual blister, as it boy is not strong, he is rather of a scrofulous called. A blister is applied, the cuticle is habit, and the general powers have been made and then an ointment, composed of lessened by this attack on the general

patient most amazingly. I have found that in such cases a repetition of blisters is inbetter to employ the moxa, as the irritation of the mora is not attended with pain, nor does it make the same call on nature that a large blister does, which is kept continually open.

The same reason I have against the continuation of an open blister, is applicable to the continuation of an issue; for if in the case of an issue you use beads, or beans, or peas, there is a great drain on the constitution, a great irritation kept up, and, in fact, an aggravation of the disease. In the ordinary cases, such as I have detailed to you to day, the use of the simple moxa. allowed to heal, and then applying it again, if need be, is much better than introducing any extraneous matter for the purpose of produce all the effects to be wished for keeping it continually open. It throws off a slough, and yields a certain discharge. and rest. If the disease, however, has been which is as much as these cases require, of longer duration, and you have reason to imbenendent of attention to the accretions. and any other necessary local treatment.

In one or two of the cases we have had by nitric acid and by potassa fusa, who good if the patient he kept quiet, than they have where the rest is disturbed, which it

usually is from his sufferings.

The treatment, so far as regards these cases, has been beneficial; one case has been presented cured, and two of the others may be considered as convalescent

In one of the cases which I read to you, states, caught cold, and has got rather a severe febrile disease upon him. You must suppose that sometimes local disease becomes aggravated during the prevalence of fever, which is not connected with it. This is the case here. The fever is not sympathetic. but it has been induced by cold, and therefore induced by a cause which is entirely independent of the disease for which the patient came in. The fever, however, has had its influence on the local disease; the magintment and anguentum lytte, is system; the consequence is, that the local it, morning, noon, and night, for affection has become aggravated, and will of exciting a discharge. A dis- | continue so till we have subdued the febrile in that way, but greatly at symptoms, and rallied the general powers, by The irritation appropriate remedies. At present he is un-id, is such as to der the influence of such remedies, marely, as are calculated to check the influence of rynz, with great the fever; he is not in a situation to be tonics, but as soon as he is they will be given, and you will find the local symptoms will again be subdued after the fever has been overcome, and he is restored to better

I am afraid the time will not allow me at present to go into the other cases, but they will be more valuable for observation hereafter, as they will then show more of the process of cure.

ST. THOMAS'S HOSPITAL

CLINICAL LECTURE

ON A CASE OF

CHRONIC GASTRITIS.

Delivered in the Session 1835-36.

By DR. ROOTS.

speak, gentlemen, is a case of chronic or of spirits, chiefly of rum, but that he had bowels open, the motions dark. been generally healthy up to about three 5. No hiscorp since the evening of the weeks before his coming into the hospital, 3rd, but he still complains of a burning sensemen, after a long walk, and getting into a sation extending up the throat, and he yet cording to his account, some aperient me isharp and hard. dicine, and under this plan of treatment; 6. I saw him again to day, and directed he appeared, or at least the leg appeared, twenty-four leaches to the pit of the stoto have rapidly recovered. As the leg got much, and ten grains of the carbonate of better he began to complain of vickness, soda to be added to each doze of his medimore especially after taking food, which cine, - the bydrocyanic acid and mucilage. sickness was attended with some degree of As I did not think his howels were suffi-tenderness shout the epigastrium, and a sen-ciently opened, and as I did not like to order sation of burning heat at the back of the aperient medicine, I directed that a common threat and fascos. These symptoms he injection of gruel should be thrown into the found were very much increased by taking bowls, night and morning.

2. Much better since the lecches were the symptoms had gradually increased in intensity up to the time of his admission, the sensation of heat has nearly subsided, and then he complained of severe paroxyms of blocup, occurring every five or ten mission, attended with pain in the cyligas; the tongue have disappeared, and the faint and occasionally by the circulon of a lors are cicatricine. His bowls have the same of large are cicatricine. a, and occasionally by the ejection of a cors are electricing. His bounds clear field, of a bitter and saline taste. He opened by injections avery a o complained of considerable burning motions were free, sation along the whole course of the 9, Still improve ogus up to the back part of the plas- some tenders

49

ness after talling food, frequent ations, and son inle was taken am detailing it to you, by the clinical clerk, who states that there was some degree of handernoss over the region of the stomach. His appetite washing the slept badly, on account of the bicup, which disturbed him count of the bicup. very much during the night; prise 94, rather sharp and hard; his bowels were usually moved once a day; the tongue was morbidly red over the whole surface, having on some parts aphthous points, and in others small, irregular, and irritable ulcers.

CATION OF

Now, when I myself examined him, found that there was not only considerable tenderness on pressure at the epigastrium, but increase of heat there, and the man was considerably smariated. He was directed, therefore, to be bled to the amount of ten cances, to take two minims of hydrocyanic acid, and half an ounce of mucilage, in half an ounce of plain water, every four hours. The diet to consist of arrow-root and water, and sago and water.

3. The report of this day states that the blood was much loffed and cupped; pain The first case, of which I shall now and heat in the stomach somewhat diminished, as was also the hiccup; still suffisub-acute gastritis occurring in Luke's Ward, cient hiccup, however, to prevent much in the person of Henry Free, who was adsleep. Still, also, pain at the epigastrium, mitted on the 1st of October. He was though it was considerably diminished. thirty years of age, and by trade a hatter. Aphtha and ulvers of the tongue less criticand he stated that he had drunk very freely. ble: pulse now minety, and softer, the

state of perspiration, he was seized with has seid eractation after food. Still tendershivering, followed by heat and sweating, ness, also, over the epigastrium; tongue not with pain, swelling, heat, and redness of the | quite so red; the small aphthous spots have right leg. This swelling of the leg it ap nearly disappeared, and the electations are pears was treated by incisions and fomen looking more healthy. Bowels generally tations. He took at the same time, ac-; open every day, pulse 94 again, and rather

9. Mill improvi

I I thought, at

a be applied. 10. The leed ness considerably. There is no hiccup, no uneasiness after food, and no acid eracta-tion; tongue much more healthy, and the ulcers cicatrinings better have been opened attention to the symptoms will enable you twice very copionaly; the two motions con-tained a little blood, the result, apparently, of some little irritation occasioned by the injection pipe. Pulse 96, rather small, but still accompanied by some degree of sharpthe little bleeding, and as his bowels were minute ulcers, or in one of considerable sufficiently open, to mail the injection.

12. The affection of the stomach much relieved; appetite much better; no tenderness over the epigastrium, and no further ing parts thicken, and, ultimately, perhaps unessiness after taking food. But at this the ulceration extends through the submutime the left ankle became swollen and paintime the left ankle became swollen and painful, and somewhat hot and red. A dozen
the serous tissue; and if inflammatory action
and a half of leeches were consequently have not existed to a sufficient degree to orcasional dose of castor oil. There is no of the abdomen generally. 20th he was nearly quite well, but as there sation. secured to be same degree of debility about. The ordinary symptoms of chronic inflam-him, I directed two grains of sulphate of mation of the stomach are, a feeling of heat 23rd he was ordered some beef tea.

maining

ward case. The man was clearly suffering racter, but the inflammatory action may be under chronic or sub-acute inflammation of the mucous tissue of the stomach. There accompanied by increase of heat not sensible are two forms of the disease, the acute and to the touch.

In the early stage, the symptoms are very fatal. The other was the case of a poor sia, functional derangement of the stor

se of heat, I disseised cur in the acute form, we frequently meet with the affection in the sub-acute or chronic form; and the disease advances so slowly, that it may be readily overlooked, and only discovered when the mischief is beyond relief. Generally speaking, however, strict to detect it when it does exist.

The ordinary termination of the chronic form is generally in ulceration, or thickening, or softening, of the mucous and sub-mucous tissues. The ulceration may conness. He was directed in consequence of sist either in a considerable number of size, affecting either the mucous tissue or the follicular glands of the stomach. As the process of ulceration goes on, the surroundapplied there, and afterwards the liquor excite adhesion to some neighbouring organ, plumbi subacetatis diintus was constantly the ulceration may extend through the peemployed, with directions that he should ritoneal coat, and allow extravasation of take in the morning half an ounce of castor the contents of the stomach into the abdooil, and on the 13th the swelling, and tender- minal cavity. Many such instances of the ness, and heat, had in a great measure sub- progress of ulceration, from the chronic insided. On the 16th he was still more im- flammation, have occurred, without preproved, and he was directed to take his me-vious suspicion that such a condition of the dirine only three times a day. This on the stomach existed. Such extravasation would 18th was reduced to twice a day, with an set up acute inflammation of the peritoneum operational dose of castor oil. There is no of the abdomen generally. Sometimes, uneasiness of atomach, no heat of throat, no however, nature prevents this by adhesion sickness, no acid cructation after food; the to the liver, the spleen, or sometimes the appetite much improved; getting quite well; colon; still of course the disease will ultipulse 85, rather small, but quick. On the matchy prove fatal, though without extrava-

quinitie to be taken twice a day. On the extending from the stomach along the esophagus to the pharynx; thirst, diminished 27. Being now perfectly well, he was pre- appetite, nauses, and vomiting. Commonsented, with, I should say, no disease re-ly, also, I believe, you will find tenderness on pressure at the epigastrium, sometimes, Now this was a very plain straight-for- as in the case I have read, of a severe cha-

the sub-acute, or chronic. The scute form is not. I believe, very frequently met with. I often only those which are common to dyhave only seen two examples of pure acute spepsia. I do not, of course, admit the existinflammation of the mucous tissue of the ence of such a disease of itself as dyapepsia, stomach since I have been in practice. One difficult direction. In point of fact, that must of these occurred in a young lady the near be dependent upon some cause, or a variety relative of a medical gentleman at Camden- of causes, often, in different cases; but we town. The disease ran its course and proved understand commonly by the term dyspepration. The other was the case of a poor sia, functional terangement of the season man, in Somers-town to whom I was called a manner of the poor stated of English cholers some by any change in the tissues. Let us see, because the state of English cholers some by any change in the tissues. Let us see, because the state of English cholers some by any change in the tissues. Let us see, by any change in the tissues. achlity, eructations, flatulence, and oppresdoes not often or- sion after taking food, frequently with some

degree of pain in the stomach. These are ing generally and local common to chronic inflammation of the stomach, in which, very often, the patient complains only of pain after taking food.— her that pain, too, frequently ceasing entirely as digestion is completed, the patient in many instances saying to you, "I am quite well; I only know that I am hungry; I take my food; I only know that I am ill for such a pain is much more prominent, extending often to the back from the stomach. Again, bowever, I would impress on you, that actual pain, unless you use pressure, is frequently denied, though patients will confess that about the stomach; and occasionally you will find all these symptoms attended by and anxious, the vomiting more frequent, pulse at the same time is generally small, tharp, and occasionally accompanied by some degree of hardness. The tongue also most commonly exhibits some evidence of the disease. I say most commonly, because the tongue is not always a faithful indicator of inflammation of the mucous membrane of the stomach, though generally it is red nearly all over,-very often white at the back and centre, but morbidly red at the point and the edges, -sometimes covered by small aphthæ, and, as in the case related, by minute ulcerations also. But I again urge upon you, that you must not, because the tongue appears natural or white, conclude not understand me to coincide with some that gastritis does not exist. I have seen several examples of well-marked gastritis, where there was nothing in the tongue to indicate that fact. Generally, however, it is a tolerably good guide.

As to the causes of chronic gastritis, abuse of diet, eating imperfectly-digestible substances, the abuse of spirituous liquors, and protracted errors in diet, are all likely to be exciting causes. Suddenly drinking a large quantity of cold fluid, the surface of the body, perhaps, being much heated, or, more likely, the nervous system being much exhausted, has been not an unfrequent cause of inflammation of the stomach.

With respect to your diagnosis, it is probable that you will understand all that I wish you to comprehend on this subject, by going at once to the treatment. In inflammation of an organ so essential to life, antiphlogistic measures must invariably be employed, both in the acute and in the sub-acute or chronic form of the disease. Bleed-face. The aphthe about

measures of t there is ary importance, much activity in the Never . ke blood from the arm; let nothing prevent your doing that, unless you are stimled that the discase hus been preduced to such an extent that the powers of the preduced not justify that incasure. Depend on it also, that you time after taking food." In other cases the will be much more likely (I speak now of the sub-acute form) speedily to subdue the inflammatory action by one or two general bleedings, than by relying upon local bleedings alone, and more especially where vomiting is urgent. You will remember, there is a sensation of weight or oppression that with respect to the man whose case I have related, I did not hesitate to take blood from his arm, and that it was buffed pyrosis,—by the ejection of a clear, some- and cupped, and that the symptoms were limes viscid, sometimes quite thin fluid, to thus somewhat relieved, the venesection the amount of from half an ounce to an not being required to be repeated. The nance and a half, sometimes tasteless, subsequent application of leeches freely to sometimes acid, and sometimes both acid the epigastrium was sufficient. But if the and bitter. Generally, however, as the dis-symptoms had not given way, if the vomitsase advances, the symptoms become more ing, the hierup, the heat of the stomach, had argent; the heat in the stomach is more continued to be as urgent as before, I should listressing, the countenance becomes pallid have directed a second, perhaps a third, and perhaps a fourth abstraction of blood from and occurring after every ingesta. The the arm, before I began to rely on leeches alone.

> In conjunction with bleeding, you will find counter-irritation of considerable advantage, but to this I would not resort until the activity of the inflammation was much diminished by general or local depletion. There can be no objection to occasional mustard cataplasms, because these leave spaces perfectly free for the renewed application of leeches. Therefore if you suspect that you shall have frequently to repeat the leeches, do not apply a bluter; leave that until you feel pretty certain that you will not have speedily to reapply lecches. Do who I know have imagined that the inflammatory action of the mucous membrane of the stomach may be increased by a blister. I have never seen any such effect. In treating chronic inflammation of the mucous tissue of the stomach or bowels, I have, almost invariably, during some stage of the treatment, used blisters, and without ever having had occasion to regret their adontion.

> As to medicines, if the vomiting be urgent, and there is much irritability of the stomach, I believe that the best thing you can give is the hydrocyanic acid, in doses of from one to two minims every two, three, or four bours, or even less frequently, according to the urgency of the vomiting. lieve, too, that it is useful to combine th hydrocyanic acid, as I did in this o some mucilaginous substance

ceedingly di will often

If I can p purgatives. more especially the nearer the inflammation approaches to the acute form, I rather abstain from them in the early stage, confining myself to the use at the crime; but if obsti-nate constitution takes place, and the injections are not sufficient to produce what you may think requisite, then I would suggest, as the best purgative by the mouth, some jeaster oil. Too frequently, however, that will not be retained, and if so I should prefer a full dose of calomel, combined, per-haps, with a grain of opium; not, however, giving mercury with the slightest idea of its producing a beneficial effect on the inflammation of the mucous tissue. This, I am quite sure, from experience, would increase it; and I would also advise you to avoid opium if possible, because it only tends to starch or grad.

You will remember, too, that during the early part of my treatment in the case of this man, on the second or third day-I added to each dose of the hydrocyanic acid and inucliage, ten grains of carbonate of soda. The acid cructations appear to be caused by a morbid secretion from the mucous and follicular glands, and which secretion, unneutralised, becomes an additional source of irritation in the stomach. The carbonate of soda, then, was given for its chemical effect, and its exhibition was attended with

advantage.

The diet under such circumstances cannot be too simple. Chylification is evidently very imperfectly performed, and it would be absurd to task the stomach with food in large quantities. Nature would soon show the impropriety of it by vomiting the ingesta, with an increase of all the distressing symptoms. If the inflammation be very prge nothing but a little cold water should s small lump of ice placed in the mouth,

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extends from the stomach into the pharynx. Plain cold drinks, in fact, are most grateful, though, if the symptoms be less urgent, there is no objection to allowing the patient, as I did in this case, a small quantity of arrow-root, or sage, in water. Every stimulant ought to be most carefully avoided. This man himself stated, that everything he took that was "strong," meaning bear or spirits, aggravated his symptoms. You will spirits, aggravated his symptoms. You will find it of great importance to attend to this in private practice. You will frequently be called to cases which will puzzle you to decide whether they really arise from some slow and insidious inflammatory action in the mucous tissue of the stomach, or are merely the result of functional derangement, brought on probably by some intemperance in eating or drinking. Take it as a rule, in which you can never err, that if there is much heat of stomach, much tenderness in produce greater constipation, and when it the epigastric region, and, more especially, is simple inflammation, rather aggravates an increase of heat there on pressure, you that condition. The hiccup (the disphragm will be right in treating the case anti-sympathizing with the stomach) is sometimes very distressing, and you may occar patient from every stimulating article of sionally be driven to the exhibition of opium, drink and food, and applying leeches to the but I am quite sure that you can only give pit of the stomach, or if the pulse warrants it, it, with propriety, as a means of deriving a abstracting blood from the arm. Supposing temporary respite from the distressing effects, that you commit an error in diagnosis, and of the hicrup, which it is far better to endea. that it is only functional derangement (and your tolessen, indirectly, by diminishing the I admit that sometimes it is difficult accuinflammation of the stomach. But supposing opium seems to be absolutely necessary; tient no harm by the restriction of his regithen, before giving it by the stomach, I men, the application of a few leeches, would prefer throwing it into the rectum, and employing counter-irritation; but you in the form of injection, thirty, forty, or may do infinite mischief, under the idea of even fifty minims, in a small quantity of the case being merely one of a weak condition of the stomach, by giving stimulants, and tonics, prescribing carbonate of ammonia, allowing brandy-and-water, advising an increase in the daily quantity of his wine, and permitting him to live a little more " generously.

There was another case admitted at about the same time, in Anne's Ward, which I did not designate as gastritis chronica, but as romitus-cum-hysteria, because I did not believe, though some of the symptoms were present, that it arose from actual inflammation in the stomach. I rather ascribed it to that peculiar irritation of the stomach which we often see in hysterical females; and the mode of treatment pursued, verified, I think, the diagnosis. As considerable pain was complained of (though there was no increase of external heat), upon pressure of the epigastrium, I thought it right to apply some leeches, two or three times, and afterwards a blister. There was here some slight degree of redness at the point and edges of the tongue. e given or perhaps the best thing would but much less than in the man, therefore, as a precautionary measure, I applied the leeches; but I found, after a time, that as a precautionary measure, I applied the leeches; but I found, after a time, that the stomach. The patient there existed so much of that peculiar morphisms are great relief from the bid condition of the sentient extremities of the nerves, which almost universally accom-

panies hysteria, that the same degree of stars suring her is tenderness was complained of ou pressure been subject to over the whole of the abdominal and the neck, eraphical of racic regions. Considering, however, that About two months age a super there might be some insidious inflammation scalp, which had existed for the last two going on, which this would be the best years, disappeared audienty, and since that means of relieving. I applied the leeches, period the child has frequently complained knowing that the loss of a small quantity of pain in the head; she this become dull, of blood could do no harm to a girl in her apathetic, and ceasing to take pleasure in the condition. But the next day, believing amusements of her age. At the same period that there could be no inflammatory ac-tion in the stomach. I ordered her some alternately constipated and affected with creosote, which, upon increasing the dose diarrhers, and became gradually thin, a cirfrom one minim to three, speedily allayed cumstance attributed to jealousy; during the irritability of the stomach. This quite the three first weeks of the month of April of an inflammatory nature, because I never has disappeared within a few days. yet saw creosote taken into the stomach where there was any thing like inflammation existing, without its producing either days; appetite diminished; on the 30th increase of vomiting, or increase of pain, bilious vomitings.

or heat in the stomach, speedily after it had May 1. We found the patient in the folbeen taken. I was, in fact, confirmed in lowing condition :- Face pale and thin; my original opinion, that this was a case of answers only by monosyllables to the ques-hysterical vomiting. I may allude to it tions put to her, and points to the frontal again, in order to say a few words with re- region as the seat of the pain; the eyelids spect to the advantage of creosote-at, are closed, and the patient avoids the light: have myself found in its use -- in gastric af- but can raise up the limbs freely enough; fections.

HOPITAL DES ENFANS MALADES,

BESEARCHES INTO THE DISEASES OF CHILDREN.

CONDUCTED ON THE

KNOWN PRINCIPLES OF ANATOMY AND PATHOLOGY.

TUBERCULAR MENINGITIS.

Child five years of age, of scrolulous constitution: e, and of mutility; alternation and constiput u; pain in the abde er and to the tomples; blivers to the neck and extremities.—Death; tubercular infiltration of portion of the pla mater; granulations be the aruchould, the please, and the peritonesm.

Cass. - Anne Cammat, five years of was transported to the hospital, from Rue d'Angouieme, on the 30th of April, 1835. The parents of the young child, who mselves enjoy excellent health, and do ant labour under any tubercular affection, inform us that she has never had convul-

at she has & ags of the ophthalmy. mation of the convinced me that the disease could not be the child coughed a good deal, but the cough

April 29th. Constant headache; the prostration is more marked than for last few

May 1. We found the patient in the folet to the degree of advantage which I she cannot maintain the upright posture, the latter do not present any spasmodic movements; the rensibility of the skin is not remarkable, and is equal on both sides of the body; pupils normal; the right is weakened, but still preserved; the face exhibits alternations of paleness and redness; the skin is moderately warm; pulse 72, intermittent; the respiration is slow and unequal, 16 in the minute; the tongue moist, covered with a slight whitish fur; the vomiting has not returned since the 30th; tumefaction and tenderness of the abdomen; constipation for the last four days.

From a consideration of the patient's history, and the ensemble of the symptoms which presented themselves, viz. frontal cephalalgia, sensibility to light, slowness and unwillingness to answer, the stupi 'ity, the diminished sensibility of the integuments, the slowness and irregularity of the pulse and respiration, the constitution, &c., we ventured upon diagnosticating "a meningitis." However, the existence of this affection seemed doubtful to the physician of the hospital, who con-tented himself with ordering an infacion of mallows, and a positive to the abdomen.

During the day the dulness and tendency to sleep persisted; these were interrupted in the evening by low cries; the alternations of flushing and paleness were now well marked.

May 2. Same sleepiness as before answers to the questions we fixed; conjunctive inject the skin obtase; supremer we are conspelled to place strongly before we are

THE RESERVE OF THE PARTY OF THE

[.] The present paper forms a continuention of the ners and remarks whi B of the protest volume bove title.

each ley.) Because the part wight the patient did not arcivelate a single word, or the patient did not arcivelate a single word, or the patient did not arcivelate a single word, or the patient plates or patches, which put forth a single cryptable does not seem to when examined by a magnifier, after have conscious of what passes around har; and from time to time in installability with a trianual by a reason of many formed from the conscious of what passes around har; and each ley.) from time to time is: with a trismus which prevents the introduction of fluids into

the mouth.

May 3. The stupor is more profound; the pulse has risen to 90; respiration continues at 20. A more active treatment was now thought advisable; four leeches were applied to the temples, and four behind the cars; sinapisms were placed on different parts of the lower extremities; the little patient does not recognise her parents.

4. Pulse 108; inspirations 16; incom-

neck.

questions addressed to her. The suppura- intact. tion of the blister on the neck is kept up. Sinapisms are applied to the inferior extremities. The patient is allowed some milk and broth.

7. The intellectual faculties present the same phenomena as yesterday; but the incomplete paralysis of the limbs on the right side still persists. The pulse is now much more accelerated; the respiration has become embarrassed; deglutition is difficult; pulse 130; inspirations 40.

8. To day the pulse cannot be counted, from its great frequency. The patient still answers a few questions. She asked to drink once in the course of the day, and then gradually sunk until midnight, when a convulsive fit terminated life.

Body Examined Thirty Hours after Death.

Body emaciated; members relaxed.

Head .- The volume and parietes of the cranium do not present any thing remarkt cavity of the arachnold does not contain any serocity. Underneath the arachwe perceive a number of small in the left of a tender yellow colour, hard control of the left of the l the size of the same with which birds are of the brain was developed. This circum-

stary. (A Meter to community fed. These bodies, clustered toby a reunion of small granulations. Upon separating the convolutions we find some of them adherent together on the convex surface of the left hemisphere, these adherences being produced by the pla mater, which is infiltrated with a yellow, consistent, steatomatous matter. On the right side of the surface of the brain, we find some granulations, a few natches of much less ex-tent than on the left side. On the lateral surfaces of both hemispheres, the granulations are disseminated, but they again beplete paralysis of the limbs on the right side come confluent in the fissure of Sylvius. of the body. Four leeches behind the left ear. The pia mater does not contain the slightest 5. Patient is in nearly the same state as trace of purulent infiltration: it is merely yesterday; no answers can be obtained from infiltrated, in the intervals of the challent; exerctions involuntary; pulse 90, intermittent; inspirations 24. A blister to the lining the base of the brain are intact. The ventricles do not contein any serum. How-6. The patient is not so stupid as on the ever, the cerebral convolutions are flattened, former days. The eyes are now open. She and the cortical substance is often of a light distinguishes objects, and answers by signs chocolate colour; the medullary substance to the questions addressed to her. When moderately injected. The brain is, generally asked to point out the scat of pain, she speaking, a little less consistent than in the carries the left hand to the head. The right normal state; but does not present any hand still continues incapable of moving. marks of ramollissement at any point. We During the day the auctionation seems to cannot discover any tobercle in the sab-progress very considerably. The child has stance of the brain, which was completely recognised her parents; asks to drink, with divided by very thin slices. The pons vaa clear, arriculate voice, and answers several rolli, the cerebellum, and its membranes, are

Chest.-Both lungs are free from adherences with the parietes of the thorax, but underneath the pleura which covers them, we perceive a multitude of small granulations analogous to those found underneath the serous membrane of the brain. In the parenchyma the tubercles are crude and much disseminated; the bronchial glands are also tubercular: the heart and its appendages healthy.

Abdomen .- Several convolutions of the intestinal canal adhere together by means of ancient false membranes studded with tubercles. We observe granulations underneath the serous envelope of the liver, spleen, and intestines in general. The stomach contains some residue of indigested aliment. On the anterior wall we observe the traces of two or three cicatrized ulcerations, round which the mucous membrane is pale and of good consistence. The interior of the rest of the intestinal canal does not present any thing remarkable.

Remarks.-This case presents several circumstances worthy of attention. Let us endeavour to seize the most remarkable. In the first place, let us notice the slow and gradual manner in which the inflammation

hat been pointed out by several writers, particularly by Assacaouses, bitt lay the it was impossible to explain the reason of poles at the time of the often communes and goes on, before the the disease, will fit with the organ.

lowed by billous vomiting on the 30th.

on the intestinal canal was sufficient to sus- supervention of come and insensibili pend the habitual diarrhora under which the nations suffered, producing in its stoud a now stated, is one to wh degree of constitution sufficient to indicate tention of those who i the me of active purgatives.

Mate of the the insidious manner in which the disease so It was seventy-jum on the third day of fact was established by recent researches at logy of many other cases water we have the Honital des Enfans, viz., that in a great observed) was not probably more accessmajority of cases denominated "bydro-rated during the two first days. This is a cephalm," "acute meningitis," "meningo- point upon which a grave error exists, even encephalitis," &c., the inflammation of the in the writings of the very best authors brain, or its membranes, is either connected upon diseases of the brain; it is a doctrine with, or dependent on, the formation of tu- received almost universally, that in the comhercular granulations in the cellular tissue of mencement of meningitis the pulse is febrile or accelerated; that the pulse falls as This fact, to which we shall have occasion come supervenes, and rises again shortly to refer more fully at a future period, is before death; indeed, we heard M. Anone of immense importance in the history prat, profess the same doctrine but a of cerebral disease, and gives the key to vari- few hours before the present remarks were out other phenomena which have hitherto written. The present case is sufficient remained obscure, or totally unexplained-to demonstrate the contrary fact, and we for example, the hereditary tendency to byject to scrofula, its attacking successively cossary. In a great many cases of tubermany members of the same family, the great cular meningitis, the pulse is slower than length of time during which the premoni- natural at the very commencement of the fory symptoms may last, &c. In the case disease; it preserves this slowness for one now before us, the first symptoms of cere- or two days, then mounts to eighty or ninety bral disease appeared two months before the as come supervenes, and gradually becomes acute attack; the patient, moreover, was accelerated, with the other symptoms of evidently scrofulous; and here let us re- cerebral compression, until the patient's mark, that the duration of the premonitory death, when it often reaches 140, 150, or signs, together with the history of the pa- 160. Instead of finding the pulse acceletient's life, previous maladies, &c., affords rated during the first two or three days of the best, perhaps the only means of dis- meningitis, we have frequently seen cases tinguishing tubercular meningitis from the where the artery gave seventy, waxty, or simple uncomplicated form. The transition only fifty, pulsations in the minute, and from the chronic to the acute stage took place this at a period when the only symptoms of on the 29th of April, when the headache the disease were, headache, followed by vobecame suddenly augmented, and was fol- miting, a very slight drowsiness, and irritability on touching the patient; with these The connection of these two symptoms, symptoms we cannot admit the idea of effecacute headache and vomiting, without any sion; besides, the slow pulse (as in the preapparent lesion of the digestive organs, is [sent instance] has been frequently observed of the stmost value in the diagnosis of me- where no affusion whatever existed in the nineitis. We have not yet made an analysis | ventricles. In many other cases, certainly. of the cases we possess to determine this it does happen that the circulation is accelepoint, but we may affirm with confidence rated at first, then falls a little, and mounts that they exist in five-sixths of the cases, lagain; but this may occur equally without Constinution is another symptom which fre- effusion as with it, and, moreover, does not quently accompanies meningitis. In the present itself so often as the case in which present instance, the influence of the brain a slow pulse manifests itself long before the

The point of symptomatolog studying extensive

A STATE OF THE STA

creat important of metingitis, and that in conjunction with severe seadache, followed by sympathetic somiting, t is sufficient to make the existence of a naindy which has hitherto remained obscure. Brhaps as much from the inaccurate maner in which it has been observed, as from he real difficulties that accompany its inestigation. In fact, we are not acquainted vith any other disease whose general sympoms simulate those of meningitis, in which his remarkable slowness of the pulse is to se observed.

A third circumstance worthy of notice, was he recovery of the intellectual faculties, and he power of speech, at an advanced period of he disease. This has been pointed out by everal writers, who judiciously warn us igainst being deceived by this apparent imelioration. We have had an opportutity of witnessing this phenomenon more han once, not only in cases where the inlammation occupied simply the surface of he brain, but where the meningitis was accompanied by very considerable effusion into he ventricles.

Finally, we may notice the coincidence of ubercular deposits in all the other great carities. This is an important fact in the hisory of tubercular meningitis. We have sever observed (nor are we aware that any uch case has yet been recorded) an examile of tubercular meningitis, without, at the ame time, finding a deposit of tubercular natter in the bronchial glands, the lungs, he mesenteric glands, or underneath the eritoneal lining of the contents of the ablomen. In two cases we have observed tusercles in the kidneys. This, we repeat, is capital fact. The coincidence of hydroephalus (in our view the same disease as neningitis, the presence of serosity having little or no influence on its march and sympoms in a scrofulous constitution), was long ugo suspected, and even announced, by Drs. PERCIVAL and CHRYNS, and several other if the best writers on this disease; but the ct was never demonstrated in a rigorous oner, until the researches made within he last three years at the Hopital des En-Meledie, by Messru. Gramand of Phi-Rups of Martinique, Constant of establics. Since that period

gitls terminating in death. Nine-tenths of these presented a greater or less trace of tubercular affection of the meninges, and in all there was at the same time a deposit of tubercles in the cavities of the chest or abdomen.

P. H. GREEN.

TREATMENT OF FRACTURES WITHOUT SPLINTS.

TROUGH FOR THE LOWER LINES.

To the Bditor of THE LANCEY.

Sin,-I entertain no doubt that your readers have been strongly interested by the letters on the treatment of fracture, recently published in THE LANCET by Mr. Radley, of Newton Abbott. For one, I freely confess that the simplicity of his statements, and the highly practical character of his reasoning, have excited a very convincing influence upon my own mind; the more to, as I had in the following case, which I submit to you for publication, an opportunity of corroborating, so far as one case can do it, the principle maintained by Mr. Radley, viz that in fractures of the long hones "splints may be dispensed with."

Care. - Mr. Richard Barker, a stout, elderly gentleman, while out with a coursing party near Cove, in Yorkshire, had the mistogtune, in attempting to spring over a dich (not on horseback) from the top of a stakeand-bound fence, to trip, in the act of precipitating himself forward, and fall, with the right leg bent under him. The tibin was broken across, about three inches below the patella, and what was quite as bad, the parts investing the knee-joint sustained such a violent wrench as to be followed by considerable inflammation and an ecchymosis, extending to the hip. He was fifteen miles from home, and extremely anxious to be nursed by his family, but the limb was carefully and skilfully reduced by Mr. Hill, surgeon of Cove, who, probably with a view to keep the limb steady during the journey in a post-chaise, had applied splints, firmly bandaged. I visited him at his own house on the same evening, about six hours after the accident, and found him suffering dread fully. A mattress and bed having been laid on the floor of a small back-room, looking into his garden, he was conveyed there and stripped of his clothes, when I discovered that it was highly necessary, from the amount of heat and swelling, to undo all the bandages, for that night at least; twelve leeches were then applied to the A conserves. Since that period knee, and a gin-and-water holton was discrete a consecutive series of rected to be applied to the smoking-hot limit. These soon placed him in a state of comparative case. The broken leg was merely small matters is no laid in the hollow of a soft pillow, and the for if the creases at foot was kept erect by means of a heavy box, the course of this which affected it. which afforded it a convenient prop.

foot deep, into which was carefully spread a bandage beneath. The sides of the trough kept the foot upright, and in preparing it I tore a piece out, to allow the ham to rest at ease; for the board, in a case like this, must be long enough to come quite up to each side of the knee, and project a few inches beyond the toes, and likewise be so deep as to completely receive the foot and rise CASES OF BRONCHIAL IRRITATION above it. A piece of very strong tape, two yards long, was next passed under each end of the trough, and kept from slipping by holes bored through the upper corners of the mill-board. After the leg had been laid in a this apparatus, the ends of the tape were tied together in one firm knot. A double EXTERNAL APPLICATION OF CROTON OIL cord, running through a swivel-ring that; was made to slide along the iron rod, was let down and fastened to the knot, and the whole was thereby gently drawn up and inch or two, to clear the bedding, and was! Sin, - I transmit the following remarks added what he called his "bridle," viz. a useful journal, and remain, Sir, yours, &c. piece of cord fastened to the trough, and brought across the bed to his hand, so that Castle Douglas, December 18th, 1835. ifter a few days he could steer the whole; concern with great precision.

Mr. B. soon felt the convenience of this. That epidenics are at their invasion more stan; be could turn in bed on either side fatal, although less contagious, than at their vithout affecting the position of the leg and height and decline, is a fact which long oot, and was enabled to ease nature with observation has confirmed. Russel on confort and without assistance. After three Plague, p. 261.) The circomstances, howor four days, by means of a bed-chair, he ever, are by no means universal, as was ould sit up in bed to read and write, take) exemplified in this district during the recent is meals, and wile away the tedium of con-inement. With the exception of a satur-prowling about the country, in straggling line lotion, and loose linen rag placed upon cases, nearly five months ago. These became he upper surface of the leg, nothing more more numerous as the "spidemic conras required, and the case got quite well in stitution" advanced, till at length there was ix weeks, and would have done so sooner, scarcely a family in which some members ad not the inflammation of the knee-loint; were not affected. It was not however until clayed us awhile. The union is so neat on the decline that the disease, which heread perfect as almost to defy scrutiny.

ad getting us to draw down the creases or two, and again subsidiage. his pillow-slip, so that a plan which appearance, first on the ill enable a patient to attend to these and then on the face.

rovement : low will, in forment a patient, what is to be said of splints and tight In the meantime a strong iron rod, bandaging. The principle of treatment I lengthened so as to allow it to reach across consider to be the point was bung upon two hooks, at six, Radley, viz. the abscribed and ab pressure, or seven feet from the floor, so as directly the convenient access of velicitation, and to traverse the foot of the bed. A heavy other kindred means. The trough is, aft piece of mill-board, eighteen by twenty four have described, by no means a substitute for inches, after being soaked in warm water, a splint, but merely a convenient support, was then doubled upon itself, so that its without pressure, -at all times the grand desides approached each other within about sideratum, and, in the case of fracture of the ten inches, so as to form a trough, nearly a lower limb, an improvement even upon that lower limb, an improvement even upon that gentleman's very scientific system of treatnice soft thin pillow, having a many-tailed ment. I remain, Sir, your obedient servant,

HENRY CHARLES SHERWIN. Surgeon.

Hull, December 8th, 1835.

MISTAKEN FOR TRUE CROUP,

AFTER RUBEOLA:

WITH REMARKS ON THE

IN CYNANCHE TRACHEALIS.

To the Editor of THE LANCET.

tied and made secure. To this he himself for insertion in your highly interesting and JAMES INGEIS, M.D., M.R.C.S.E.

nd perfect as almost to dely accutiny. Itofore had been remarkable for its mitthess,

The support afforded by the trough on assumed an alarming aspect. Instead of tofore had been remarkable for its mildness. resystic, rendered the many talled handage running list course in its usual recording transcessary, and it was laid aside almost became more tregular, the rash not appearement the first. My patient would now and hen ventilate the limb by propping back the eruptive fever, and then appearing the sides of the board with a bit of stick, perhaps on one check, remaintants.

or perhaps on the organe which suff that time the thoracle inflammation ran so murmur became faint, whilst the sub-crehigh, that the abstraction of blood in large pitous or mucous rale left no doubt but that quantities was necessary; even in infants, the lungs, too, were ordenatous. The child and in many instances their gular pneumonic died in a semicomatoes state, probably from sputa were observed. The present epidemic effusion into the ventricles of the brain; but is atlended more by tracheal irritability than pulmonic, and the symptoms approximate those of croup. In only two cases, however, have I seen what might be called regular croup, and in them the " tussis clangosa" was well marked. In innumerable other instances there waren assimilation to it, and I believe that many such have been magnified, from mere bronchitic tion. irritation, into formidable and successfully treated cases of croup. Of such is the fol- to the former, exhibits also the good effects lowing instance : -

Case 1 .- H. C. a girl, æt. 8, was seized with measles, and treated accordingly. On the stat. 3 years, three days after the subsidence seventh day from the invasion, the cruption of the rubeolous rash; her breathing was had faded, but the other symptoms became lond and sonorous; the inspiration difficult; had faded, but the other symptoms occame, aggravated, the cough was more severe and urgent, the respiration difficult and sonorous, the head thrown back; the eye suffused and urgent the respiration difficult and sonorous, the head thrown back; the eye suffused and the pulse of considerable strength, and there was much pain of the trachea and upper hard a right angles, whilst sometimes the hand was suddenly raised to the throat, inspired, and, the bowels being torpid, calonel and the suddenly raised to the throat, inspired, and, the bowels being torpid, calonel and sonorous; the inspiration directure; the arms thrown out from the body nearly at right angles, whilst sometimes the cough was suddenly raised to the throat, inspired and was suddenly raised to the throat, inspired and was suddenly raised to the throat, inspired, and, the bowels being torpid, calonel and sonorous; the inspiration directure; the arms thrown out from the body nearly at right angles, whilst sometimes the land was suddenly raised to the throat, inspired and was suddenly raised to the throat, inspir applied, and, the nowest terms of the leeching well-marked crowing cough, left no doubt as alleviated the respiratory symptoms, but to the nature of the disease. Calomel and severe abdominal pain, and tenderness on James's powder were immediately given, and pressure over the umbilical region, quickly a dozen leeches were applied to the upper supervened. As the powder had not acted, an enema of oil was given her, which was soon returned, with very slight effect. Ten casted to bleed, an effective blister was appearance of the part of the stermum and on each side of the anomal region of the stermum and on each side of the part of the stermum and of the part of the stermum and on each side of the part of the stermum and on each side of the part of the stermum and on each side of the part of the stermum and on each side of the part of the stermum and on each side of the part of the stermu leeches were now applied to the abdomen, after which she experienced great relief, and had several copious stools. Ou the followhad several copious stools. On the followgreenish stools were passed during the nighting day she continued to improve, until the
evening changed the scene, when I was
suddenly called, as the father expressed it,
to see the child die." On entering the
room, I found her, indeed, apparently near
death: the head, thrown back, was towed.

This acted freely on the bowels, and death; the head, thrown back, was tossel from side to side; the countenance was produced a marked irritation, which I did not regret, although it suppurated copiously; anxious; the breathing so laboritous as to for, from the time of its application, the threaten instant sufficcation; and the pulse symptoms became less severe, and she made appeared of 160. I immediately bled her a rapid recovery. The crotten oil access to upon the pulse, and, the symptoms having days after its application. abated in some degree, a bilster was put on the chest, extending up the traches to the two kinds of irritation. In the one, deplechin. Next morning she was much better; ton carried to a considerable extent is called the blister had risen well, but, the bowels for, even when the croton oil has been embeing alow, and having experienced the being slow, and having experienced the played; in the other, more confidence is to greatest benefit from croton oil, I applied be placed in, and less danger results from. his not only acted as a counter-irritant, but next case will show.

e. Several years The anazarca speedily became universal, in the respiration was greatly impeded, the the large. At resonance of the chest and the respiratory a post-mortem examination could not be obtained, from the prevailing vulgar prejudices against it.

In this case, some of the symptoms assimilated croup, but the cough though severe never had the pathognomonic sound, nor was the blood drawn in the slightest degree buffed. It was simply a local irrita-

The following case, whilst it is a contrast of croton oil as a remedial agent in regular croup: -

Case 2 .- I was called to see A. F., a child upwards of 160. I immediately bled for a rapid recovery. The croton oil seems to from the arm until an impression was made; keep up its action on the bowels for several

It is necessary to diagnose between these two mops of it to the blistered surface, and local counter-irritation, as the detail of the

constant and the child in a great mea-per this stack; the child in a great mea-ter to the first-mentioned girl), was seized at a child being much weakened with mearles; but the mother knowing the reach the child codema of the feet disease, as at that time raging, to be of a way inlid nature, did not call medical advice

until the eruption had faded, and the tracheal irritation had fairly set in. The case resembled, as nearly as could be, that of her sister's, only the cough, if any thing, was more severe. As this was one of the first cases of that nature which had occurred. croup was dreaded, and she was in consequence freely depleted by leeches, and other antiphlogistic remedica were employed, by which the tracheal and thoracic symptoms were certainly overcome. But what was the result? When I called in the evening the little patient was fast slipping out of existence, in a low comatose state, with a small quick fluttering pulse. I immediately ordered her a strong becf-tea injection, which was retained about half on hour-This was ordered to be repeated every two hours. After the fourth she began to revive, the pulse got fuller and more moderate, and she was soon out of danger, but the complete recovery was slow. I am persuaded that had not these enemata been used, she would soon have been past all human aid, and that principally from the error committed in mistaking bronchial irritation for cynanche trachealis.

Before concluding, I may remark that children at the breast appear to he less liable to be affected by epidemics than those of stronger and maturer years. This, whatever may be its cause, appears to be a wise provision of nature; for neither could the infant bear with impunity a sharp attack of the disease, nor could the remedies requisite for its removal be employed with safety. The almost invariable answer of a mother, when asked regarding any one of her children which n.ay have escaped some epidenic, when the rest of her family has been attacked,-that "it was suckling at the this occurrence to the period of his decease time."- first led me to notice the fact ; and I find that others also, on recalling to remembrance long-past experience, accord with the truth of the assertion. A brief case or two will suffice to show that there is at least some cause for this observation. The first is that of a woman, who, during the full blush of the eruption of measles, was delivered of a living full-grown child. She had a quick accouchment, and made a favourable recovery. It was her fourth child. Ere the measles had subsided the child was put to the breast, and continued to enjoy uninterrupted health, without even the slightest rubcolous spot.

The next case is that of a Mrs. R., who, having occasion to enter the house of a person labouring under typhus fever, caught the infection, went through the disease, and suckled her infant all the time, which remained unaffected; whilst a little sister, a husband, and a son, were all seized. And there is now a family under my charge, three of whom have been for the last three weeks affected with typhus, whilst the child in the cradle, in the same room, beside them, minated his sufferings in

Other almilar cased I mis but I have aires trespassed sufficient in occupying so great a portion of these valuable pages.

ANEURYSMS OF THE THORMCIC AORTA.

To the Editor of THE LANCET.

Siz,- I was lately requested to make an examination after death, of the annexed interesting case, the particulars of which, with a few detailed circumstances, in reference to the patient's history, I offer for insertion in your valuable publication. I am, Sir, your obedient servant.

CHARLES J. H. RAY. Tonbridge, December, 1835.

Jeffrey B., atat. 52, of a plethoric, unhealthy appearance, by trade a sawyer, and accustomed to hard labour, in the performance of which he had habituated himself to large drinkings, was, about twelve years since, suffering from a protracted pneumonic attack, that produced a troublesome cough, to which he was afterwards almost constantly subject. With this exception for the following ten years his health was tolerably good, or until he was accidentally struck by a heavy piece of timber on the upper part of his chest, which projected him forcibly against the axle of a waggon, near the centre of his back. At the time, he was informed that no fracture had resulted, but he was bled freely, and attended medically. From he always complained of much uneasiness in these situations, describing what he felt as a constant, dull, gnawing sensation, oftentimes distressingly aggravated. He had persevered in the use of the warm-bath. large doses of iodine, colchicum, and opium, the latter only appearing to be serviceable, by its composing influence. Cupping, also, and many varieties of counter-irritation, had been freely prescribed, but without benefit. From last September his sufferings increased considerably, and during his coughing, small portions of dark coagulated blood were frequently ejected. He was unable to exercise the left arm, to rest on the left side, or in a horizontal position, and could ascend the stairs only with great difficulty. On the whilst exerting himself rather more than usual, coughed up a large quantity of blood frothy in appearance, and of a bei come, which continued for the He was immediately means were adm

two days from the

umstance. Autopsy, 20 hours of the Mark.—The whole body presented extentially, a pale sallow aspect, and appeared elightly distorted on the left side. That side of this class was evidently much disconset, and afforded a solid 1, sonance on percussion, whilst on the right side to football natural. right side a perfectly natural sound was distinct. Immediately on dividing the cartilages of the ribs, on the left side, a large quantity of scrous fluid escaped, and within this cavity was contained upwards of a gal-lon of blood, about one-third of which consisted of firm congula. The superior lobe of the lung on that side had, from the pressure, colinpsed towards its root, but the inferior lobe apparently occupied its usual extent of surface, although so much altered in structure and appearance that it almost entirely resembled the spleen; in its interior was formed a cavity that might have contained two fluid ounces; and the pleura, on its posterior surface, was closely adherent to the body of the descending aorta, near the situation of the sixth rib. From this vessel, between the sixth and eighth ribs, a large ancursymal swelling had existed, which had also become connected to the inferior lobe of the lung; its gradual expansion from within outwards had completely absorbed at least two inches of the seventh, and about half an inch of the eighth ribs. commencing at about an inch from their articulations with the corresponding vertebræ, and the fibrinous ancurysmal coagula were firmly embedded in this remarkable depression. The heart was of ordinary size and appearance, unusually flabby, and per-fectly evacuated. The right lung was healthy. The whole hody of the arteria innominata formed another vast aneurysm, which appeared to commence just before the origin of that vessel from the aortic arch; while its extent terminated at the hifurcation, nearly opposite the sterno-clavicular articulation of the right side. Its size was that of a large orange, and on its anterior aspect the parietes were ulcerated, and irregularly detached, to the extent capable of admitting a small egg. This large fissure was in immediate contact with the sternum, and from a mutual pressure had caused a considerable absorption of its substance, centred by two deep and distinct depressions, either of which was capable of admitting a sixpence, and near to the sterno-costal articulations of the first and second ribs on the left side. On exempting to raise the sternum, after a division of the cartilages, it was broken gransversely in this situation, and exposed carfout state of the surrounding bony The abdominal viscera were ge

INJECTION OF THE NITRATE OF SILVER

IN

GONORRHOEA AND LEUCORRHOEA.

To the Editor of THE LANCET.

SIR,-Having been the humble means of introducing to the notice of the profession the nitrate of silver as a local remedy in leucorrhos and gonorrhos in the female, and being interested in ascertaining whether the experience of others was likely to confirm the opinion I had entertained of it, I felt great satisfaction in observing so favourable a report as that contained in your journal of last week from the North-London Hospital. Dr. Elliotson, in his clinical lecture on a case of gonorrhea in a female, when speaking of astringents and specifics given internally, remarks, "There is, how-ever, a local application which is, I believe, recommended by many practitioners,* and which has, I think, by far greater power over gonorrhoa and leucorrhoa than any other local application, where there is no inflammation, and that is the nitrate of silver."

I shall make no comment on the above passage, except to observe that it affords me much pleasure to find the remedy favourably spoken of by so distinguished a member of our profession as Dr. Elliotson. My principal motive in addressing you, is to remark on the exceedingly weak solution which Dr. E. says he begins with, namely a quarter of a grain to the ounce of water. I need scarcely observe that I have used the nitrate of silver in those diseases of females in a variety of forms, and I have never found a solution of three or four grains to the ounce to create any painful sensations which have induced me to discontinue its use, or even to diminish its strength, unless, indeed, there existed excoriations, or a highly inflamed state of the parts; and as an instance of the extent to which its strength may be increased, I may notice the fact of a patient now under my care who has used it for a period of three years, in the proportions of seventeen grains to the ounce of water; this being the only remedy which has kept leucorrheal discharge in check, and which I have no doubt has arrested the progress of organic change.

Permit me to suggest the necessity of avoiding the common pewter syringe, as, when used, a decomposition in the solution takes place. The short straight syringe I consider quite a uscless instrument. The ivory or bone syringe,—my invention some time ago,—and which may be purchased at

In a clinical feeture, published in TRE LANCET of Aug. 11, 1832, Dr. Ellioteou ascribed the proposal to employ this astringent in vaginal discharges, to Dr. Jewell.—Eb. L.

most of the surgeous' instrument-makeses (in the sale of which I have no interest, direct or indirect), will, I think, be found, from the material and shape, a convenient and efficient instrument, and may be used for injections of any kind. I have the honour to be, Sir, your obedient servant,

GEO. JEWELL. Sackville-street, Dcc. 22, 1835.

OBSTRUCTION OF THE NOSTRIL.

To the Editor of THE LANCET.

Sim,—I shall feel obliged if you will insert the following letter, and the remarks which I have subjoined to it, in your journal. The letter is addressed to me as the history of his case, by a patient. I am. Sir, your obedient servant,

S. PLUMBE.

Southampton-street, Dec. 14, 1835.

"Dear Sir,—As it appears that my case may possibly be instructive, I beg to hand you its history up to the time at which I consulted you. Previous to the attack which it describes, I had served during twenty-four years in India, and had never experienced severe illness of any kind.

"Shortly after a trip to Brighton, in August, 1834, I experieuced a sensation of cold in my nose, with a catarrhal discharge, which soon afterwards became thick and offensive, causing me much annovance. In December it became much aggravated, and in the subsequent May a partial obstruc-tion of the right nostril took place, and increased daily. Shortly afterwards the left nostril became similarly affected for a short time, though only at intervals. The right nostril now speedily became quite impervious, and I found myself unable to draw air through it, or to expel air from the lungs by that passage. I experienced also great pain over the root of the nose, in the direction of the frontal sinuses.

"At about the latter end of May I consulted a surgeon at Brighton, and afterwards sought advice elsewhere, without any favourable result. I was recommended by one to use an injection of nitrate of silver, and by another to try one of tincture of kino, and a variety of other similar applications, all of which I patiently tried without effect. Other surgeons assured me that the constant sanious discharge from the mostrils, which accordated my upper lip, and which had rendered me uncomfortable in society to an extent which I am hardly able to describe—night be got rid of by treating it as a gleet affecting the mucous membrane of the attent. The rid and the recovered within a factor of the latter than the latter

locally and inlocally and inlocally and inlocally and inuse the golden definition, and to thrust it up
the nostril by means of a camel-hair pencil; and, as a last resource, to give a trial to
the injection of chloride of sods; and,
finsily, with the lope that the disease really
existed in the infrusing had made up my
mind to the extraction of a molar tooth.
Ses-side leisure and pursuits did me no
good, either as regarded my general health
or the local affection. I am, your obedient
servant. C. S.

"To S. Plumbe, Esq."

Remarks .- The case of this gentleman is, so far as my experience goes, one which the profession will consider rather singular and instructive, for although suffering for so long a period, the sequel is, that by the most simple means he has been restored to a state of perfect health, in the course of a few days. On examining the nasal passages, I found the right perfectly closed by the contact of the Schneiderian membrane at the point of union of the vomer with the cartilage and the alæ, with the ossa nasi, a fissure presenting itself there, instead of the open nostril. A probe was introduced on the first day, with some pain. On the second day a small pledget of lint was passed through an eyed probe, and introduced, with a little pain, and some blood was discharged. quantity of lint was increased from day to day, and, finally, the probe reached the throat, and gave the opportunity of applying the black lotion to a part of the ulcerated surface. The day after, the probe passed into the throat, and, to use the patient's expression, "hurt the root of his tongue." He could then pass a little air, by great exertion, through the nostril, and some minute flakes of curdy matter were blown out. The sanious discharge continued for two or three days, the nostril being still half obstructed, when the patent, by a forcible effort, expelled a large mass of curdy matter, which I take to be the inspissated pus, - the ulcerated surface having been pouring out a healthy secretion of matter, but the passage before and behind having been so closed as to prevent the egress of any but its most finid parts. Whether this view of the case be correct or not, a very large lump of the substance described was blown out little effort, into the patient's handkerchief, and he recovered within a fortnight, by the application of the black lot camel hair pencil. Toe rig

OUNDS AND

BEMARKS ON THE REPORT OF THE DUBLIN COMMITTEE OF THE BRITISH AMOCIATION.

To the Editor of THE LANCET.

* Sin. -The committee, appointed by the British Association for the Advancement of Science to examine into the nature of the heart's movements, and the causes of its sounds, have, after a series of experiments, arrived at some conclusions which are confirmatory of views which I have long since advocated in the pages of THE LANCET, and at other conclusions which are at variance with those views, and which I have been induced to quote and comment upon, from a desire to arrive at truth on a subject, which, to use the words of the committee, " from its importance, whether in a practical point of view, or as an object of philosophical inquiry, is deserving of further investigation.

The following quotations are from the report of the committee, as contained in the Dublin Journal for September 1835.

Section 3 .- Conclusion 5 .- If the interval between two successive beats be regarded as divided into four equal parts; two of these parts may be allotted to the duration of the ventricular systole."

A similar opinion was advanced by Lacance, and since by Dr. Hope, but it has met with unanswered objections in THE LANCET of January 12, 1833, which contains the detail of an experiment by which the time from the commencement of the first sound to that of the second sound was carefully measured, and found to be a fraction less than one-third of the time, instead of two-fourths, as maintained by the com-

" Conclusion 6 .- The ventricles, in their systoles, approach the front of the thorax; and, by their contact and pressure against it, produce the impulse or beat of the heart.

In the natural state of the parts the ventricles must always remain in contact with the parietes of the chest, and can neither recede from nor approach them. If the ventricles did recede from the parietes, they would cause a vacuum between their anterior surface and the parietes; and this is so much at variance with physics and common sense as to be untaliets on the heart's motions have not ted the effect of outting away a por-

reposition, and without making any litered the mechanical relations of those parts whose motions they were about to examine; except as regards duration and succession, we might as well examine into the manner of the progression of an animal, having previously broken one of its legs, and set down its awkward gait for natural movement.

If the above-mentioned alteration in the mechanical relations of the heart, and of the parts which enclose it, were allowed for, the results of their experiments would, I think, agree entirely with my description of the heart's movements contained in THE LAN-CET of February 8, 1834.

" Section 4. Conclusion 3 .- That the first sound is connected with the ventricular systole, and coincides with it in duration.

That the first sound is connected with the ventricular systole had been long established: but that it is of equal duration will not, I think, be generally admitted; particularly as that duration is stated by the committee to be two-fourths of the time of one beat, in which case the duration of the heart's first sounds would be twelve hours out of twenty-four.

"Conclusion 4.- That the cause of the first sound is one which begins and ends with the ventricular systole, and is in constant operation during that systole.

On what ground is it stated that the cause of the first sound is of equal duration with the sound itself? There is no necessity for this. The sound of a drum is of longer duration than the blow which caused it; a barp-string vibrates long after the finger has struck it; and though the shock of the sudden tension of the ventricular valves be instantaneous, yet the vibrations excited by the shock of sudden tension may

" Conclusion 7 .- That it is produced either by the rapid passage of the blood over the irregular internal surfaces of the ventricles, on its way towards the mouths of the arteries, or by the bruit musculaire of the ventricles, or by both these causes.

Passing over the inaccuracy of stating the bruit musculaire to be the cause of the first sound-i. e. one sound to be the cause of another, I have merely to observe that the muscular sound of a powerful muscle bears no comparison in loudness to the heart's first sound; and if the passage of the blood over the internal surface of the ventricles be the cause of the sound, why does not the entrance of the blood during the diastole of wordy, of a moment's consideration. In the ventricles cause a similar sound? For the ventricles cause a similar sound? For their deductions, the different experiments to it remembered that the Committee state the duration of the systole to be two-fourths of the time of one best; and, consequently, on of the cavity containing two-fourth only remain for a free supply from the auricles. Then, in both cases, the g one of the terms of velocity of the blood being nearly equal,

why attribute a sound to the exit of the abrupt and strong a blood over a comparatively smooth path, tenaion of the value blood over a comparatively smooth part, when its entrance over a comparatively rough path causes no sound. Both of the above explanations are at variance with analogy, and they are equally so with pathology, for the loudness of the sound is, cateria paribus, in the inverse ratio of the quantity of muscle; and when a bruit is heard, consequent upon the passage of blood over the surface of the ventricles, or of their orifices, the sound is so different from the true first sound, that it has become a diagnostic mark of functional or organic derangement of the heart.

The experiments of the Committee afforded no results which at all invalidate the opinion that the heart's first sound is caused by the auriculo-ventricular valves, and the only argument they advance against that opinion is contained in the following con-

" 5. That it does not depend on the closing of the auriculo ventricular valves, at the commencement of the systole; because such movement of the valves takes place only at the commencement of the systole, and is of much shorter duration than the systole."

The conclusions of the Committee afford, throughout, evidence that they consider the first sound of the heart to be a continued and equal sound; otherwise there has been a great omission in their not having stated the instant of its greatest intensity.

The nature of the first sound is, however, a matter for the ear to determine, and not for argument; but I think I shall be generally supported in the opinion that it is an abrupt sound, and not continued and conal. as described by the Committee. If it be a continued sound, how could Magendie have supposed it to be the result of a blow, or an impulse of the heart, against the parietes of the chest?

My answer to conclusion 4 applies equally to conclusion 5; and I have merely to add, that the first sound occurs at the instant in which the valves close,-that the closure of the valves inevitably causes sudden tension of the valves, -that the sudden tension incvitably causes vibration of the valves, -and, therefore, as all sounds consist of vibration, and as no sound can exist without vibration, nor (within certain limits) any vibration exist without sound; and as, in the healthy heart, there occurs no phe-nomenon which is calculated to produce so

tion as the sudden from these facts and, Dam led ribute the sound to your obedient ser rant E. L. BRYAN.

London, Dec. 16th, 1635.

LONDON PHRENOLOGICAL SOCIETY.

SKULL OF DEAN SWIFT.

Ar the second meeting for the session of this Society, a paper on the skull of Dean Swift was read by Mr. J. I. Hawkins. This skull was examined at the late meeting of the British Association at Dublin, and became the subject of an article in the Dublin Phrenological Journal, and other periodicals. Mr. Hawkins, on the present occasion, examined some points of debate which had subsequently arisen respecting it, and endeavoured to show that the real character of Swift was in accordance with the phrenological developments of the skull. The character of Swift in domestic life, and as an author, seems by many persons to have been greatly misunderstood; and amougst other individuals who made the examination of the skull a subject of ridicule against phrenology, was Doctor Macleod, one of the lecturers of St . George's Hospital, who adopted the vulgar belief respecting Swift, and strove to show either that phrenology had no foundation in truth, or that the skull was not the skull of Swift. As Doctor Macleod professed to be a medical man, Mr. Hawkins (probably on that account! took up his remarks, and allowed other writers to be answered in the reply which he had to give to the comments of the editor of Messrs. Longman's periodical.

The question respecting the identity of the skull was indisputably settled by Mr. Hawkins. Swift, being a dean of St. Patrick's, was buried in that cathedral. short time since, some alterations were made in the edifice, which caused the exposure of the coffins of Swift and Mrs. Johnson, his " Stella." The circumstance coming to be known to Dr. Houston, of the Dublin College (whom Dr. Macleod describes in his pamphlet as a "buzzing busy-body") Dr. H., with "impertinent curiosity," as Doctor Macleod declares, helped to "ransack the coffin," in order to find "a stumbling block for himself and other fools." This " worthy," continued Doctor Maclood, then displayed his "deplorable ignorance and on finding that the skull was a mall one, by suggesting that the "meetal how-ers" of Swift srose from "diseased ac-tivity." (Mr. Hawkins in his paper and "that he remembered no falling from Dr. Houston vate examination of

^{*} Had this been attended to, the Committee must, I think, have been levt to a limit the explanation of the first sound, so well as that of the second, tion of the first sound, as well as that of the second, as first given by 1r. Billing, and first published it Ris Laucer v. May 19, 1832, and risce booght forward by M. Rossand-sand mayorf, Willoud, however, possessing the slightest browledge, un my part, of 1r. Billing a Essay, or I should have acknowledged that priority to which, on this point, I consider Dr. Billing called.

subsequent public elleved that it nev Macleod then pro

grounds for believing in the identity of the leaving a sudden step at the middle of the skull, which was permitted to be temporarily forchead, or, rather, an inclined plane, removed (together with that of Mrs. Johnson) formed by the integuments not bending to by the present Dean of St. Patrick, the Rev. Henry Dawson, for the express purpose of Some persons imagined that this was an examination, when, also, drawings and casts coronous wrinkle in the integuments durof them were taken :- " There is no reason- ing life, but no phrenologist could be deable doubt remaining," said Mr. Hawkins, ceived as to the real cause of the irregu-" respecting the identity of the skull. Dr. larity." United Kingdom; and a distinguished mem- and not to excite the fancy." brains, and that he (Richard Brennan) held profits of literature, indicate his disdain of the bason to receive the brains. According the character of a professional author. Ingly, on opening the coffin, the skull of the The benerolence of Swift, said Roderick, Dean was found sawn in two, to the very was very great, as the subjoined words of great astonishment of the verger, who had Scott testify:—"The Dean's real and discri-

mainatide, and he have been taken from the Dean after death, in the manufacture of the court of hacked then properly in his passed the cast belonging to the Society must have applied to show the contract of the skull exhibited at Dublin, of Swift ought, asserting to the doctrines after it had been sawn in two, and the inbeen a cast of the skull exhibited at Dublin, of phrenology, to have been developed in a tegument had been sawn it wo, and the hidderedly opposite extent to that which the divided parts. The weight of the plaster skull was stated to present.

In briefly analysing the paper of Mr. of the skull, and forced it about an eighth Hawkins, it will be right to show, first, the of an inch posterior to the lower portion.

Houston declared that he himself took it. Next as to the vulgar opinion respecting from the coffin of Dean Swift, in the presence of several gentlemen. He also took amatory propensities were supposed by Dr. from the adjoining coffin, on the same con-Macleod to have been little or none, and be ditions, viz. that it should be returned in a referred to the opinion expressed in Scott's few days, the skull of 'Stella,' Swift's female biography of Swift, in proof of the suppotex days, the skull of 'Stella,' Swift's female biography of Swift, in proof of the suppo-favourite, which skull Dr. Houston also pro-sition. "Scott (quoth the dub) says, his duced at the meeting, and a more beautiful whole intercourse with Stella and Vanesia and well-balanced skull I never beheld. It was the beau ideal of a perfect female skull, and admirably harmonized with the charac-coldness to have been constitutionally in-ter of Mrs. Johnson, as given by Sir Walter Scott, and some other of Swift's biographers, lagain, "The coarse images and descrip-lan order to satisfy some scentics as to iden-tion, with which Swift has dishonoured In order to satisfy some sceptics as to identions with which Swift has dishonoured tity, the skulls, after having been exhibited his pages, are of a nature directly oppo-at the meeting, were taken by Dr. Houston and replaced on their respective vertebra, voluntuary feeds his imagination. The lat-and several of the party ascertained the ter courts the seductive images of licen-perfect fitting of the respective bones, tious pleasure; but Swift has indulged in Among the gentlemen present were several pictures of a very different class, and dwelt medical men from various parts of the on physical impurities, calculated to disgust The antiher of this Society, to whom I am indebted for phrenologist urged also, that Swift had this information (having myself left Dublin very little, if any, love of approbation, and in early on the morning after the public meet-evidence of his statement, he again quoted ing), copied the inscription from the coffin Scott in the following sentence:—" There of the Dean. This gentleman further in- were three peculiarities for which he was formed me, that when the coffin was about remarkable, viz., his originality, his total to be first opened, the present verger of the indifference to fame, and the distinguished cathedral said to the company - Now we excellence which marked him in all his unshall know whether old Richard Brennan dertakings. As a literary man (the proudest told the truth or not. Brennan was formerly light in which he can be viewed, if we ex-Dean Swift's servant, and afterwards was cept his patriotism, and even of that he verger of this cathedral, until he became a was not vain), the careless mode in which very old man, and he used to say that the Swift suffered his works to get to the public, skull of Dean Swift was sawed in two before his refusing them the credit of his name, the interment, in order to take out the and his renouncing all connection with the

its offentia of old Richard Brennan's veraity thus removed. On the day of the pubthe posting, "continued Mr. Hawkins, "I
the study with a cast which was a
the appearance of paraimony, they could not
coston as which is in the poscoston as which is said to
again, "he was charitable and benevolent

to the extreme limits of a moderate reve | suffered by trwitt

The ideality and wit of Swift were said imitation they declared to have been very enjoy." small, Swift being, they said, the most origicontroversy.

found in the skull examined at Dublin :-

" Amativeness, large. Philo-progenitiveness, large. Lave of Approbation, very large. Benevolence, small. Ideality, small. Wit, small (skull thickened here). Imitation, rather full. Number, moderate. Language, large (skull very thin). Comparison, moderate. Consolity, moderate (skull thickened)."

In opposing the views of the anti-phreno-logists Mr. Hawkins drew a character of Swift, which tended to show that his actual propensities and faculties were very different from those described by his opponents, and that they were, in reality, in very exact accordance both with the developments described in the above list, and with the fullowing account of other organs measured at

Individuality, very large. Order, full. Form, large. Weight. full. Eventuality, full. Time, moderate. Locality, large.

"The average of all these," said Mr. Hawkins, "will evidently warrant the opinion that, at the lowest estimate, the term rether kerge, should be applied to the instellectual indication, the lower perceptives being early kerge, and the reflectives mediate the control of the con kins in contradiction of a statement which far from exemplary. Destitute of temperature became current, that the intellectual deve- and magnatimity, and, we will add, of price lapments in the skull were very small, as ciple in the former; and, in the latter, compared with those which might have tenderness, fidelity, or compassion." head expected in the head of such writer. Respecting Swift's love of supershapidit, M as Swift. Amongst the hidgraphers of Swift Hawkins said..." I was informed in Dublin referred to by Mr. Hawkins in his estimate as a notorious fact, that in a fit of heads of Swift's character, is "the learned Dr. lence, the Dean lent small sug Beddoes, who, in the ninth every of his to several poor men, with work, entitled 'Hygeia.' has sacribed the that it might be said, vertigo, with all its distressing consequences, I that shortly afternation

indulgence; and he a early and pro e conduct towards the anti-phrenologists to have been remark-shy great, and his "Gulliver," his "Tale flamed imagination, and the exhausted of a Tuh," and his "Battle of the Books," frame, of a premature voluptuary, who still were pointed to in evidence. His powers of courses alegaries, which he was unable to imitation they declared to have been very enjoy." The constraint appropriation Dr. Boldocs enjoy." The could specialism Dr. Boldoce was disposed to derivations the tone of gross nal of all authors. His power of language indelicacy, of which Swift's writings afford they considered also was extremely limited, so many proofs. Mr. Hawkins also ob-because he "seldom used any but his verna-serves that in his biography of Swife, at cular tongue," and employed words only as page 343, Sir Walter Scott, speaking of the "a means to an end." His faculties of impure tone of conversation prevalent in comparison and causality they regarded as Swift's time, says, "Although Swift's offences remarkably great, on the ground that he of this description certainly far exceeded was " the finest and most subtle reasoner" those of contemporary authors, the peculithat ever entered the field of politics or arities of his habits and state of mind are ntroversy.

These opinions were placed in array by grossness." Again,—"his delicacy must have the anti-phrenologists against the following been only occasional and capricious, for his extract from the table of the developments journal furnishes many instances in proof of how little that delicacy influenced his own correspondence with females.

ter days, to hable

Mr. Hawkins also quoted the following passage from Dr. Barrett's Essay on the Life of Swift, to show the gross animal pro-

pensities of the Dean:-

" Nothing is more observable in the true and undisputed productions of Swift, than the pains which he seems to take in raking together the most nanseous ideas, and dwelling upon the most indelicate images. It is unnecessary for me to bring examples of this strange propensity of his nature; which is the more serviceable to us, because he is almost singular in this respect, and it forms the strong outline that distinguishes him from almost every other writer. In a pamphlet which came out in 1704, called Some Remarks on the Tale of a Tub, he is similarly described."

With regard to the extent of Swift's benerolence, Mr. Hawkins observes that Mr. Jeffery, in a number of the Edinburgh Reries for 1816, says of the Dean:-

"He was neither a very dignified nor a very amiable person. The truth is, we think, that he was extremely ambitious, arrogant, and selfish; of a morose, vindictive, and haughty temper; and though capable of a sort of patronizing generosity towards his

I WAS I SHOUL

eveners, he in legal proceeding against the whole against the whole of them, against the whole of them, against the whole of them, and their into fits best grammatical arrangement, and families." Book also says that in Swift's latter days he was "moody, melancholy; if he had been writing in prose." and ill-humoured, and a biglists on all occasions." In reply to the latter of the swift's was a man of gram self and imagination, and had little immetation, Mr. Hawkins in vain presented to the notice of Swift." and had little immetation, Mr. Hawkins in This fact, said Mr. Hawkins in direct quoted first, the remark of Dryden on receiving some poetical exercises from Swift, -" Cousin Swift, thou wilt never be a poet," which Swift never forgot, or pardoned; and, secondly, Mr. Hawkins referred to the following remarks by Scott :-

" He never attempted any species of composition, in which either the sublime or the pathetic was required of him. But in every department of poetry, where wit is necessary, he displayed, as the subject chanced to require, either the blasting lightning of satire, or the lambent and meteor-like corruscations of frolicsome humour. We look in vain, in his writings, for depth of feeling or tenderness of sentiment; although, had his friends. such existed in the poet's mind, the circumstances must have called them forth. The is, in short, a kind of poetry which affects wither sublimity nor pathos." Again,-"Yet this grandenr is founded not on sublimity either of conception or expression, but upon the energy of both; and indicates mood of passion, rather than from poetical And, to combide the extracts on this head, - " But Swift, without ever trespassing into figured or poetical capressions, good set phrases always at his command, and displays a sort of homely richness, like the plenty of an old English dinner, or the ments; but was in the highest degree favourable to the effect of his humour, very much of which depends on the imposing gracity with which it is delivered, and on the various turns and heightenings it may receive from a rapidly-shifting and always appropriate expression.

Respecting the opinion that Swift ought to have had, from his faculties, the organ of language very small. Mr. Huwkins quotes Walter Scott the following pas-The government of Ireland his alwayence as much as his ain,—" His powers of versi-bly adapted to his favou-which is a handouff tabo is master of his

Last wears as a bracelet. Swift was of the latter description; his lines fall as easily

his organs of comparison and causality." In concluding his argument against the repeated declarations "that the character of Swift was the very opposite in every respect to the description given of his skull by the phrenologists, Mr. Hawkins said-" It may be remarked that Swift's very large individuality and form, large size and locality, full weight, eventuality, and order, will account for all his extraordinary powers of discrimination; and his very large secretiveness, destructiveness, and combativeness, combined with the above, would give that causticity to his satire, which made him such a pest to

We need not farther extend our extracts. We have suffered the subject to occupy so nythological fable which conveys the com-plinents paid to Vanessa, is as cold as that the skull of Swift has furnished, through addressed to Ardelia or to Miss Floyd. It misrepresentations and want of information, the most important occasion that has offered for many years to the enemies of the doctrines of Gall; and because, while the science of phrenology is one of great interest to medical men, too many of them have rather ardour of temper than power of not time to examine the facts on which it is imagination. Facit in liquatia versus. The based, for themselves. We do not, ourselves. elevation of tone arises from the strong hold with many of the opinions that are entertained by its disciples, but we cordially concur with Annaat, in the general opi-nion expressed by him in a late address which he delivered as president of the or ever employing a word that can be called Phreuological Society of Paris, at the anfine or pedantic, has a prodigious variety of hual meeting of the Society. A brief notice of the discourse appears in the Edinburgh Phrenological Journal for Dec. 1835 :-"In this discourse," says the editor of the wardrohe of a wealthy burgers. This taste above-mentioned journal, "Andrei endeafor the plain and substantial was fatal to vours to remove existing prejudices, by his poetry, which subsists not on such ele-| showing that Gall's leading ideas are in strict harmony with the principles which have always been followed by physiologists in endeavouring to discover the functions of the bodily organs, and that their truth is established by a body of evidence, direct and indirect, which it is impossible to resist. what I have just said, observed M. Andral, . I have only one aim, and that is, to prove that the science of which Gall is the founder 'must henceforword be included among the grees' and serious studies of physiology. The question is not now whether Gall or his succorsors have committed any mistakes in determining the functions of individual portions of the brain : even although none of the organs were yet ascertained, the fundamental principles of the science

would not on that account have existed the less, and sooner or later they would go have led to the accumulation of facts and found on the suit diced professors. Andral's professional re- history would always rectify that blunder. putation and labours may be put in the scale

tax" from the new candidate for admission; particularly, this phenomenon? into the grave and serious field of physiology, form none of those" obstacles" which of patients could not all ays be relied on, phrenology need use "marvellous force" to but he believed that about seven weeks was

throw behind it.

WESTMINSTER MEDICAL SOCIETY.

Salurday, Dec. 13, 1835.

Mr. RICHARD QUAIN in the Chair.

PCTEMA.

Da. Apprean exhibited several was casts this evening in order to illustrate the different forms of eczema. The Doctor congratulated the members on the fact that medical men were now paying that attention to the disease which it well merited and required, for the ordinary forms of the disease had hitherto been much neglected, indeed, he feared, treated with contempt; and the same with cutaneous diseases generally, although there was no class of diseases so little understood, and none more likely from a wrong Cagnesis to affect the reputation of a me food wen. He still maintained that the work of Willan and Bateman contained the description of Mr. Thompson's case of eczems, with the exception of the exquisite form of exfoliation. As to resication existing in the case, he had not the least doubt of h, as it oftentimes required the greatest attention to ascertain, and might escape notice therefore. He did not doubt, in fact, that it was frequently overlooked. Why the exfoliation had proved so exquisite, he presumed, was owing to the vesication not terminating with equal being fully developed, and occasioning an Dr. Apparam, finding on of fluid between the cuticle and the

te rors, causing if s tostend of the almost invariably ikin. Dr. Cop have led to the accumulation of facts and found on the introduction of the filling up of details. But if phrenology and had, with his usual actions, mentioned be true, do not concern yourselves about at the last meeting the presence of gastroist future success, for there is no cample enterite with eggents, but he (Dr. Addison) of an important truth once fairly launched, having failed to make its way. It must, broadned the others is generally some from local irritation, and was benefited by some must be until to inconvenience in the state of the one must be put to inconvenience in its arsenic and other irritants, which would *progress, and few people are fond of being not, he thought, he the case, if eccema were set aside. If has, moreover, the great fault dependent on gastro-enterite, which he did afbeing younger than those whom it pretends not, therefore, consider essential for its proto enlighten; but let it alone, and it will; duction. Eczenn was often mistaken for * mon throw all obstacles behind it with erysipelas, but if the vesicles characteristic marvellous force. We recommend these of the two diseases were observed, the error remarks to the serious consideration of such would be prevented; psoriasis was another medical students as are deterred from the form of cutaneous disease, for which it was study by the influence of our own preju- frequent to mistake it, but reference to the

Dr. Jourson thought that the novelty of against those of any of our living teachers." the case narrated by Mr. Thompson, con-The efforts of Doctor Roderick Macleod, sisted in the periodicity of the disease. Had and his conductors, to collect the "usual Dr. Addision met with, or Battman noticed

Dr. Apprison replied that the statements the isual period at which attacks returned, and in one case described by Bateman they returned every month for a considerable period

Mr. Thourson said that had any student referred to Bateman's description of cerema ruhrum, he would not have recognised the similarity between it and his 'Mr. The case. It was far from his intention to depreciate the merity of those authors. Since the last report the antiphlogistic treatment had beer persevered in, and the patient had with benefit been blod twice; the blood was copped. The subject here dropped.

Dr. Jourson Informed the Society that it had to regret the less of another member Mr. Marti, who had been carried off very and lenly by hemoptysis. He was sen for to see him, on Priday, at seven a m., it consequence of the hemorrhage, but was no able to attend until five p.m. In the mean time Mr. Lambert was requested to see his and he bled him. The blood drawn wa cupped, the first hemorrhage did not ex eced a cupful, and throughout the day th sputa was only tinged. At his (Dr. J.'s visit, the pulse was somewhat accelerates the secretion becoming more florid, an the cough more troublesome. The friend said that the patient had had a slight cong for two mouths, with but little expectors tion. He ordered a grain of lead wi a grain of opium. The bowels were lar, but shortly after one dose was the bleeding returned, and prove sine p.m. flad any as

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waived giving an q times found to een aneurysmal.

Mr. Thompson detailed a case which terminated as rapidly, the autopsy displaying an immense vomica, satisfactorily accounting for the result. A slatter cause might be

developed in the present case.

Mr. Howne considered it but right to inform the members, in case an opportunity of ascertaining the truth should not be granted. that when he was requested to see Mr. Mart a short time back, it required not much difficulty to discover that his end was fast approaching, and of this he (Mr. H.) informed his friends accordingly; Dr. Clarke, also, under whose care he was from the beginning. had given no hopes of him.

Mr. LAMBERT declared with warmth that Dr. Clarke had not given any such opinion, but quite the contrary, and he (Mr. L.) also believed that his lungs were not affected.

Mr. House intimated that there were gentlemen present who had heard the diagnosis of Dr. Clarke expressed, and Mr. DAVIDSON said that Dr. C. certainly had i considered his case irremedial.

MEDICAL MAGNETISM.

After some further remarks from Mr. Verrall, and Drs. Stewart, Webster, and Bhindell, Dr. Chowne requested Mr. Thompson to report the progress of medical magnctism since the last discussion on the sublect.

Dr. Schnipt first satisfactorily explained to the Society how Dr. Faraday's name had been used, although not by Dr. S. himself, and also alloded to the statement made by Messes. Watkins and Hill, who it appeared had now authorized Mr. Davidson to disown on their part all knowedge of the competition | in magnets. Dr. Schmett said as we understood him that Mr. Wilkinson of Pall Mall was delegated by Lord Scareshoro' to make the proposal before stated to those gentlemen, that it was accepted by them, and that their failure was attributed to the inferiority of the English steel.

Mr. HALE THOMPSON now stated with regard to the question whether the magnet could produce physiological effects on the human body, that he must answer "yes!" although Dr. Ritchie had denied the posshiftiy of that result. As to its remedial efficacy, the time, he believed, had not as ret been sufficient to allow an opinion to be dat the Ophthalmic Institution. From Chara of amaurosis presented to Dr. Course were selected, but these were selected, but these were selected without their faults; in all gras produced, and great mo-But this afternoon, pairy in lending his

manner in wi

rating, he (Mr.T.) had certainly produced a more decid ed physiological effect, by magnetizing a boy, who was received into the Westminster Hospital, with concussion of the brain. The pupils were dilated, and on first applying the magnet for three minutes, contraction followed, and on again employing it for five minutes, the same phenomer occurred, to the complete satisfaction of himself and Mr Snowden, a gentleman who had acted as house-surgeon to several hospitals. He thought it right to state, that unknown to Dr. Schmidt, he had been told by Mr. Weiss that he could not undertake to make magnets of equal power to those of Dr. S.

Mr. Hour stated that his daughter, who had been deaf for many years, and who had been placed in the circle of the magnets five times, had derived considerable benefit

from their employment.

Dr. WEBSTER remarked, that out of the four cases which he had witnessed at the Eye Institution, only one received beneat; that of a lady, who affirmed that she could see much better after each application, all other remedies having failed to afford her any relief. In the second case the man saw The other two received no benefit. worse.

The Passident, before adjourning the meeting, remarked, that it was no unusual thing for amaurotic patients to say that they saw better after any new application was made.

THE LANCET.

London, Saturday, December 26, 1835.

Depurers from the medical schools have been visiting the CHANCELLOR of the Excurquen during the past fortnight, relative to the establishment of the new University. We hope that the whole of these bodies are satisfied with respect to the liberality of the scheme.

Still the draft of the proposed CHARTER is not before the public. Nothing, however, shall induce us to believe that the mambers of a liberal Government will shrink from placing before the community that document which it is their intention to convert into a law, by obtaining for it the sign manual of the King. The institution of the Metropoliton University will constitute an important d his mode of ope-lepoch in the annals of the literature and

science of England. It will also affect in great measure, the immediate interests of a Poor law Commi scholastic establishments in and near London. The conduct, therefore, of the whole business should be as open, candid, and straight-forward, as the object sought to be accomplished is prudent, enlightened, and national. We repeat, however, that there will be no protection against the perpetration of what is unjust, unless a draft of the intended charter be circulated for the inspection of the public.

WEAT species of folly or cruelty can be practised which would not find defenders? A correspondent, who has most unwittingly adopted the signature of "PHILO-HUMA-NITAS." maintains that the charges advanced by the profession against the Poor-Law Commissioners and the Boards of Guardians are not well founded, or justly advanced; and the writer attempts to establish the accuracy of his position, by referring to the willingness with which medical gentlemen have agreed to become parties to the contracts in the Unions, and by referring also to the powers which the Commissioners can by right exercise, in conformity with the conditions of the Poor-Law-Amendment Act. Suppose we concede all that our correspondent has adwanced. - suppose we allow that the Commissioners and Boards of Guardians possess a statute right to treat the memhere of the medical profession with disrespect, with harshness, nay, with cruelty.-suppose also that there are a set of mercenary adventurers, who, having no feeling for the character of the profession to which they unfortunately belong, are willing to sacrifice every other object to the promotion of their own sordid and base propensities, -suppose, we say, that all this

the Guardians large body of individuals, the conductors of and the public, assume at other aspect? Does it present no wider view? Why "PHILO-HUMARITAS," and other writers of his intellectual stamp and caliber, in the blindness and the zeal, or in the muddymindedness of their folly, appear to forget the sole-the only object for which the poorlaws were instituted, so far back as the days of ELIZABETH -that of affording succour to the necessitous sick poor. This is an item in the account, which some of our hot-headed, over-zealous disputants will do well to include. The appearance of such a statement may be displeasing to the calculating political economists, and to the more philosophical, but still less generous utilitarians; nevertheless, it is unite certain that the mass of the English community, and, it is to be hoped, a majority in both Houses of the Legislature, will never forget that poorlaws were instituted for the protection of the poor, and that to such protection the poor are as much entitled as is the first lord in the kingdom to his landed estate. On a subject in which the feelings of human. ity so strongly and convincingly admonish the mind that all attempts at mystification must fail in accomplishing their object. assuredly the people of this country-of course we refer to the rate-paying peoplehave not become so brutalized as to merge every question of human suffering occurring amongst the poorer classes of society, into a mere matter of pounds, shillings, and pence -in short, of setting up a saving of five shillings on the one hand, in comparison with relieving an afflicted fellow-creature from five days, five weeks, or five months. of bodily torture on the other!

> Admitting, then, that the Commissioners and Boards of Guardians may, by lage ex cise the right of giving to a medical titioner the smallest coin in the the treatment of the sick of twenty or thirty.

> that the moral o

F It would be useless to insert the note of " PHILO-HUMANITAS," as he attempts to prove no more than what we have, for the make of argument, just conceded to him,

2 pervertis object, which the provisions of no partiamentary statute ever can, or ever did, recognise.

When, therefore, a medical practitioner is insultingly offered a sum of money which is, confessedly, notoriously, an inadequate compensation for the labour which he undertakes, the executive authorities of the Poor-Law Amendment Act thereby virtually disregard the necessities and agonies of the afflicted poor, and they convert an Act of Parliament into a piece of insolent mockery. If the contract system, screwed down to the very last turn, be so exceedingly efficacious in the case of medical practitioners, why would not the same system be equally efficacious in fixing the salaries of the Commissioners and their worthy assistants? This branch of the subject must be mentioned in Parliament. It is really a pity that the Commissioners should be shut out from benefits which they so liberally bestow on other individuals. Why should they be encumbered with two or three thousand a year, when other persons might be found, caually connetent to discharge their duties. for five hundred pounds per annum? If the contract system is to be pursued, let it be carried out to all functionaries throughout every department of duty in the new

In making contracts with medical practitioners, every person, who is not utterly callous-hearted, will at once admit that the most scrapulous attention should be given to the means which the surgeon may possess of fulfilling the engagement which is enjoined upon him by the moral, as well as the written, obligation of the law. If the Poor-Law Commissioners could but behold in many, ay in most, country parishes, the stitute, poverty-stricken, wretched hovels ibited by the claimants on parochial

PARKET S

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shut out from them their only source of hope and comfort in the hour of bodily affliction and mental agony. missioners may state, perhaps, that they are uninformed on these subjects, and that they consider that their duty to the rate-payers, as well as to the poor, is best discharged by ratifying, in all cases, the lowest tender which is offered by any medical practitioner who has received from one of the public bodies a legal qualification for undertaking the duties of his profession. In such a consideration there is plausibility, but no humanity. On the contrary, as the Commissioners must know, it is not in the power of a surgeon to attend and do justice to many hundreds of poor persons located over a surface of many miles in extent, for a sum of money, amounting, in many cases, to not one shilling a head for the medicines and attendance awarded to each individual. A thrill of horror darts through the blood, when reflecting, only for a moment, on what must be the consequences, the fatal, direful results, of such a nefarious engagement. With a practitioner thus employed there can be no alms giving; he evidently is not in a condition to afford extra-official aid to the miserable objects of the law's solicitude. He must indeed bimself stand in need of that very assistance which he is made the ostentatious puppet and instrument of giving to others, or he would not, he could not, allow himself to be a degraded tool in the hands of men who appear to be ever occupied in working out the double purpose of destroying the poor, and accumulating insults on the members of the medical profession. The Commissioners and the Boards of Guardians ought to know that the mere testimonial of professional qualification is not a sufficient voucher for the character of that surgeon who undertakes, by contract, to furnish every requisite medical assistance to the parochial poor. Knowledge and skill in such gould descrive universal execus- a case are not all that is required; there are from the sufferers the principles of honour, moral attributes, of the said roceive, -if they existence of which the most undoubted and

positive testimony should be obtained but thousands of helpless creatures are placed at 1 the disposal of his tender professional mercies. What evidence of moral character contractors in the Unione are called upon to have the Commissioners and Boards of exercise their curative functions upon not Guardians demanded and received from the only the most introduct, and most impovemedical adventurers with whom the con- rished, but also the least Mormed, portion tracts have been ratified in the Unions? of the English community, too much stress The mentionen of the office in Somerset cannot be laid upon the dependence which, House will be called upon to place copies of in such cases, is necessarily reposed upon these cortificates before the Legislature. The the humane integrity of the practitioner. whole of this subject, indeed, we are ro- In all instances of sickness, the surgeon, the solved, shall be thoroughly and searchingly physician, or the apothecary, can, if he be so investigated. Instead of treating with pract disposed, conduct himself in a manner which titioners of known and acknowledged re- | shall deceive his unlearned patient; but in spectability, resident amongst the poor,- treating the inmates of our parochial workmoving in their vicinage upon terms of be- houses and hovels, the sufferers are absonevolent and familiar intercourse with the lutely placed at the mercy of their medical sufferers,-strangers have been chosen, attendant,-the mercy of a "contractor," that they carried in their pockets a piece of the poor, resident ten miles from his dishas experience had given some assurance! private individuals? that the skill of the party would be exexcised with honesty of purpose, and with in the case of the poor, is not an adequate kindliness of feeling. A rule, therefore, is remuneration for the duties which the adopted by the Commissioners and Boards, medical attendant is, by law and moral feelof Guardians, in the treatment of the sick ing, required to execute, with what show poor of England, which no man of common of justice can the Commissioners and their sense and benevolence would pursue in the tools insist that the terms shall not be entreatment of brute animals. Can such a hanced, - in a word, that a just compensation system be sustained? Impossible! It is too shall not be awarded? A priori, we should revolting to be tolerated. It is repugnant say that the practitioner who agrees to to the national character of Englishmen; undertake the medical duties of an a and the Legislature, in its wisdom, will sive union at an income varying from best down, - crush for ever, - that authority to 100% a year (including all which has been so growly outraged by the medicines), furnishes h Commissioners, by their insolent assistants, very proposal with

When it is rec whose only claims to notice have been, - first, who undertakes the medical treatment of worthless parchment, called a "diploma," pensary, at a charge of from one to three or "license;" and, secondly, that they shillings for each person-a sum not would undertake, at less than a hangman's amounting to the cost of a single set of wages, to reduce, at a rapid rate, the num- shoes for the bare-ribbed, half-starved back ber of applicants for medicines and paro- which takes him to mock the groans of the chial relief. The Commissioners know, and sufferer. Have the Commissioners over so do the Boards of Guardians, that they paused for the purpose of asking themselves would not treat the horses in their stables, this question,-If medical practitioners are or the dogs in their kennels, in this man-adequately paid in such contracts, what mer. Not a man of them would send to a ought to be said of their charges while treatveterinary surgeon, or a "dog doctor," un- ing the sick in the houses of respectable

If, then, it be confessed that the payment,

indeed, not only offers to obtain money under false pretences. but at the expense of the welfare, may the lives, of the allies afflicted portion of his fellow-creature Buch a man must carry the stamp of cruelty upon his brow. There can be no mistaking the characteristic features of such a being. He knows that in cases of fever, of inflammation, of visceral disease, he may neglect his patient with complete impunity; with complete impunity we say, because the mercenary brute is insensible to the throcs of conscience. In the eyes of the relatives of the victim he stands expnerated from censure, even from accusation, because they are incapable of forming a notion of his guilt. They know not how often the visits should be made,they know not the medicines which should he administered; the practitioner beguiles them with a soft assurance, with a smile of affability, but both emanate from the sanguinary spirit of a vampire.

Nothing can be more narrow-minded or unjust, than to regard the subject of medical contracts in the unions, as being exclusively a medical question. It may suit the purposes of factious and designing writers to restrict the limits of the inquiry within that narrow compass, but we can tell them that I it shall be viewed upon a basis not less capacious than are the boundaries of Eugland and Wales. It is strictly a notional auestion, involving many of the noblest principles of humanity. As such, we shall again and again discuss the subject in the pages of this journal, and as such we firmly believe that it will be fully considered by a henevolent executive Government, and an enlightened Legislature.

Model in Wax, coloured, of the Otic Ganglion and its Neighbouring Parts. Published by

Transport and a second second second

tely beautiful representation conventing part of heman in all but a portion of nature itself. The initiation is so doose, so sipnally striking and true, that the mind is unavoidably turned from contemplating the obvious purpose of the design, to dwell on the marvellous skill of the artist. So nearly animate is the model, that we might almost suppose it to be traced by the hand of Prometheus. Criticism on the production must consist wholly of praise. A more perfect work of art of this description was never submitted to the inspection of the profession.

THE LATE DR. TURNER.

[From an Edinburgh Correspondent.]

All the members of the profession bere deeply lament the promature death of Professor Terrial for although he was not one of those brilliant stars whose rays have materially contributed to illuminate the dark paths of medical science, and his fame as a lecturer did not add much to the removal of the University, yet he was a man of considerable intellectual acquirements, a sound and judicious surgeon, and an assiduous and zealous teacher.

Dr. Tunnen was educated chiefly in Edinburgh, where he served an apprenticeship to Dr. JOHN THOMSON, and was a contemporary of Dr. Gordon, our eminent anatomist. He commenced practice in one of the East-India Company's ships, and was afterwards elected a Fellow of our College of Surgeons, where he became intimately associated with his old preceptor Dr. Thomson, who was at that time professor of surgery to the College. On the resignation of THOMSON, Mr. TURNER Was appointed to the vacant chair. Some time afterwards, when Dr. Thomson succeeded in accomplishing the favourite object of his life, that object to which the whole energies of his intriguing spirit had been directed,-the manufacture for himself of a chair in the University, he contrived also to create a chair of surgery for his eleve TURNER. However much Dr. THOMSON was to be reprobated for the manufacture of those chairs, and the mode in which they were obtained from the Government, no one had any personal objection to offer to TURNER's appointment to one of them, though the object of the creation was palpable enough. The two self elected professors, backed by their political ally at Holland House, succeeded in making their chairs sources of considerable emolument, at the expense of the unfortunate students in the University, for they contrived to get both the topics on which they lectured, addof to the curriculum of " learning" which the pupils were compelled to attend in the mitted to our Edinburgh School.

Dr. Turner died, after only a few days themse, the fille millness, at the 46th year of his age, and scarcely had be taken his lamented depar- no objection, for the same than the same transfer of the confident that I speak the sentiments of more than our friend Pauls.

many, when I say that we want some of: "Nothing is talked of in the scientific many, when I say that we want none of your London pures amongst us. You might world but the new Metropolitan Univer-as well send us a specimen from Rhubart, sity, and none of us can find out a man Hall, or a dowager from Pall-Mall East, amongst our Tory friends, who can apequal, in poetical and in medical talents, to the distinguished individual whom your amiable President inflicted on the University of Glasgow. We are only astonished individuals whom we can think of employthat a pure from one of your great hospitals should think of occupying so unprofitable a Holland and Brodge. They are both, situation in Auld Reckie. There are several as you know, every body's men. Holother individuals canvassing for the chair, LAND's habits would enable him to find out and some of them of pretty good pretensions. December 11th.

INTERCEPTED LETTERS.

enough that a few hours before your letter struction the rights and privileges of our arrived, I had received the inclosed note, venerable institution, addressed to you from Madame V. You will "In the meanwhile so well as you do.

tion. It will not occupy more than thirteen come so diminished. Let us make an effort than it's worth. I told him, however, that are several men who have been lately pur-200 at most, for the first edition.

by a Fellow, would not object to the labour, "As to our College;

ture for that bourne whence no traveller called professor at least design the winter. returns, before a successor to the surgical lie has made a kind of promises to lecture chair of the University became an universal theme of conversation in the medical world of this northern division of the empire. Hardly, however, had the subject been broached, when, to the dismay of some, and in his personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that in a some hardly subject some large personal appearance, and that subject some large personal appearance, and the subject some large personal appearance personal appearance personal appearance personal appearance personal appearance personal appeara the astonishment of others, Mr. Liston are gown he would make a most interesting and rived from London. It is now, however, impressive lecturer. I have also assured generally understood here, that the appoint- him that he will have numerous invitations ment of Sir CHARLES BELL is the alterna- to dine with the Archbishop. This pleases tive which will be consummated; but I am him, for no man enjoys a gastronomic fete

proach the Government without a suspicion being created, that would injure rather than help our sacred cause. There are only two ing to discover the secrets. I allude to HOLLAND and BRODIE. They are both, something, and BRODIE, who loves to work under-ground, might contribute his aid. I know your dislike to any thing like intrigue, but we must employ men of that kind when circumstances demand. The secrecy which is preserved respecting the details, affords us reason to fear that your apprehensions are too well founded, and that all our ex-"DEAR SIR HENRY, - It is singular ertions will not avail to preserve from de-

" In the meanwhile, however, as a certain perceive that she is very desirous to have quantity of time must be required to carry the benefit of your able assistance. I am the diabolical project into operation, we informed that she has an impression that must strive to raise what monies we can the 'subordinates' under whose care she for the support of the College. I have kept now is, do not understand her constitution the Fellows in total darkness about our finances, and none of them know that the "MURRAY consents to publish your ora- building is deeply mortgaged, and our inpages of long primer type, well spaced, so to get a few more applicants before the that he fears that one shilling will be more licensing system is crushed by law. There you did not publish for profit, and that you chasing degrees abroad, who I think would would distribute many copies gratis-but jump at a proposition from our College. The that he need not throw off more than 150, or Scotch degree market being shut up, the . subordinates have latterly sent to Franken-"I have had much to do with Pants. hausen, or some such place in Germany, He is one of those old birds that is not to be for degrees. I will procure a list of these caught with chaft. I shall, nevertheless, from the city, and, if you approve, will at keep rallying him, and driving at him. In once propose to sell them our licenses. We the meantime, something under the name must let them understand that the examinaof 'Lectures' on Materia Medica must pro- tion will be very mild, simple, and goldleceed in the Strand. We must get some one manlike, - just such as CLENDINNING, who, to act as pro-tempore lecturer. I imagine by-the-by, has regularly come overse our that none of the Fellows will undertake the unprofitable task; but, doubtless, some one Parliamentary Committee

Taken the iii you will, in liberal ma and coffee, &c. moment that political matters are so settled sides, it was just to me that the world should for the session that you know what minis- at least suppose him to hold a high opinion ters and dignitaries can safely be asked on of me, for I mean to skim the cream of his the first night. I hope you will find leisure to compose a paper on the death of some unaccountable how great an interest all your papers create, and how much more people seem to wonder at the mode in which an illustrious man leaves this sublunary world meeting on the 22nd, and we are full of tiful and obliged servant, J. Mc. M. " London, Dec. 1835."

CHANGELIOR of the ENGREQUER to ask the right honorable gentleman how far the new University scheme will affect our school. Deputations are going from St. Bartholomew's, the Middlesex, the Bricks and Mortar in Webb-street, and several other recognised schools, and we shall be proud of your company from our own. Ever yours,

" B. HARRISON.

"Treasury, Guy's Hospital, Southwark, Dec. 12th.

My DEAR Sta, -- I think you will get on better without me; I am very busy in my museum; but Mr. BALDERSON shall go tell your Majesty, as he may most correctly and wisely, that you ought to know a d-d sight better than he, what a liberal plan will do for all the schools.-- I know well enough what it will do for our College. In fact, I have long been convinced that in its present form and constitution it cannot last. I don't speak of its fate with regret. It has had its day, and I may tell you plainly, that I intend, in the present inevitable state of things, to give the Goreramest all the support in my power, in arrange-ing their new scheme. Ever yours, my dear A.C.

Conduit Street, Dec. 13th."

MAG.-Poor WARREN is dead. mar last why I have gone down to him, when I must have little estimation he beld

The Fellows that me. I am aware that WARREN never appreclated my talents as he ought, but that they will take place the benefit of them when he was ill. And, bepractice-such of it at least as is left. I was rejoiced to see, in our last number, the more illustrious personages. To me it is Manchester weaver's notice of the Chapter on Mind, in Elliotson's Physiology, and I can tell you how to turn it to account for me, who have worked so hard for you. It has struck me that the Professor at the than a man in the humble walks of life. London University is not unlikely to step We all look forward to your speech at our into WARREN's shoes, for WARREN was also a liberal, you know, and to prevent this the anxiety to know more of the reasons why opportunity occurs of getting up a cry of the Ministers have not consulted you in the materialism against Elliotson. It looks new University scheme. I remain your du- rather odd, to be sure, to see the Manchester critic seizing at this time of day upon opinions which have been in so many old editions of the Physiology; but never mind that. It will seem to the public all new, "DEAR SIR ASTLEY, - Will you join a und the way to proceed is this: - Advertise deputation from Guy's Hospital to the Manchester article every where in connection with ELLIOTSON'S name. Attract attention to it through the papers. Call it an " Elaborate and Convincing Refutation of the Doctrines of Materialism broached in Dr. Elliotson's Physiology." or something of that kind-in capitals, well displayed; I'll pay the cost. You know me too well to doubt that. Only do it well; frighten the old women-every body - and raise a proper feeling of indignation in the public mind. These are "no popery" times, and all liberals should go to the stake. In the mean while I shall set every other wheel in motion to forward my object. I have plenty of time to attend to the matter, having given up my appointas my representative if you do not ob- ment of Medical Examiner to the East-India ject. In truth, however, I think it is a Company, though, by the way, I have sat useless mission, for I expect that the in the chair so long-ever since I com-Chancellon of the Exchequen will only menced practice (thanks to my uncle, the Governor'-that I leave it not without a pang. By-the-by, some, I find, suppose that the Company will give the appointment to a physician who is practically acquainted with the diseases of tropical climates; but I don't consider that at all a necessary proviso. Indeed, the credit I have earned in performing the duties, proves the contrary, and I believe it will be given to Hume, as the Duke has made interest for him. send you no articles at present; but if you are dry in a fortnight, I'll help you with a page or two. In the mean time be assured, that whenever I am away, my patients shall be sent to you; but don't order any mice panis, or else write too obscurely for inquisitive patients. Yours at all times,
"F. W. C.

"Brook street, Dec. 5."

THE METROPOLITAN UNIVERSITY.

To the Editor of THE LANCET.

Sin,-As the enclosed letter to the Rt Hon. T. S. Rice relates to a matter of great importance at the present time, I shall be obliged by its insertion in your pages. am, Sir, yours, &c., JOHN Errs, M.D. 89, Great Russell-street, Dec. 17, 1835.

To the Right Honourable THOMAS SPRING RICE, M. P., Chancellor of the Exchequer.

Sir .- When Vice clothes itself in the garb of Virtue, she is the more dangerous, because more difficult of detection; and hence, sometimes, even the good embrace her, without being aware, until the consequences of the embrace become apparent, of the hideous being they have acknowledged.

Thus attired is Monorouv.

through the kingdom.

pay any effectual regard.

moval of the evil shall be effected by the infisence of public opinion, acting through power of conferring honorary degrees without the degrading condition of submitting to sought for been granted.

versity should be established in the Metropolis, combined together; and, by subscribing for certain shares, constituted a large proprietary of shareholders, who determined to

raise an edifice

The building were appointed and the system of instrucwas made by the obtain a CHARTER, not merely of independent but to the charter, Forthwith an attempt

University

not merely of indiporation, but to secure to them the power of conferring degrees, It seems, moreover, from the nature of the motion of Mr. Tooke, in the House of Commons, on March 26th, 1835, that a royal charter of incorporation had been drawn up and approved of by the law officers of the

Crown in the year 1831.

Now, Sir, what would have been the consequence of giving such a charter to the London University? What but the establishing another monopoly: a monopoly of teachers.

The proof is easy. The object of a college and of all schools is to teach. The skill of the teachers, and the means possessed for To the hatefulness and the injuriousness the manifestation of that skill, ought to be of monopoly, the Government of which you the only grounds upon which any pre-emi-were and are now a member, have testified nence can be claimed. Each teacher beby the measures introduced in various sessions, to destroy, or at least to initigate, tific truths in the most clear and compressions, the evils of some of the most extensive mo- hensive manner. There is a beneficial, a nopolies. So that every imbiasted man scientific rivalry, pregnant with advantage, looking upon these proceedings of the Go-vernment, has come to the conclusion that the necessity is seen, on the part of the Microssequence? To render this apparent, nistry, of abolishing all monopolies, so far take two lecturers, A and B, both of whom as such abolition can be effected with safety, are equally talented. They make known One monopoly that stands must in need that they lecture. They are equal in talent of abolition is exhibited by the Universities to instruct, and in the possession of means of Oxford and Cambridge. These University for instruction. Those anxious to be inties exclude all save those who are of a par- structed hear of their intentions, and deterticular creed, and thus make the honours of mine to place themselves under their inliterature and acience to depend, not upon a structions, some under A and some under man's talent, but upon his religious opinions.

B. But, by some contrivance, B has mathematical maged to obtain a peculiar and exclusive is now very generally felt, and a general cry advantage; namely, that his pupils will be for the abolition of the unsalutary power enabled, by attending his lectures, or teachperpetuating this monopoly, has been raised ings, to obtain a degree, which the pupils of A will not. Does it not follow that plus ad-To that cry it has not been possible, on vantage added to equal talent must give B account of the peculiar constitution of the an injurious superiority? And, in addition, Universities of Oxford and Cambridge, to does it not follow that this superiority must be injurious to A ? And is not the possession What has happened? The evil is felt. of such a superiority a manifestation of the Individuals, not content to wait till the re- exclusive principle, - a monopoly of the worst character?

Such a monopoly would have been estathe House of Commons, and through that blished, had the London University ob-House on the House of Lords, determined tained the charter which they sought. But to realize the privilege of obtaining the they would have obtained a monopoly of a more glaring character, had the charter

a particular creed.

These individuals, instead of going to the ing body. The professors, or the the Legislature, and demanding that an Uni would have become the examiners. The senate would have been the examina own pupils.

. This charter includ

by the Government obviates the harmonic.
And in this view of this important matter mind must agree with Mr. Hame, that " the Government is in the novel position of taking the lead of them" (the proprietors of the University) in the general liberality of the plan."

What then is proposed by the Govern-

ment? It may be stated thus :--

1. That a board of examiners, to be termed the University of London, shall be authorized by charter to confer degrees.

2. That pupils from University and King's Colleges shall be admitted to examination.

3. And that any other bodies for education, whether incorporated or unincorporated, may, from time to time, be named by the Crown, and their pupils be admitted to examination for degrees.

Such are the intentions of Government; intentions indicative evidently of the fact, that degrees are to be conferred upon the prosecutors of every department of learning and of knowledge, divinity excepted.

To this no liberally-minded individual can object. But, in developing the inten-schools. tion, one circumstance occurs which mars degrees are to be conterred are not all who institutions? may be qualified by their learning and knowledge, --- not all who have laboured hard to acquire every necessary information, but this matter with the greatest fairness; but those only who have been educated at "any is it not apparent that the naming the pupils chartered college within the Metropolis."

Now, Su, is not this giving a positive monopoly to the teachers in chartered colleges? Is not this as much as asserting that the education of students is better within the walls of a chartered college than within the walls of any other building? Is not this a spirit of intellectual consecration of bricks and mortar? Is not this a sacrifice to the god of wealth, hecause the largeness of the building seems to Finally. have some weight in the matter? Sir, is it not saying to those beginning their studies in London, " Gentlemen, go to the King's Callege and to the London University (to be called " London University College"); become pupils there, for there you will have talented lecturers: and there, in addition. you will be able to gain honorary degrees?"

But, Sir, it may be said, that the Government plan is not so exclusive as this; for it is expressly stated, in the communication m Downing street to the Council of the den University, dated Aug. 19, 1835, that " Any other bodies for education, whether grated or unincorporated, may, from a be named by the Crown, and admitted to examination

in now proposed clance, that a particular class of pupils is at once admissible to examination for degrees; and this particular class consists of pupils from University and King's Colleges.

Here, Sir, is given at once a priority to those educational bodies over other schools,and why? Are they better teachers at these thus styled "Colleges" than at other schools? Personal comparisons would be invidious, and therefore should be avoided. But it may be asked without fear, Is the education at either of these institutions superior, in reference to the production of real medical qualification for medical practice. to that given at the "private" schools, as they are called?

Let, Sir, an application be made to the examining Boards of the Apothecaries' Company and of the College of Surgeons, and let a report be presented from each body, of the pupils passed or rejected, as belonging to individual schools; and I myself, as an individual private lecturer, am quite willing to abide by the result, as a testification of the nature and of the sufficiency of medical education, as given at the private

Is it then just, Sir, that the pupils of any the beauty of the plan. It is this, that one institution, or of any institutions, should while "the University" can confer all have the priority given them of starting in degrees save those in divinity 'an excellent this intellectual race for intellectual honours, exception,', the individuals on whom these in advance of the pupils belonging to other

I sincerely believe, from various sources, that it is the wish of Government to act in of the London University College and of King's College is giving an undue priority?
It may be asked, "What then do you pro-

pose?"-1 propose, Sir, that the Government of this country, recognising the grand truths, that science has no country, that scientific men have generally been those who have received no aids of collegiate education, should declare, that

Literary and scientific honours shall be onen to every individual, who can prove himself qualified to pomess those honours:

And that, in addition.

Those honours being gained, the individuals gaining them shall have every legal privilege connected with the qualification.

With regard to the latter point, it would evidently be absurd to give an honorary degree as indicative of qualification, and then, afterwards, to require the qualified to pass another ordeal, previous to the realization of the benefits of such qualification.

It is true that such a plan would require the sweeping away, in the present state of society, of many scientific, or rather pseudoscientific, unicances; but the gain would be immense; the loss would be nothing.

And what a noble memento of the Government such a proceeding would be! med, in the preceding What a pleasurable entisfaction would arise

ST MALE STATE

in the mind of yourelf, a member of such a Government, in contemplating the fruits of such a labour! And finally, what a thought to console at the close of an honourable life,-" I have been an instrument in removing a mighty barrier to the diffusion of education and enlightenment amongst the people."

Trusting, Sir, that you are capable of appreciating the high behests connected with the decision of Government on this important question, I have the honour to remain,

your obedient servant.

JOHN EPPS, Lecturer on Materia Medica and Chemistry, and Director of the Royal Jennerian and London Vaccine Institutions.

METROPOLITAN UNIVERSITY DEGREES.

REPLY TO THE LETTER OF "A KING'S COLLEGE STUDYNT."

To the Editor of THE LANCET.

Sir, - I did not expect that the suggestions which I offered in THE LANCET of Dec. 5, respecting the conditions of granting degrees in the New Metropolitan University, would have met with the opposition which "A King's College Student has offered them. I did not expect to be so hastily dignified with the title of "opponent," by a gentleman who is already in possession of those advantages which I merely suggested should be extended to others. But, Sir, as he has appealed to the public to decide which of us is right, I am induced to reply to his remarks, and shall then leave the subject with perfect confidence in your hands, satisfied also in what manner the public will ultimately decide on the question. My opponent takes occasion to reprove me for calamniating a body of men who are "not yet called into political existence." How can I have effected that impossibility? However, the commencement of my letter shows that I did not refer to any set of men, but to consists in the exclusion of all but the ric a proposed system, which I conceived to be from literary or scientific honours, the ne objectionable. But I proceed to his oblections.

Certificates of moral character, he says, are frequently forged. To this I reply, that a written character ought not to be accepted, unless some means are taken to ascertain that it is authentic.

He objects to allowing young men to graduate without having been College Students, because, though it might benefit a few, it would rain the majority, for many who do now attend lectures occasionally, would not then, he says, attend lectures at all. And suppose students did not attend lectures at ali? Suppose they did not study? Why then they would be certain of not obtaining a those, who though risi

In fac degree. think the new system musing ru to any one, it would even students to a sen of the necessity of profession study, and is duce them to seize every opportunity adding to their mental and professional s tainments.

My opponent imagines that I think th students who neglect the lecture-room, a more profitably employed elsewhere study. Those gentlemen who neglect tl lecture-room do so, I should suppose, for f less noble pursuits than those of science. quite admit the benefits of oral instructio I merely argue that if a student does, wit out its aid, obtain as much knowledge one who is in possession of its advantage he ought to be entitled by law to the san honours, and the same standing in society

My opponent next says, that a man car not obtain sufficient knowledge from bool alone, to qualify him to possess a diplom I reply, that a Board of Examiners or fully test this. They can test his knowledg of anatomy and the operations of surgery o the dead body, his knowledge of the pratice of medicine in the wards of an hospita his knowledge of chemistry if need be) the laboratory.

He says, that the duration of the exam nation which would be necessary under th new system, would be so long as to render impracticable in operation. I reply that lengthy examination is not impracticable As it is designed to secure the public again incompetency, the examiners would in doubtedly be fully remunerated for their timand there is no other point than that in que tion. My opponent himself says, that ce. tificates are often forged (and I know the they are often given without being deserved how then can be support a system in which he would allow certificates to play any par

in the conditions of granting diplomas? His last, his most startling, and his only sincere ground of objection, is based on th supposition that the new system would ten to deprive the graduates, as a body, of the respectability. Why, truly, if respectabilit system most certainly would ensure re speciability to the class of graduates; but i as I apprehend, respectability belongs to the mind and not to the pocket, then what is th worth of my opponent's objection? Fe although he may exult at this exclusive sy tem, although he may feel indignant at th thought of a "farmer's or a tradesman aspiring to the honours of learning and skill, yet I can tell him that farmers' an tradesmen's sons deem it as much their righ to aspire to reach the eminences of and will demand (if they should learnt from the corruption. to despise them) equal

in consense. I want a second differen

College " is liberal enough to say the libers no objection to the low-born being raised by their abilities to eminence in a few instances. And why so liberal as regards a few? Because he cannot help himself. Those few have raised themselves already. My opponent and the "exclusive" party, would grant no opportunities to low-born youths to raise themselves. But when, despite all obstacles, despite all prejudices, genius has broken through the castes of society, and raised itself by force of talent to its appropriate station, they then would "not object to a few poor students" occupying stations in the ranks of titled men of science. Whatever exclusions the rich in society may desire to enforce, nature has made no law which peculiarly fits the wealthy for the purposes of literature and science, but rather the contrary. Arrangements of society which set at defiance the laws of nature, are most iniquitous to God and man. In conclusion, let me express a hope that the "King's College Student" will now perceive that he has advocated some erroneous opinions. It is lamentable to hear a gentleman who professes to be a Student of Medicine, with a desire to obtain eminence in the science, supporting the cause of those giddy creatures whom he describes as forsaking the lecture-room for the excitement of dissipation, and doing so at the expense of ardent students who do not chance to be the sons of wealthy men. I am Sir, your very obedient servant,

A STUDENT.

London, December 15th.

METROPOLITAN UNIVERSITY DEGREES.

MONRY AND CERTIFICATE QUALIFICATIONS.

To the Editor of THE LANCET.

Sir,-In differing from the views of "A King's College Student" as expressed at page 420 of a late number of THE LANCET, permit me to make a few observations on the two great questions of subjecting caudidates for medical degrees to a prescribed course of study, and leaving them to follow that which best suits their taste and convenience.

Your correspondent cordially agrees with the proposition, that an unequivocal certificate of good moral conduct should be reed; yet according to his arguments for the present system as a means of sustaining the "respectability" of the profession, he ect this object not by a written morality, but by a plan which, the aspirant an opportunity

ment of King's clear not only opens to a girdy youth an enhim with those "oblivious antidotes," the false certificates, by which he obtains admission to an examination, at a time when, probably, having exhausted his pecuniary resources, exigency compels him to stand the test. To the dread of this test, insdequate as it is, will such an one owe the little knowledge he may be found to possess, and not to any obligation imposed and inevitably exacted by the certificate system. How often does it happen that the candidate, after having squandered away his time, and deluded his friends by the display of certifi-cates of "diligent" attendance on lectures, &c., has recourse to a "grinding," by which he is "crammed" in a few weeks with what is supposed to have taken him some years in acquiring!

Your correspondent's assumption that an expensive education is likely to be obtained only by persons of good birth, is erroneous indeed. Were the degrees given to a student to be measured by the length of his purse, the sons of "farmers" and "tradesmen would carry much more respect than your correspondent seems to allow them. I recollect the landlady of a small country inn, who was bringing up her son as a "doctor," boasting that he would "come out as big a gentleman as any in the land," because, forsooth, she was plentifully supplying him with that which in her estimation could not fail to effect the object. This feeling, vulgar as it is, will have at least the appearance of truth on its side, so long as illiterate young men can find their way into the profession upon a money qualification.

As my object has simply been to show the fallacy of an hypothesis upon which is based many of the arguments in support of the certificate system (which, from observation, appears to me to work very ill), I here conclude. What alterations are most likely to answer, it is not for me to suggest. This is now, happily, the province of an enlightened body of individuals, to whose judgment, nided by THE LANCET, and the experienced voice of its Editor in the senate, the public may confidently commit the cause he has long so ably advocated. I remain, Sir, yours truly,

A LONDON UNIVERSITY STUDENT OF MEDICINE AND SURGERY. December 17th, 1835.

ST. GEORGE'S HOSPITAL.

DISTARE OF THE BONES OF THE ILIUM.

WILLIAM HARDEN was admitted, Sept. 16th, into Winchester ward, when, Sir Bun-JAMIN BRODIE being out of town, Mr. CUTLER took charge of the case, who at socketful of money it is once told the patient that his was not a

F. 1885

fit case for the hospital, and then added that | boy was then! he must take rest and apply poultices, these remedies being of great efficacy in such with two large sinuses (one leading from the trochanter major, the other from the secrum), extending to dead bone. Leeches were afterwards applied, and house-physic was given, and on the 25th of September, Sir BENJAMIN first saw the man. We then learnt that about eight years ago he first felt pain in the affected hip, for which a surgeon to whom he applied, also recommended rest, at the same time opening two large abscesses (which have now degenerated into sinuses) and letting out a large quantity of matter. The pain has continued wards, and the fore-arm being half flexed, more or less ever since. The hip-joint is the bones were drawn away from the joint nearly anchylosed, but the patient complains of no particular fixed pain in any part of the limb. The thigh of the same side is enlarged, but there is no perceptible difference in the length of the two limbs. He was ordered half a pint of the compound decoction of sarsaparilla, with two drachms of the extract of sarsaparilla daily, and the boy left the hospital with his father. one-eighth of the oxymuriate of mercury in a pill. This plan of treatment (according effect on the constitution.

Oct. 9. The patient has steadily persevered in the use of the remedies until this ever. The physical force of arms, legs, and day, when the oxymuriate of increury have towels, was therefore employed. Mr. KEATE ing deranged his bowels, it was discontinued and Mr. Basington were antagonists to pro fempore, and he was ordered the Infu- Mr. HAWKINS, but their strength was soon sion of Casparia with Tincture of Kino, twice exhausted. The board-room is the spot or three times daily.

much benefit. The diarrhox is better, and it was not deemed advisable to trouble any there having been some sero-purulent dis- of the gentlemen who assemble on these charge from one of the sinuses, Sir B. BRO- occasions, with an exhibition so well calcu-DIE laid open a fresh abscess at the upper lated to shake their nerves. and outer part of the thigh, from which blood, pus, and putrid coagulum, were discharged. A poultice was ordered to be applied, and the sarvaparilla medicines to be continued. The man's countenance is pallid, unhealthy, and auxious.

DISLOCATION OF THE RADICS .- A little boy was admitted with this injury about four months since under the care of Mr. Keate. The accident occurred from his being thrown from a pony. He was brought to the hospital about a fortnight after the accident the tumours of the finger had supervened, had occurred, and Mr. KEATE first tried to reduce the dislocation over his knee, but failed. Several other attempts were made, by manipulation, and extension with towels, at various times, but all of them failed; and but was not obtained. after the boy had been in the hospital upwards of a month, a consultation was held as to the propriety of making further at-tempts, and decided in the affirmative. The mission-rees, Sept. 10

nameatic and to be bled s being of great efficacy in such Notther & these discussion, however, was The case in which this treatment complied with, as he left the hospital, Nother of these direct was to be adopted was one of discused bone though he returned again on the following of the left ilium, of eight years' standing, day. We then examined the arm (the left) and found the radius dislocated backwards. upon the condyle of the humerus, with much thickening of the parts around, some Ggamentous adhesions having, probably, formed around the displaced head of the bone, to such an extent as effectually to prevent reduction. Our prognosis was verified on the boy being again brought into the operating theatre. Extension by pulleys was steadily made for five minutes, but the bone did not move. A towel was then passed over the humerus, to hold it as a fixed point backin a similar manner, while Mr. KEATE, by manipulation and rotation, endeavoured to move the bones, but to no purpose; some ligamentous adhesions were broken down. but the head of the bone did not move from its abnormal situation. A bandage and a bent splint were then put on the arm, and

WANT OF APPARATUS. - We take this opportunity of remarking that there exists to Sir B. BRODIE's usual method! will be no mechanism in the operating theatre for persevered in for some time, to produce an the reduction of dislocations. One staple only was driven into the wall on this occasion, and that proved to be of no use whatgenerally fixed upon for reducing disloca-21. He has continued the medicines with tions, but it was the weekly heard-day, and

> CONGENITAL OSTEO-BARCOMATOUS TE-MOUR .- A patient was admitted some time since under the care of Mr. Hawkins, with this species of tumour affecting the external condyle of the left ulnar (congenital, so far, we understood), and the first and accord phalanges of the ring-finger of the same vide. The finger being removed, Sir B. BRODIE observed, that he had met with a precisely similar case, in which the tumour near the olecranon had been congenital, and as in the present case. The man has gone on well since. He was very restive during the operation, and something more f common chair was required to restrain

INJURY OF THE

La Contrata de la contrata del contrata del contrata de la contrata del contrata de la contrata de la contrata del contrata de la contrata del contrata de la contrata del contrata del contrata del contrata del contrata de la contrata del contr

for the care of Nir B. for the care of par partition of the countenance was extremely idjette, and had countened that countened the appearance of his baving just a from an epileptic fit. The only account then obtainable was, that he had been shot in the head, and he was observed to have a drawing back of the head. In consequence of his distressed appearance he was immediately sent to one of the upper wards to On making some further inquiries into the history of the case, it appeared that about a month since he had been shot in the back of the head over the occipital region, and that some of the shot had been extracted by a medical gentleman who attended him. He has now but little power over his lower limbs; the senses of sight and hearing are very much impaired, and he complains of great pain over the whole re-gion of the head. He was immediately ordered calonel and opium.

Sept. 23. Sir B. Brodie saw him to-day, and ordered the medicines to be continued; a blister to be applied over the back of the neck, and kept open by the green savine ectate.

25. He is quite amaurotic, and his sense of hearing is still very imperfect. The drawing back (opisthotonos of the head, which was very great when he was admitted, today is so newhat less; the blister has discharged freely, but by some mistake it has been dressed with savine and mercurial ointment mixed, and this double mercurialization of the system by blister externally, and the calomel internally, has affected the mouth, and his gums are red and spongy. The head was ordered to be shaved, and the present blister to be dressed and healed, and another put on higher up over the occiput, and kept discharging with savine corate only. The calomel and opium, which had been given three times a day, were ordered to be given only once daily.

Sir Benjamin Brodie remarked that this case was a very interesting one, and requested his clinical clerk to keep an account of it. In all those cases of injury to the brain, in which opisthotonos had been remarked, in which he had witnessed the post-mortem examination, there had been found a collection of pus about the tubercuhum annulare and medulla oblongata. "I have seldom (he continued) observed loss of vision in these cases, but as it is now said that the optic nerves can be traced as far back as the corpora quadrigemina (the testes), and as these parts are all situated near one another, it is but fair, I think, to mude that there is some deposition of pus seese. I remember one case of injury and in which there was loss of sight, death, there was found a transof the bones at the base of the contic nerves were disthe sphenoid bone.

idiote, and had displayed by account then been shot in read to have a in consequence is weet things sweet, and yet the patients have respectively as a few that the patient. I have known the patient to be in consequence in consequence is weet things would taste sour, and bitter the was immentally as the patients have respectively.

Oct. 2. The same treatment is persevered in, and with very good results. The deafness is less and the amaurosis diminishing.

The opisthotonos is nearly gone.

Oct. 10. Since our last report he has had rather a severe epileptic fit, the peculiar phenomena of which it buffled the nurse's skill to describe. He was bled, and took calomel and Eprom salts to affect the howels, which have been very sluggish. The "head" symptoms remain much the same, without any progressive amendment.

same, without any progressive amendment.

20. He has had frequent returns of epilepsy, for the relief of which Sir Benjamin ordered him to be put on full diet for a few days, but without, as may be supposed, producing any sort of influence on the attacks. His other symptoms are much the same,—certainly not better. The sphincters ani and vesice are relaxed; as the nurse says, "the does everything under him." Sir Benjamin thinks that the disease is beyond the reach of medicine, and looks to the pathology of the case with interest.

THE refusal of Mr. LISTON to accept the Chair of Surgery in the University of Ediaburgh, does not appear to have been by any means satisfactory to the feelings of some of the magnates in modern Athens. In reply to an article which appeared in the Scotchman of last week, the London Courier evening paper, of Dec. 19, wrote as follows:—

"The notice which our worthy conternporary the Scotsman has taken of an article in last Saturday's Courier, relative to the recent appointment of Sir Charles Bell to the Chair of Surgery in the University of Edinburgh, as well as the remarks made upon that article in the Town Council of Edinburgh by one of the members, render it indispensably necessary for us to reassert the accuracy, to the very letter, of that part of the article in the Courier, in which it is stated that " as soon as it was ascertained, by reference to Mr. Liston, who has lately settled in the metropolis, that he would not forego his prospects in London for any of the medical chairs in the University of Edinburgh," the members of the Edinburgh Council resolved to elect Sir C. Bell.

"Mr. Liston, we have reason to believe, received the first intimation of its being the

wish of certain members of the Council to alluded, will bestow the vacant Chair on him, when he was recently in Edinburgh, to which he had been called soon after the death of Professor Tunner, to perform an operation of no trifling description. The truth of our assertion, however, does not depend on verbal conversations, but on the unerring testimony of written documents, which passed between members of Council and Mr. LISTON, and which have been in our hands.

"Sir CHARLES BELL's friends scem to us to have acted injudiciously, and to have shown more sensitiveness than discretion in originating this discussion. Whatever may be the respective merits of Sir CHARLES Ball and Mr. Liston, we certainly never meant to institute, in the columns of the Courier, any comparison between these eminent professional men, either as public teachers or as skilful and able surgeons. We merely stated facts known to us, and whatever might have been our private opinion as to the result of the election, had Mr. LISTON as well as Sir C. BELL been in the field, we neither assumed nor insimuated Hapital, expecting the selected to the chair, had be been willing out permission. We cannot politish it with been elected to the chair, had be been willing out permission to append the name of the writer. The answert to obtain populs at new establishments, I had to accept it. His decided refusal made the election of Sir CHARLES BELL " the fittest admissions at the outset of their career. individual, who was willing to accept the

"We are surprised that the report of the does not contain what was said by one of saling Surgeon,—no yet had time to consider the does not contain what was said by one of saling Surgeon,—no yet to prove some long commute members of the Town Council, in answer meature from correspondents both in own adcount to the speech remarking on the article in try, forwarded for insertion in our columns. this Journal, nor other details of the discussion which we understand took place. We dead could not, we are sure, by carried into other hope that at the next meeting of Council, the Member of Council to whom we have correctness of this opinion.

ron's letter Mdate for the bisi

In the press, and speedily will be published by John Murray, Albemarie-street, "Oratio ex Harveii Instituto, habigi aslibus Collegii Regalis Medicorum Die Junii 25, 1835, Ab HENRICO HALFORD, Regis et Reginæ Medico, præside."

Clinical Illustrations of the more Important Diseases of Bengal, with the Result of an Inquiry into their Pathology and Treatment. By William Twining, M.R.C.S.L. Second Edition, two vols., 8vo. Parbury and Co., London, 1835.

CORRESPONDENTS.

WE must use the letter from St. George's subkets to best to many

individual, who was willing to accept the situation," unanimous, and of course without opposition.

T. H. B. The paper will be inserted. Our arrangements have not hitherto allowed it to appear. In the proposed communications, brevity should, where it can intellify, be observed.

We have not yet had time to consider the

The proposition of a King's College Stu-

METEOROLOGICAL REPORT.

(Ratract from a Meteorological Journal kept at High Wycombe.)

Days.	Thermometer.		Barometer.		Rain.	Wind.	Weather.
2	Highest.	Lowest.	Highest.	Lowest.	Ins. Dels.		
Dec. 7 8 9 10 11 12 13	36.25 37, 26.25 30, 29.50 33.50 37.50	28.25 33.25 38. 16.50 17.50 26. 26.50	29.89 .84 .84 30.10 .03 .05	29.88 .54 .57 30.03 29.97 30.02 .05	0.125 — — —	N.W. E. S.E.	The whole of the week fine and seasonable, with rain on 8th.

138.4

HE LANCET.

LONDON, SATURDAY, JANUARY 2, 1836.

F1835-36.

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL,

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine of Paris.

LECTURE VI.

ANEMIA OF THE BRAIN AND CEREBRAI REMORRHAGE.

GENTLEMEN,-We have now traced the complication. history of two of the great divisions under which we arrange diseases of the central part of the nervous system, viz., congestion and inflammation. We shall now, there-litself, or coincide with a similar state of forc, pass to a consideration of the accidents aucinia in the rest of the body. Thus we connected with anemia, and then terminate have frequently occasion to observe it after this part of our subject with cerebral he- the occurrence of considerable hemorrhages; morrhage, or apoplexy.

which is especially remarkable in this point cause is often seen in children affected with of view, that it often gives rise to pheno- acute gastro-enterite, at the termination of mena which very closely resemble hypere- which we observe symptoms that seem to mia, and yet it is evidently a matter of the announce a state of irritation in the brain, utmost importance to distinguish these two while, on the contrary, the organ is anemic, opposite states from one another. In prac- and presents, after death, an extreme degree tice, you will frequently have to ask yourselves this question, " Do the functional derangements of the nervous system which present themselves, depend on too great an general quantity of the blood, or a deterioafflux of blood to the brain, or are they ration of its quality. Here the disease is connected with a condition quite opposite, confined to the brain alone, and depends on viz, anemia?" It is unnecessary to say, that hypercuia and anemia will require tion in that organ. Afterent modes of treatment; let us, therecase; and first, for the

LCharacters of Cerebral Anomia.

stance of the brain. The gray substance is much more pale than in the normal state: it contains a less number of vessels, and thus approaches in its general appearance to the white or medullary portion of the brain. In some cases the organ looks as if it had been macerated in water for a considerable time: and BILLIAND relates that he has sometimes found the cortical substance of the hemispheres so completely decoloured and pale. that the surface of the brain resembled a mass of modelled wax. The state of the nervous centre just described, may exist alone, or become complicated with other changes of structure. In some cases it has been observed to coincide with a peculiar hardening of the cerebral mass; in others the brain is softened, and does not present its usual consistence; however, we now propose to examine anemia in its simple form, when it exists alone, and without any

Its Symptoms.

Anemia may be confined to the brain or it may be a consequence of chronic or Anemia of the nervous centres is a disease acute disease. The influence of the latter of paleness. Sometimes, however, anemia of the brain may occur without any disorders which indicate a diminution in the causes peculiarly influencing the circula-

Anomia gives rise to the existence of cerlitter into a few considerations on this tain symptoms, whose connection with it as a cause we can prove upon living animals. If we bleed an animal to such an extent as suddenly to deprive him of a large portion mervous centre is charac- of blood, we give rise to a series of sympwould lead you to sup-toms that, under other circumstances, we of the sub- might easily attribute to excitement of the nervous system, and the animal is seized and wholeson with general convulsions, and these become more and more intense in proportion as the brain becomes empty. In the human subject we observe the same phenomena. After traumatic hemorrhage, copious loss of blood in uterine hemorrhages, &c., the patients are frequently attacked with nervous delirium, convulsions, and other symptoms, which we have pointed out when treating of conges-Hence we establish this general rule, most important in practical application, that a diminution of the normal quantity of the blood gives rise to the same symptoms as hyperemy, or an increased quantity. Look at the digestive organs: a difficulty of digestion coincides equally with an increased injection of the mucous membrane of the stomach, and with an abnormal paleness of this same membrane. In the latter case, as in the former, digestion is troubled, because fashion, the intellectual faculties of the prithe organ no longer receives the quantity of | soner commenced to show some symptoms blood necessary for the normal accomplish- of trouble; his strength and flesh declined ment of its function. In the lungs, dysp-at the same time; finally, he was seized not sequally produced, either by an hyper-emia more or less considerable of the pul-came afterwards more and more furious; monary tissue, or by the fact that the the patient cried out from time to time in find enough of blood to vivify. In the was constantly surrounded with horrible centre of the circulating system we may figures. The physician called to attend him observe a similar phenomenon; thus the in this dangerous state, having informed of blood, and in the opposite condition, consisted in the abstinence from spiritu-when its cavities are imperfectly filled by a ous liquids which he was compelled to obpoor and impoverished fluid.

These examples we might multiply infinitely. The nervous centres furnish us effect of this change of regimen was soon with a great number. We may therefore, I say, lay it down as an established principle, that the brain, like the other great apparatuses, presents specific symptoms when it ceases to be stimulated by the normal quantity of blood. Let us briefly chumerate these symptoms. They are, 1st, Those connected with the intelligence. Delirium is a common symptom of cerebral anemia. Dr. PAPAVOINE, an ex-interne of the Hopital des Enfans Malades, has published several cases of children affected with the most violent delirium, and dying in this state. After death no other lesion could be discovered in the brain, except a complete decoloration of the gray substance which appeared confounded with the white. We observe the same delirium in persons accidentally submitted to a forced abstinence, or in patients weakened by a former malady, and kept on too severe or prolonged a diet. In these cases we observe functional disorders, resembling closely those depending upon congestion, but certainly in no way connected with that state, for they gradually disappear as the blood is regenerated, and under the influence of a generous

A remarkable case of this kind has been published by a German physician, Dr. HANSBRANDT. It illustrates perfectly the point we have just advanced: - A man, given excessively to drinking, was thrown into prison for theft, and of course reduced at once to the prison diet, bread and water. After a week or two living in this new air, in penetrating the vesicles, does not the most agonized manner, and thought be beart is equally affected with palpitations himself of his previous habits, suspected that when it is distended with an over-quantity; the cause of his mania and other symptoms serve; he therefore ordered a small quantity of brandy to be given twice a day; the obvious; the cerebral accidents gradually disappeared, and the patient recovered his flesh and strength, and continued to enjoy perfect health during the remaining period of his detention.*

The faculty of movement is also more or less disturbed, in consequence of cerebral anemia; thus, we have already noticed the convulsions which supervene after copious hemorrhage, or in animals from whom a large quantity of blood has been designedly abstracted. The sensibility is sometimes modified in a remarkable manner; the least stimulant produces effects infinitely more rapid and energetic than we observe in the normal state of the economy. In several cases of anemia, it is not rare to see a marked exaltation of sensation. If we place a blister on the skin, the sensibility is awakened at once, acute pain is produced in the part, and the whole system partakes of the excitement. This is a point to which you should pay attention in practice. your patient's strength has been on ably reduced by sanguineous em particularly cautious and re employment of cutaneou

Examples of this kind are chiefficen in children, or an individuals endowed with what is called a seon in children, or .a. nervous temperament. You have already seen how hyperemia and inflammation of the brain are often produced by increased stimulation of that organ. We may produce the same effects, or, rather, give rise to the development of exactly similar functional disorders, by withdrawing the quantity of any stimulant to which the brain has been accustomed.

[·] Journal Hebdom. de Médecine, Dec. 1825.

ningle blister, a: produce a degree or socal distr general excitement which you great difficulty in mastering.

Treatment of Anemia.

We have now laid before you the prominent characters of anemia as connected with the central organ of the nervous system. It remains to say a few words on the treatment of this disease. The analogy between the symptoms of hyperemia and anemia has been frequently alluded to. Your first care must, therefore, be to distinguish between them. Having once satisfied yourselves that the nervous symptoms under which the patient labours, depend not upon congestion of the brain, but on anemia, the indication is a very simple one. You must employ every means in your power, by which the normal quantity and quality of the blood may be restored; in a word, you must make new blood. Be careful above all things not to attribute the phenomena of cerebral anemia to any other cause, or you may commit the most fatal errors in practice. Thus, for example, when a patient in the last stage of typhus fever, after twenty or thirty days' suffering, after strict abstinence &c., is seized with delirium and other cerebral symptoms, are we at once to conclude that he has congestion or inflammation of the brain? Certainly not. Support your patient under these circumstances with moderate cordials, light nourishments, &c, and you cure. Bleed him, and you hasten effusions of blood. Again, the hemorrhage the fatal termination.

CEREBRAL MEMORRHAGE.

We have now studied several morbid conditions of the brain; we have next to take up a subject to which more interest is attached than perhaps to any of the questions that have hitherto occupied our attention; we have to investigate the nature, symptoms, and treatment, of cerebral hemorrhage. This disease, as you know, has been long known under the name of apoplery, a term employed to indicate a sudden loss of motion, sensibility, and intellect, supposed to depend upon effusion of blood into the brain, but I think that

We cannot preserve the word " Apoplexy" any longer in the Science.

It is too vague; it does not indicate with precision the material change in the organ. hut, like all other similar terms capable of various interpretations, it lends itself to every theory, and in the end serves no real ose but that of covering our ignorance. in give rise to the same symptoms Eviz., sudden loss of conscious-See how the effects of sim-legamolisms ment, &c., are

be enough to On the other hand, hemorrhage into the substance of the brain (the essential anatomical character, remark, of apoplexy) may take place without producing the ensemble of symptoms compressed under the word apoplexy. Thus we may have hemorrhage of the brain without loss of intellect. may observe loss of intellect, and derangement of sensibility, while motion remains intact. You will see this presently. We therefore, I say, must reject the term apoplexy from medical nomenclature, because it refers to various forms of injury in the brain. We reject it, because it represents. identical symptoms depending upon various and quite different causes.

Situations of Cerebral Hemorrhage.

Hemorrhage of the centre of the nervous system may occur at any point of the cerebro-spinal axis. However, it has been observed more frequently in the substance of the hemispheres than in any other part. Again, there are certain portions of the hemispheres which seem much more subject to this accident than others. from an examination of a large number of cases of cerebral hemorrhage, we find a great majority to take place in the nervous pulp, on a level with, and outside of, the corpora striata and optic thalami. One or other of these latter parts may be attacked in an isolated manner, or both together; but it would appear that the striated bodies are much more subject than the thalami to may exist beyond the points we have just mentioned, or in the mass of nervous matter called centrum ovale. Finally, in some cases the effusion of blood does not take place in the interior of the brain, but at its surface. The blood is shed between or on the convolutions, and then represents an uniform layer, spread over an entire hemisphere; or it may be confined to a single

There are, again, other parts of the cerebro-spinal axis in which effusion of blood may take place, but much less frequently than in those we have now spoken of. Thus, hemorrhage occurs in the substance of the pous varolii, or in the prolongations which it sends off to the cerebrum or cerebellum: or, finally, in the substance of the latter organ itself. Apoplexy of the cerebellum is, however, a very rare disease, and hore. as in the cerebrum, the effusion may have its scat in the median lobe, or in one of the lateral hemispheres. The medulla oblongata also presents us with examples of hemorrhage, and the spinal column in any one point of its extent.

The central parts of the brain, properly so called, are much less frequently the seat of hemorrhage. Thus it has been cheeved but seldom in the inferior part of the cen-trum ovale, and in the septum lucidum in

Authors sometimes speak of whitish, another species of hemorrhage, viz. that 's which takes place in the interior of the ventricles; but these also are rare. We certainly find blood effored into the cavity of the ventricles in many cases of anoplexy; but if you examine with care, you will find the blood has made its way from the nervous pulp surrounding them; or, for example, when the septum lucidum is broken down, the blood may traverse that space, and pass into the other ventricle; both cavities will then appear full of blood, but there is almost always a communication between them and the accidental cavity formed by the effusion of that fluid into the substance of the brain. The hemorrhage may take place in the tissue of the pia mater, which envelops the cerebral convolutions. This form of effusion has been called by M. SERRES " meningeal apoplexy;" it is a very rere variety, and when we have occasion to This is a question of some interest in the observe it, we generally find at the same history of apoplexy. It may remain untime an effusion of blood in the brain. The changed until the death of the putient, or, fluid finds its way into the membrane from under other circumstances, it may gradually the apoplectic cell, in the same manner as diminish, and eventually become absorbed, it does into the ventricles. Sanguineous In this latter case nature performs an exeffusions into the centre of the nervous system readministry and beautiful operation, which tem differ considerably in extent in different commences with the removal of the effused cases. Sometimes the cell is excessively blood, and terminates in the cure of the pasmall: so insignificant that it would scarcely ticut. We have already noticed the changes contain a pin's head. In other cases the that take place in t'e blood contained in an bemorthage has been abundant the cell is apoptectic cavity. At first dark and fluid, it wast, and occupies nearly the whole of the gradually loves its colour and consistence, hemisphere. The number of these apoptection the aboutting of the more fluid parts. sic cavities is as various as their extent; we At hogth we find that nature has prepared may find but a single ove; sometimes two an apparatus for its note complete temoral. or more. In some cases, on the contrary. The coagnium is new contained to a round the brain appears, as it were, riddled with or uregular cavity, whose parietes are lined an immerse number of these hemorrhagic by condensed cellular membrane, forming a cavities, which have been formed either at yellowish cyst, very analogous to a serous the same time or successively, one after the cyst. This cyst secretes a kind of secons other. Certain effusions of blood exist free fluid, whose use appears to be to penetrate quently alone; for example, those seated in the coagulum, separate the different parts the different parts of the hemispheren; but of the blood, and render it more easily ab-others, on the contrary, do not occur unless, sorbed. Still later, upon examining the we have effusion somewhere else. Thus in by cyst, we find nothing but serum or a gelafar the greater number of cases where blood tinous fluid in its cavity. The parietes are has been found effused into the substance of connected together by a number of fibrous the cerebellum, an hemorrhage has at the bridles that pass from one side to another, same time been discovered in some one and intercross in various directions. The part of the cerebrum; and this is perhaps effused blood is now completely absorbed, one of the principal reasons why apoplexy of but nature does not rest here; she now the former organ is so little known, why we commences the task of removing the evet : are so imperfectly acquainted with the his- and the latter having enjoyed for a certain tory and symptoms of hemorrhage of the time its provisional existence, is gradually cerebellum.

The Appearance of the Effused Blood

varies much, according as we have occasion to examine it at a period more or less removed from the instant of its effusion. In recent cases, the blood is generally of a blackish colour and liquid consistence; at a nected manner, by Messra. Re-later period, it resembles currant jelly, sur-rounded by some blood still quite fluid. Still cicatrisation in the later it becomes more solid, yellowish, or the process allow

loges entirely its lour and up barance. If we neek

the part from which the hemorrhage takes place, we find two different sources. let. In some cases it is effused from the capillary vessels, and on examination we are unable to determine the exact point whence it has proceeded. 2nd. A vessel of some magnitude may bave been ruptured, and given rise to the effusion. In this latter case, we can frequently discover the injured vessel on the surface of the apoplectic cavity, but it is right to warn you that in some other cases the ruptured artery has been found very far from the neighbourhood of the effusion, with which it is connected by a pedicle that might easily escape notice.

The Blood once Extravasated from its Vessels, what becomes of it!

This is a question of some interest in the effaced, until no trace remains of the original accident, except a simple linear cicatrix, or a cicatrix with puckering and depression of the cerebral substance.

It was only within the last few years the series of transformations we has briefly described were followed as

4

A modern author uished two ways in which th be affected with regard to the st stance. He has longht to er 166 cought to establish two forms of cerebral bemorrhage. In one there is laceration of the brain, with a greater or less loss of substance. In the other, the cerebral pulp is not injured; the blood is simply effused between two layers of the cerebral fibres. In the first case, accompanied by laceration, where the nervous substance is completely broken down, we may ask ourselves if the nervous pulp can be so far reproduced as to transmit volition &c through the injured part. Dr. FOVILLE thinks not. But the possibility of such a regeneration seems established by the experiments of M. SERRES. Besides, do we not know that a divided nerve may unite, and continue to transmit nervous influence as before the injury took place?

Period when Cicatrization is completed.

We cannot lay down any fixed rules upon this point: the time varies considerably in different cases; sometimes the process of cure is very rapid, at other times it is tediously prolonged. In some cases, after a lapse of five or six months from the first appearance of cerebral symptoms, we find that the coagulum has been removed, and nothing remains but a trace of cicatrix : in other cases, on the contrary, the serous cyst of which we have spoken has been found many years after the occurrence of the original accident.

We have hitherto been occupied with the contents of the apoplectic cell, and the man-

State of the Brain in the immediate vicinity of the Effused Bload.

The vessels may present nothing particular, or have undergone an important modification which it is necessary to mention. In several cases of cerebral Lemorrhage we find the vessels assified in a high degree, or so friable, that the least effort is sufficient to rupture their parietes; and you know that in aged persons, who are peculiarly subject to sanguincous effusion of the brain, this state of the vessels is very common. vessel may give way on the wall of the anoplectic cell, or at a certain distance from it, and in that case the hemorrhage may result from the rupture of a great vessel on the surface, or at the base, of the brain. M. Seants has seen a case produced by the rupture of the basilar actory, not far from its bifurcation: the blood here made its way into the ventricles. The nervous pulp itself present certain alterations in or around eplectic cell. It may be absent, or we is broken down, lacorated, and other truce of organization of vascular tissus. Now

has distin- | rhage of the brain? I am inclined to think that in a great many cases the effusion of blood is preceded by a certain degree of softening of the nervous pulp. The proof is this,-in many cases we can follow, in the softened portion of the brain, all the degrees by which a simple injection of blood is transformed into a more or less extensive effusion : we see the latter commence by a number of small red points, which gradually unite, multiply, and enlarge, to form, in some other portion of the softened mass, a true apoplectic coagulum. llowever, we should distinguish this species of ramollissement from others of a decidedly inflammatory origin.

Let us now examine the state of the nervous tissue around the seat of the hemorchage. In some cases the cerebral substance immediately around the cell may be in its normal state, but this is rare; in others the pulp is more or less coloured and injected, and bears marks of having been the seat of irritation : in other cases, again, the coloration of the nervous pulp seems to depend entirely on imbibition of the blood: the parts surrounding the coagulum are the seat of a true ecchymosis; hence it may present a great variety of colours, bright red, red, pale, yellow, Ac., according to the vicinity of the cell, in a word, the cerebral substance may present all the shades of coloration which we observe in ecchymosis of other parts of the body.

The nervous tissue surrounding the effusion may be in a state of true ramollissement. This change, as M. LALLEMAND has ner of its removal. Let us now examine the demonstrated, may take place before the effusion, or it may succeed it, and then give rise to quite another order of symptoms. When the effusion is recent, the nervous substance around it may present several modifications : it may, as we have just remarked, be more or less softened; it may be infiltrated with purulent matter: finally, in some cases, we find a very considerable induration, which many authors attribute to chronic inflammation, in the immediate vicinity of the apoplectic cell.

Let us now leave the environs of the ef-The fusion, and consider the

State of the Cerebral Mass in general.

We frequently find in the brain, marks of very considerable congestion, and this is a circumstance of importance to observe, for many of the subsequent symptoms depend more upon the degree of hyperemia which thus occupies the nervous centre, than on the actual hemorrhage itself. As the work of cicatrization goes on after the absorption of the congulum, this congestion may be repeated at uncertain intervals, and it requires the utmost care and watchfulness on the part of the physician. When very considerable hemorrhage has taken place into to the hamor the substance of the brain, the opposite

hemisphere to that affected may also become | quest towards compressed, and that in two different ways. 1st, By the congestion of one hemisphere, giving rise to an increased bulk, and acting directly upon the other, which it compresses. 2nd. By the passage of blood through the lacerated central parts, from one hemisphere to the other. These circumstances have an influence on the appreciation of the signs of cerebral hemorrhage, and are therefore not to be neglected.

Now let us inquire in what state do we find the membranes? They may remain altogether intact, or be infiltrated in a great-

er or less degree with blood, scrum, &c., and thus become a source of complication of the times than at a period not so very far resymptoms. When the hemorrhage is of moved from the present. We have now to long standing, the membranes may exhibit other lesions connected with the duration of the primary affection. Thus the pia mater covering the convexity of the brain, may be very considerable quantity of serum in the to add to what his been already said in the ventricles; this latter is a case which we sometimes meet with in practice. A patient join, by way of supplement, that the abuse been been already and in the practice of the property has been attacked, perhaps several years of spirituous liquous, and the frequent ad ago, with apoplexy: the first symptoms pass off, but a new set is slowly developed of cerebral hemorrhage, as well as of contact the contact of the You now recognise chronic hydrocephalus, gestion. Another quastion is the following. The patient dies, and on the autopse you. What influence do the different states of the find together with the find, together with the traces of an ancient, hervons centres exercise to the production effusion of blood, a considerable quantity of of cerebral homorphage? May may be re

We have now to occupy ourselves with

intensity, and varieties connected with in more frequently the effect of the causes jusdividual peculiarities. We shall therefore mentioned, than actual hemorrhage into th refer you to what has been said during the nervous substance. lecture on congestion, merely adding now The Influence of the Digestive Organs in th and then a supplementary remark. You remember that we studied at some length the influence of temperature on the development of cerebral congestion. We have made a similar statistical investigation for: hemorrhage of the nervous centre, and found that it is more common in winter than during any other season of the year. Thus of 177 cases which we examined with this brain, unless the individual has been pre view, we found that 60 o curred in winter. disposed to this accident by an original pe 42 in spring, 40 in autumn, and only 35 in cultarity of constitution. We have next t summer. You see, then, that the disproportion between summer and winter is very con-

We have also asked ourselves whether cerebral hemorrhage is not more common that any considerable diminution of the ca at certain periods than at others; we cannot liber of the aortic arch cannot take play doubt this. From a statistical calculation without exercising a corresponding made in London by HERREDEN, it would hence on the brain, and farmering the follow that during the 17th century app-lopment of apoplexy. This is perplexies went on gradually increasing from 1 do not know that it has the commencement of the century to the blished in any thing like a middle; acquired greater intendry after We are not without their middle; and heaving more and more from the control of the contro has period; and became more and more fre- once, of the a

when they had at-A similar calculation was made in Paris, thering the st time, on a very large number of cases. aring the sam gave an exactly similar result; the number of cases towards the end of the century exceeded that observed towards its commencement, in a very remarkable manner. Here you see an example of what we stated in our introductory lecture, that diseases of the nervous system are influenced by the different circumstances under which man is placed in society at different periods. What we have just said establishes the greater frequency of cerebral hemorrhage in latter consider the

Influence of External Agents in ils Production.

With respect to this point we have little serous fluid in the ventricles of the brain, gorded as an examing ones. Certainly, dif thrent acts of the binin, such as powerfu emote as, vident passin, excessive buddy Causes and Times of Cerebral Hemorrhage. I pain, acting upon the control is Ivone or But here our task is short. They are the gau, all these may produce apoplexy. How same as for cerebral congestion; the only ever, we shall add, that simple congestion differences depend upon different degrees of and its symptoms, without effusion, ar

Production of Cerebral Hemorrhaye

is the next point we have to consider but here we can only repeat a remark which we have just made; derangements of nutri tion act in the same way for hemorthag as for congestion; they may become a caus of either disease; however, they rarel produce actual effusion of blood in th examine the

Influence of the Circulation,

Some authors have endeavoured to also

teration of the great which the heart.
We have, indeed, a cortain number of the in which the arch of the acrts will com-This case destroys the influence of the fact counteract the tendency to effusion in the we have just noticed, and, on the whole, it may not be too much to say that the part cannot certainly suppose any great impetuation of the autito hade by writers to simination of the autite caliber in the development of apoplexy, has been excessively exaggerated. Force of henortriage in pregnant or lying-

intensity. It is not often that we see cere- we should observe the former much more bral hemorrhage produced by a simple in-tegraption in the venous circulation, al-though, as we have had occasion to remark the cases of cerebral hemorrhage during at another time, that the latter cause frequently produces a greater or less degree of currence at that period completely acciongestion. This fact has been submitted deutal, and not to be attributed to the state to the test of experience. Several physiolo- of the system in childbed. In some women gists have endeavoured to determine how the hemorrhage takes place within the first for a sudden interruption of the venous few days after accouchment; here, also, for circulation from the head may influence the reasons which we have just given, we the development of apoplexy: they have think the apoplexy is a mere coincidence. tied the voius which bring back the blood from the centre of the nervous system, but bet cases have not succeeded in giving the expected accidents. The ligathe great jugular veins has been pergen of hemorrhage.

that individuals presenting the character of what is called the sanguineous temperament, are sometimes attacked with hemorpletely obliterated below the point from shage of the nervous centres: this is a fact which the great cephalic arteries are given that no practical physician can deny. Howoff. The records of medicine turnish us ever, we are compelled to observe that it with four authentic cases. Now out of these gives rise more frequently to congestion four we find only one, a single one, of a than to effusion of blood in the brain. Percorresponding influence having been exer- haps the most correct point of view in which cised on the brain; it is that published by we can regard it is, as a predisposing cause. Dr. RENNAC, of an individual, ninety-two We have seen more than one case where the years of age, who died presenting the symp-subsequent attack was long announced betoms of hemiplegia of the right side of the fore its occurrence, - where the hemorrhage body. On examination of the body after was predicated from the temperament of the death, traces were found of an old effusion patient, and the prophecy unfortunately ful-into the substance of the hemispheres, and filled: in short, it is impossible to deny the the arch of the north was found completely connection between apoplexy and that state obliterated below the origin of the left sub- of the constitution in which the individual clavian artery. This is the only case we are presents the character of having an excess acquainted with showing the connection be- of blood. However, in many other cases, tween an apoplectic attack and diseases of the offusion of blood into the brain takes the aortic arch, by which its caliber is displaced in quite an opposite state. Many paninished. In the three other cases of this thents of a pale appearance and exanguished nothing similar occurred; the brain re-mained intact, notwithstanding the exist-tacked by the disease now under consideracure of an organic change by which we tion. Hence the absence of a pletboric mi-bi-main ille suppose that a great quantity temperament by no means guarantees though so and be determined to the organ, against an attack of apoplexy. Indeed a Convertance mentions a case in which the case has been published in which the parauntid arteries were nearly completely obstitute was struck with cerebral hemorrhage literated, and where, of course, the impulse at the very moment he had lost a large of the circulation in the brain was greatly quantity of blood from another source; the diminished; yet the patient died of apoplexy, state of general anemia was here unable to

As to the influence of any changes that in women. They consider the act of according take place in the venous circulation, we have nothing new to add to what has been exciting causes of apoplexy; but the cases air cady said on congestion. The causes of the one act equally in the production of the rare, very rare; if there existed any real other, though perhaps with a less degree of connection between apoplexy and labour,

Is the Influence of the Sex fell in the Doog-Imponent of Cerebral Hemorrhage?

Are males more subject to this disease than females, and if so, in what proportion? at giving rise to any symptoms Josuan FRANK used to say, " inter decemapoplecticus unam numerare soleo femiinflu-influ-influ-gerated; apoplexy a a disease more fre-distry quently seen in females than you may be

led to expect from the aphorism of FRANK; | finally, M. habit of attending at Salpetriere must be died to be already aware of this low Party and the died to be already aware of this low Party aware of the low Party a published a statistical account of 1241 cases of apoplexy observed at Vienna, in which the sex of each individual was noted. Of these 1241 cases, 637 occurred in persons of the male sex; the remaining 604 were females. Here, you see, is a great difference, from the result of JOSEPH FRANK's observations. A French physician, M. FABRET, has made a similar calculation on a larger scale: he has collected 2297 cases of cerebral hemorrhage, and found that 627 of the individuals so attacked were women. This proportion, again, differs sensibly from that of PETER JOHN PRANK, but is far from approaching the relation of one in ten, laid down by Joseph FRANK. The next point we have to examine is, the

Influence of Aye

in the production of cerebral hemorrhage. Are spoplexies more frequent at an advanced period of life than at any other? Certainly so; the result of investigations made by M. ROCHOUX, and others, bave placed this beyond any doubt, and show that after the age of 50 these hemorrhages become common, and acquire their maximum of frequency in a period between that and 70 years of age. In childhood and up to the period of 35, they are rarely observed. These results are perfectly in secondance with the aphorism of Hiero-CRATES, which indicates the greater frequency of cerebral hemorrhage at an advanced period of life. particular, has occupied himself in the solution of this question. He has made a relevé of 61 cases, and found them distributed in the following order, viz. from 30 to 40 years of age, 10; from 40 to 50. 7; from 50 to 60, 13; from 60 to 70, 24; from 70 to 80, 12; finally, between the age of 80 and 90, he observed only a single case. The cerebral hemorrhage seems to diminish; and, gradually recover. finally, that it is equally rare before the age of 39 or 35 years. The rare occurrence of Queen's Ward; and in this instance I have cerebral hemorrhage at the two extremities not so favourable a report to make. She of life seems thus established; however, we was twenty-six years of age, a housemaid, are not without examples of apoplexy at a and the mischief had arisen in consequence very early period of existence. I myself of a severe blow from a fall. Although the saw a young boy, thirteen years of age, who report states that the secretions have b died rapidly under the symptoms of effusion died rapidly under the symptoms of effusion pretty regular, yet there has been a of blood in the brain; after death 1 found thing wrong constitutionally, which has an encemous congulum in one of the hemi- fluenced the local complaint. heres. M. BRENET gives the case of a health does not appear now hild, four years of age, who died in a simi-good as when I has making the state of overared in a child three months old; and,

meet terminipophenie, state three days after birth. On examining the laste birth. On examining the hod of blood was found in the left l the brain, near the corpora striata.

We shall continue the subject at our next

meeting.

ST. THOMAS'S HOSPITAL.

CLINICAL LECTURE

UN CARES OF

DISEASES OF THE JOINTS.

Delivered in the Session 1835-6.

BY MR. TYRRELL.

LECTURE II .- DISEASES OF THE KNEE-

Termination of former Cases of Disease of the Hip-Joint. - At our last meeting, gentle-men, I detailed to you the history of four cases of disease affecting the fibrous capsule of the hip-joint, giving the progress of each case up to the date of the lecture, all of them, with the exception of one care, at that period being in the house. The third patient, a boy, had been presented cured at the time I delivered my remarks, and since then two of the other patients have likewise left the hospital. The patient in the M. Rocnovx, in second case, Septimus Carter, in whom the local disease was complicated with tebrile symptoms, though not yet perfectly well, left the hospital by his own desire, that he might have the benefit of a better atmosphere than he could obtain here, as he resides at a short distance from town. He has now but very slight pain, either of the knee, or of the hip upon pressure in the groin; he can move conclusions at which he arrives from the about with tolerable freedom; in fact, his above numbers is, that the maximum of sufferings are baidly to be considered of any cases of apoplexy occurs in the fifteen years importance, and I am sure that he rest, and which are comprised between 55 and 70; improvement of his general health, if he be that after this latter period the tendency to not guilty of some imprudent act, he will

The fourth case was that of a woman in

will the look affection grade. To diff she com the hip upon pressure being sende anterior part; but when pressure anterior part; but when pressure is applied over the posterior part, she feels a kind of soreness merely. The pain of the knee is not constant; it occurs at night, and noon pressure on the anterior parts. The uterine functions are regular. She has not a good appetite, though the secretions are good and regular. I have given her, in consequence of there being a diminution of the general powers, the mistura potassic hydriodatis. We have applied a fresh moza to the joint. and I trust at our next meeting I shall be able to give you a more gratifying report. However, so far as all these cases go, they show well the nature of disease of the fibrous capsule, and that the plan of treatment which has been resorted to is likely to be efficacious in the majority of such cases, three of the four cases having been cured, and the remaining case being nearly so.

I shall this morning direct your attention more particularly to cases of disease of the knee. I should have liked to pursue the subject of disease of the bip farther, bad I had cases in the house to illustrate how discase affecting that joint attacks the synovial membrane, the cansule, and the cartilages, proceeding to abscess, destruction of the cartilages, and, occasionally, to disloration; but having no such cases, and desiring to keep these clinical remarks as closely connected as possible with cases nader our guidance at the time they are delivered. I shall proceed to speak to you of diseases of the knee.

Case 1 .- Inflammation of the Synocial Membrane of the Kner joint, with Increase of its Secretion .-- The first case I shall advert to is one of inflammation of the synorial membrane of the knee-joint, with an increase of secretion from inner surface of that membrane. It has occurred in Thomas Clarke, a carpenter, aged 23, of temperate habits, residing at Kennington. He was ad he stated that about twelve months ago, being in the habit of kneeling very much in his business, having been planing boards for

retro-| between the inner condyle and the patella, and the patella; also upon pressure be-tween the ligamentum patelle and the ex-ternal lateral ligament. The synovial capsuff was distended, and puffed up with fluid, more particularly apparent in the parts I have described, and at each side of the tendon of the rectus. The general health was tolerably good. He was directed at that time to keep his bed, that the limb might be quiet, and a blister wat applied to the surface.

On the 27th it says the pain is now of a sharp darting character, occurring at intervals only; and that it may be produced by pressure over, or by motion of, the joint. The swelling is much less. The blister healed under the application of a simple poultice, and another blister was directed to be applied.

31. Pain less, and he can move the joint without increasing the pain.

Nov. 4. Scarcely complains of any pain; swelling nearly gone; rests well at night; appetite good, and secretions regular.

11. No pain on pressure, or motion of the joint; swelling subsided; general health good; secretion regular; presented cured.

Anatomical Structure of the Knee-joint .-

Ax all my remarks to-day will refer to mischief to the knee articulation, perhaps I may be excused in the outset in offerior a few brief remarks on the anatomical structure of that part, as our diagnosis must depend a good deal upon examinations conducted on anatomical principles.

This articulation, then, admits of motion in two directions only,-flexion and extension, as they are commonly called; and, cousequently, this joint is placed among the guighymoid, or hinge-joints. The joint is formed principally between the lower part of the femue, and the upper part of the tibia, with an interposition of fibro-cartilaginous bodies, which aid in forming the joint, and are termed the semilunar carti-lages, from their figure. The motions of mitted into No. 8, Abraham's Ward, on the the joint are restricted principally by bands 22nd of October last. Upon his admission of fibres termed ligaments—a very strong one on the inner, and two on the outer part; and these are termed the internal and external lateral ligaments. We have, further. floors, he observed a slight swelling of the a portion of the tendon of the large rectus right knee, unattended by pain, except on muscle proceeding from the thigh over the exposure to cold. The swelling gradually patella, improperly called the ligamentum reproduce to the state of the particularly so upon patches, which should be regarded, however, taking much exercise. He had genormos as a continuation of the tendon of the recabout two years and a half ago, but the distinct the patches, the placed more distant from the patches, the state of the present the patches of the present to notice, a quantity of fasty matter being My inquiries were directed to this placed between it and the spnovial issue.

To be a possion which I shall presently We have abduction, or a throwing of the lagon his admission he comtonal pain, increased at the internal laseral ligament, and we have the motion of turning it inwards prevented the notion of turning it inwards prevented to the external lateral ligament. We can

flex the leg to a considerable extent, but can tween the only extend it to little more than a straight have line with the thigh. The further extension is prevented by the posterior ligament of Winslow, which is considered by some as a have been divided into separate portions, continuance of the semi-membranosus, which contributes to form the inner ham-string. Besides, we have on the inside, two firm hands femur; and there are called the crucial liga examine the joint,

nothing like so strong a ligament.

the books which treat of the ligaments and did not suffer much pain when I make strictness, there certainly is a fibrous cap- the synovial membrane is muc solic covering the articulation, although not so distinct or so defined as that of the hipjoint. Thus we have a fibrous expansion, nature of the discuss. connected with the synovial membrane, be-

be ligaments which sween the respective ngaments which I make the property of fibrous bands, and where these are more distinct, that they under the name of "ligaments."

Diagnosis of the foregoing Case.-Well, of ligament, proceeding from before and now, I have mentioned that in the case bebehind the rough protuberance of bone, forc us there is inflammation of the synovial on the middle of the articulating surface of membrane, with increased secretion of sythe head of the tibia, to the condyles of the novia. How is this distinguished from any other disease? Perhaps when I have related ments, from their heing placed across each some other affections of the joint, you may other. These ligaments perhaps assist in understand it better; but, in the first place, preventing extension of the leg beyond a 1 may state that the mere awelling, and certain degree, but they will very much pre- the shape of the swelling, were sufficient to vent rotation of the condyles on the head of satisfy me that it was the disease which I the tibia; that is to say, if you attempt to have described, and that it was within, and twist the thigh inwards or outwards from not external to, the capsule. The swelling the leg, the anterior and posterior crucial appeared on either side of the tendon of the ligaments, sided by the other ligaments 1 rectus, and a little likewise at the side of have enumerated, will restrict such mother ligaments and a little likewise at the side of have enumerated, will restrict such mother ligaments. There is no particular enlargement corresponding to the for the protection and limitation of the situation of any of the ligaments. The motions of this joint; there are some others, joint, when examined by touch, gives an but their importance scarcely requires us to impression of elasticity, indicating that the occupy our time in adverting to them; nor tunefaction arises from the presence of is it necessary that I should describe to you fluid, rather than from solid deposit; and we at present the small ligaments which con- come at once, therefore, to a knowledge of nect the semilunar cartilages, for they are the disease. But on going into the history out of reach when we are called upon to of the case, we find that it has been produced by injury. Injury is a great deal Now the synovial membrane is within all more likely to produce disease of the fibrous these ligaments. It covers the articular ex-1 tissue than of the synovial membrane. The tremities of the bones, and passes some dis-patient has pain, and that pain is increased tance up in front of the thigh-bone, beneath at night. Now when we look at the intimate the tendon of the rectus or quadruceps mus-connection which exists between the fibrous cle. There is a little interruption, however, and the synovial membranes, we cannot to the strict continuity of the surface of the synovial membrane; that is to say, it does the diseases of the other. It is very rarely, not form a perfect sac, because of the attachment of the little process termed the one of those membranes. We are much ligamentum mucosum, which proceeds be-more likely to have isolated affection of the hind the ligamentum patellæ to the con-fibrons than of the synovial membrane; dyles, just in the same way as you have the because the vessels supplying the synovial ligamentum teres proceeding from the hip- membrane, pass to it from the fibrous memjoint, to be attached to the femur, although brane, therefore when disease is set up in the synovial membrane, it extends rapidly You will find, then, that there are ligation to the fibrous capsule. Just so should we ments on the inner, the front, the outer, and the posterior sides of the knee-joint, dura mater. Seldom does it happen that and that the synovial membrane is necessare we have inflammation of the dura mater, rily more exposed between any of those without the inflammation extending to the particular spets, than where it is covered by hining membrane. So, again, in pericarditis, the ligaments; thus is the case more espe-tically on the anterior part of the joint, to the serous membrane, and terminates in where no nucles pass over it, so as to assist adhesive deposit. Besides, as to the nature in protecting the membrane. In many of of this swelling. I found that the patient articulations, there is no mention made of pressure over the ligaments, but when the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of this joint; but, in came to make pressure over the party of the fibrous capsule of the fibrous came to make pressure over the party This is not a very

esult of injury, for injury more free produces affection of the Spirits at was therefore induced to inquire into the robability of there being any specific cause if the affection; for the disease, as we very vell know, which is generally called "go-torrhozal rheumatism," affects particularly he synovial membrane of articulations. I rave been consulted lately upon a case very ilustrative of this kind. A gentleman has seen for some years the subject of disease of he urethra; and in spite of all he has sufered, he will go on subjecting himself to resh attacks of discase, and almost as often is he is imprudent, so often has he gonorhea. As soon as the inflaumation is set ip, and almost as soon as the purulent discharge is established, he has affection of the lifferent articulations; the synovial mensranes become inflamed, they pour out recretions, and the joints become tunid, mst as in the case before us. So that this lisease, you will observe, is frequently conaccted with a gonortheal or what we may call, if you please, a venereal mint. I therefore made inquiries in the present instance, and proceeded to examine the arethra, to iscertain if there was stricture; and at last, being satisfied upon all these points, and that the disease originated from pressure, and not from any specific influence of this sort, the treatment became simple; mere rest, with counter-irritation, having at once annihilated the disease. A comple of blisters were applied, he recovered the power of motion, without suffering, and was enabled to quit the hospital, in ten days or a fortnight, perfectly well.

CASE 2 .- Inflammation of the Synovial Membrane of the Knee-joint, with deficiency in its Secretion. - We have another case. where there is inflammation of the synovial membrane, with a deficient secretion of the synovia, there being an increase of the secretion in the last case. Elizabeth Herring, ætat. 14, a housemaid, was admitted on the 19th of the present month into No. 7, Lydia's Ward. She states that about a month ago, after kneeling, a swelling formed over the ligamentum patella. Probably she had the disease called the "ganglion patellar." The swelling was attended with much pain; and the joint became more painful towards night. Motion produced rather Leeches had been applied sovere pain. previous to her admission, without any benefit whatever; she had been going on in lischarge of her duties as a servant durgeneir application. Upon her admission a complained of sharp darting pain on the the knee. Pressure on the endele produced severs pain.

Le joint was attended with

Le gravation of her suffer-

as the was a slight swelling, which was painfultion of the special was tolerable; she rested which the pain, which was always worse then. She ic cause was put to rest, and had a blister applied to we very the knee, and afterwards a poultice.

The report of to-day is, that the pain in the joint is less; she has rested better these last two nights, and the swelling upon the ligamentum patclize is diminished. There is some slight crepitus still on moving the patella upon the condyles of the femur.

Whether there be any peculiarity in the form of the inflammation which gives rise, in the one case, to an increase of the synovial secretion, and to a deficiency of it in the other, it may be difficult to say. The same membrane is affected in both instances; there appears from the sufferings of the patients to be inflammatory action going on in both, and both are to be regulated on the same principles. This case has been for so short a period under our notice, that we are hardly able yet to ascertain what will be the ultimate result; but I have no doubt, from experience, having seen many such cases, that it will proceed just as favourably to a cure as the one of which I last spoke.

Cther Affections of the Knee-joint.—I have brought these different and somewhat to popolite cases forward, to enable you the hetter to comprehend the points of diagnosis which I have described; and I shall now proceed to the description of two other forms of affection of the knee, which are more rare, and perhaps more difficult to treat.

Besides the structures I have mentioned as contributing to the formation of the joints, - the ligaments, the synovial membrane, and the fibrous tissue, -we have the osseous extremities, which are tipped or covered with cartilages, the cartilages being lined with the synovial membrane. Now the ends of the bones, especially the cylindrical bones, which contribute so greatly to the support of the body, are enlarged. If the extremities of the femur, for instance, were not of greater diameter than that of the rest of the bone, they would be constantly liable to displacement, but Providence, wise in all its works, has, in the formation of the joints, increased the diameter of the ends of these bones; their bodies are of great compactness, and sufficient, under ordinary circumstances, to resist injury, whilst the extremities are exceedingly light, formed of what is called "cancellated structure; that is, small laming of bone, intersecting each other, and forming cells, which are lined with membrane, and which probably afford the secretion that we find in the cells of the cancellated structure. This part of the bone also is liable to inflammatory action, which may affect the power of th tellise there articulations, and may, indeed, eventually

lead to as serious results as happen from convenies any disease attacking the articulating sum immed as faces themselves.

that about a month previous to his admission, after taking much exercise, he experienced a dull aching pain of the right knee, which increased towards evening, and sirup of poppies, and half a pint of disof this mixture for a dose.

The affected limb was rather smaller than the other, for a reason which you will recol- cine, and the same form of tonic as that lect I explained to you at the last lecture,namely, that where there is disease, and the potasse hydriodatis; but instead of mixing muscles are not kept in exercise, they lose their contractile power, and become flabliv. He now slept well at night; and I ordered him to rub in, over the affected part, night over the surface of the knee. and morning, the unguentum potness bydrindatis, - an cintment made with a drachm of the potasse hydriodatia to an ounce of lard.

21. Much the same; joint rather diminished in size.

27. Pain gone; can walk without any in-

nd he wal presented well.

the Ou Structure of the Pemoral Parties of CARE 3. — Inflammation of the Osseous Structure of the Femoral Portion of the Structure of the Tibial portion of the Kate.

Knee-joint.—The next case is one of inflamjoint. The first is the case of Thomas station of the cellular structure of the con-Lynch, aged 21, living near the Tower, by dyles of the right semur. Many Chanten, Lynch, aged 21, living near the Tower, by dyles of the right semur. Many Lynch, aged 32, realding in Bermondsey, a married occupation a footman, and of steady habits, aged 32, realding in Bermondsey, a married woman, of secondary states admitted into No. 10, Lydia's Ward, on the 19th the line of the right semur. of November. She states that about seven months ago she received a blow on the right knee, from a fall, which produced considerable pain, but no swelling. The pain disturbed his rest greatly. Exercise of the joint increased his sufferings. Two small four months since, when the joint began to blisters were applied to the knee, but without affording much benefit. Upon his adaptive and the pain to increase. She then out affording much benefit. Upon his adaptive thick the activity of the pain to increase. continued more or less severe until about out afording much benefit. Upon his ad-mission he complained of pain on the inner repeatedly blistered, which, to a certain de-side of the right knee, particularly at night.

At the lower part of the joint, the inner side continued to increase. In a short time after-At the lower part of the joint, the inner side continued to increase. In a short time after-of the head of the tibia was found to be wards the limb became very large, and the much enlarged; and upon his placing the pain returned with considerable severity, foot on the ground, and resting his body on the limb, the pain was increased. He had internal use of the sulphate of quinine, the rheumatic pains in different parts of the symptoms again subsided, and she discon-body, and his general health was impaired. To procure rest and regulate the secretions, About two months ago, the intermspensary.

I ordered that he should take a grain of the authorizate of mercury, with half a grain and sometimes painful, although, until about of opium, and a blister was to be applied to a fortnight since, she did not experience the knee. By these means he rested, and much inconvenience, with the exception of the pain was somewhat relieved. In the stiffness of the joint, and pain upon con-beginning of October, the first blister having healed, a second was ordered, and, the secretions being regular, he was ordered to take the tonic mixture,—the mixtura portant health secretions being regular. tassæ hydriodatis. This is a tonic mixture admission, she complained of a dult aching which I frequently give, not only in such pain over the whole of the joint, which was affections as these, but in others, and with particularly severe at night. The motions great advantage. It contains a sixteenth of the joint, which are very limited, increase part of a grain of iodine, four grains of the hydriodate of potass, and a small quantity of the inner side of the knee—to the situation of the inner side of the knee—to the situation of the inner side of the knee—to the situation of the inner side of the knee—to the situation of the inner side of the situation of the si strap of popples, with a little distilled water, tion of the internal lateral bigament, pres-to each dose. The mixture is made of half so cases dose. The mixture is made of nail; condyles of the femur are greatly enlarged, a grain of iodine, half a drachm of the hy; condyles of the femur are greatly enlarged, driedate of potass, half an ounce of the and the partella appears to be sunk down arising of complex and half a pilot of his, and impacted between them. The general sirup of poppies, and half a pint of the health was good, the appetite was good, and tilled water; and the patient takes an eighth all the secretions were natural. Her general Oct. 16. He had now no pain on motion She was ordered to have the house-mediane than powers, however, are very much below par. which the last patient took, - the mistura lit with water, as a vehicle, she was to take it in the decection of sarsaparilla. She was likewise directed to have a blister applied

24. She arates that also is better, of saye that the pain is less, though still so at night. The tenderness on the l pain complained of on gra above the condyles,

Remarks on the C

ther rare affections; they are the articular recording the articular extremities of the bones which and the first formation of the knee, their in the articular extremities of any others. Still, I have seen the same disease affecting the elbow joint, and the lower extremity of the tibia, the ulna, and the radius. It appears principally

to arise in persons of scrofulous habit.

Diagnosis and Pathology.—From the histories of the cases, you must see that there might be difficulty in discriminating between the disease of the cellular structure of the extremities of the bones, and that of the synovial membrane. There is a dull aching pain, which is increased at night, indicating an affection of the fibrous structure; but on examining the joint you easily ascertain the scat of the disease. You find, probably, that the patient, as in the instances before us, complains somewhat of pain, aggravated upon pressure over one of the lateral ligaments. The reason is obvious. The articular extremity of the bone cannot be enlarged without separating in some degree the attachments of the lateral ligament, and thus putting the ligament upon a stretch which may induce a slight degree of inflammation. But the very figure of the joint will strike you as peculiar, and guide you to the rationale of the disease. When the patient is the subject of disease of the synovial membrane, with deficient secretion, he cannot have the joint moved without pain. because the synovia that unturally exists between the apposite surfaces of the bones is wanting, and they grate against each other, producing excessive suffering. Now in the instances of enlargement of the articular extremity of the hone. I have known i patients only complain of difficulty of motion, or of pain, when the limb was moved, from what they themselves called "a deficiency of the joint oil," meaning synovia; but in examining the joint I have found the patella move freely on the condyloid surfaces of the femur, proving that the synnvia was not deficient. How is the difficulty of motion of the joint, then, to be accounted for? Why in this way, from the articular surfaces having become altered, in consequence of enlargement, and the deformity thus produced. This is beautifully seen in the case of Mary Sollivan. The disease in her case affected the condyles of the femur; the extremity of the tibla remained as before, but the condyles were enlarged, the patella having mink down between them, and there become impacted; that even if she were to recover from the gain have the proper motions of the joint. from somewhat negative sympaccurate examination, and a plies of the joints, and of as detaining her here may cause her the hones, that yee have the more severe form of the disease.

You thus have all the symptoms explainad. Sometimes, when disease of this struc-ture has proceeded for a time, you have the periosteum of the bone becoming inflamed, and in consequence of its being expanded over the whole of the osseous substance, the suffering is extreme when it is pressed upon, just as you have pain in what is called " hydrothalmia," affecting the sclerotic coat of the eye. When that texture is pressed upon, it becomes inflamed, and is extremely painful. Of course the pain is less, in some degree, where the inflammation of the cancellated structure is slow: the only symptom of the disease then, is difficulty of motion. Where the texture is so delicate as the lining of the cancellated structure necessarily is, and when the inflammation which attacks it is slow, the disease is hardly evinced; but when the affection comes on rapidly, you then find, from the enlargement of the bone, and the implication of the membranes connected with it, that the character of the disease is much more decided, and can at once say that it is an affection of the fibrous tissue.

Prognosis.-What is the prognosis? In an instance where the disease has been of slow origin, and of slow progress, it is not likely that the patient will suffer eventaally, if proper care be taken, any further than from the irregularity of the joint, and difficulty of motion. Where once enlargement of osseous structure has taken place, you cannot diminish that extent of surface again by any treatment short of operative proceedings. In the first case the patient recovered under the treatment a lopted. The size of the joint somewhat diminished, and he was able to walk. Why was this? The head of the tibia was affected; there was a deposit taking place in the osseous struc-ture, the outer shell of the bone gave way, and the periosteum became affected and thickened. You can get the thickening of the fibrous texture of the periosteum reduced, but you cannot get rid of the thickening of the bone; it will remain so during life. In the other case, where there has been much more severity of disease, we shall have much more difficulty of cure. That patient has a scrofulous habit, and weak general powers, which are all favourable to the progress of the local affection, If she can only bear up under the confinement of the hospital, and the atmosphere which she will have to inhale here, I have no doubt that we shall be able to arrest the disease, and to send her forth with the me of the limb; but supposing the atmosphere, and the confinement of the house, do not agree with her, and her general health suffers, it will be prudent to discharge her, in order that she may have the benefit of better air. as detaining her here may cause her to have

What, gentlemen, will be the progress of

e disease if we do not arrest it? I preion of that curdy port of matter, w in scrofulous persons, we see deposited in instances of enlarged glands of the nack, filling, in great measure, the cancellated our next most structure of the bone. If we could cut through the condyles of the femur, and expose the cells, we should probably see some of them broken down, and filled with this substance. But if the disease goes on still further, you will have less of this curdy matter, and in its place a fluid generated, con-missing of that serous or indifferent sort of pus which we know to be the result of scrofu-lous inflammation. When this pus is formed, it will begin to make its escape by ulceration; the cellular structure will be broken down, the denser compact shell of the bone will gradually give way, the cartilages will ulcerate, and we shall have sinuses formed, from the interior of the bone, through which the discharge will take place. Very likely, however, before all this occurs in an hospital, the general health gives way, and we are obliged, with a view to save life, to get rid of the disease by amputation.

Treatment.-The object, however, is to avoid the resort to amputation; and I have, therefore, with a view to preserve the general health in such cases, given such medi-cine as is calculated to lessen the peculiar disposition to the disease which is termed " scrofulous diathesis." Indine has a re-markable effect in this respect; and I have which I spoke in my last lecture.

when once seen, and well examined, I do not think you would make a mistake between them and any other affection of the seine aware of them when they exist, you might mistake them for an affection of the synovial membrane, or of the fibrous tissue, and he led to give a prognomis which you could not afterwards verify, and which would be calculated to bring discredit upon you.

ha all these cases the utmost you can do is to arrest the inflammation, and put the parts into a healthy condition. You cannot produce an alteration again in the figure or diameter of the bone, which will restore its integrity, and reader the joint as St for the purpose of motion as it previously was. A lameness must always ensue where such an affection has taken place, and has given rise to enlargement of the bone.

Other cases we have under treatment, but I shall not to-day describe them. There bute to form i

CASE.

PRESUMED TO BE ONE OF

MECHANICAL OBSTRUCTION

TO THE

PASSAGE OF THE BLOOD IN THE ARTERIES.

To the Editor of THE LANCET.

Six, -The following case 'a part of which I read at the London Medical Society in Pebruary last! I think you will consider worthy of insertion in your valuable Journal. I am, Sir, your oliedient servant,

EDWARDS CRIEP. Walworth Road, Dec. 21, 1835.

Case.-Jan. 31, 1835. I was requested to visit Mary C., ætat. 22, of healthy par-rents, residing at Camberwell. She had cholera in March 1831, and says that " her mouth was slightly affected by mercary, but she speeddy recovered." tended her two years since, during a severe combined it with sarsaparilla, which is often attack of pneumonia, after which she had necessary. We have also employed the occasional cough, &c., fr sometime. She milder forms of counter-irritation; but if we has been at service for ten or twelve years, find that a decided improvement does not and generally, during that period, was able take place under blistering, we resort imboliately. as I shall do in this case, to the occasionally prevented from thong so by more powerful means of moxes, or issues, of headache and hysteria. For the last three or four days she has complained of pain in These cases are well worth watching. In-stances of the kind are not often seen, but heat of skin, &c. This morning there is pain in the epigastric region, rather increased on pressure. Pulse small, 50; tongue white, tig red; bowels confined. The menses have joint. Without knowing such cases, and appeared regularly, but the discharge has been small in quantity.

- R. Mag. Sulph. 3i; Liq. Ant. Tart. Jun; Aqua vis. Pt. mist. cujus sumt. & 4tin horis.
- R. Pital. Hydrary., Ext. Columnth. C., an. gr. v. Ft. pilule duse, h. s. s.
- Yeb. 1. Less pain in the region of the stomach; the thighs and legs very painful; no reduces or swelling, but the pain increased on pressure; pulse small s quent; no sleep; bowels well re motions offensive
 - R. Vini Colchiel, Lig. Ant. 23 Mist. Cample, A. mist. cuine a

- 2. Much the same in the legs and thigher. gastric region; tongue rad at the vip, with white base; pulse small, 30. The lower extremities ordered to be fomented with a hot decaction of poppy heads, and the following was prescribed : -
 - R. Hyd. Sub., Pulr. Antimonialis, Pulv. Colchici, za. gr. vi. M. et divide in than yesterday. pulv. vi, quorum sumt. unum 4ta ouaque hora.
 - 3. Called this morning at one o'clock, and found her suffering from violent pain in the sieep for the last nie or aix days. Co region of the stomach, increased on pres. haust efferves, et sumt, haust. Opii h. s. sure; frequent comiting (the first since her illness; no pain in the lower extremities; retain the opiate draught upon the stomach, pulse very small; has fainted two or three. The integrments of the right arm extremely times. Opened a vein in the arm, and with painful. Met Dr. Whiting in consultation. much difficulty obtained about zvin of blood, who examined the arterice with great care, after which she expressed herself to be some, and found the pain much increased when when relieved. what relieved.

Applicatur Emples Lytte regioni epigas. tricæ, et Emplas. Sinapis pedibus.

horis in actis offervescentia.

Eight p.m. Pain less; pulse more expanded; blood cupped and buffed.

4. Has very little pain in the region of the stomach, but the legs and thighs are again excessively painful; no heat or redness, and the pain appears to be confined to medicina.

R. pilula daze, h. s. s.

hands and arms cold, with a tingling sensation in the fingers, succeeded by acute pain: sent in the legs and thighs, and very slight (on pressure) in the epigastric region; tongue forred, tip and edges red; bowels open; no pulsation at either of the wrists; the heart and carotids pulsating with great violence.

Rept. medicina efferves., et sumt. Puls. Opii gr. i hora somni.

in the arms and legs excruciating, but seldom occurring in both at the same time; alight tenderness in the epigastrium; no eved no change in the symptoms during the 3/A. Has continued the then, with a grain of opiom

- Anmen. Gorb. 300; Tinet. Opli gtts. xx; Miet. Camph. 3ri; ft. mist. cujus sumt, f 4tis horis.
- Pule. Ipecke. C. gr. x, b. s. s.
- S. Took the medicine only once, as it produced vomiting; pulsation ceases about an inch below each clavicle; the dorsal arteries of the feet pulsating forcibly, 90; the heart and carotide beating with less violence
 - R. Haut. Efferres. 4tis horis, et Liq. Opii Sed. gtts. xxv, b. s.

10. Symptoms the same as yesterday; no sleep for the last five or six days. Cont.

Feb. 11. Passed a restless night. Did not pressure was made over the arteries of the upper extremities, particularly the right. Dr. W. ordered eight leeches to be applied below the right clavicle; a warm spirit lo-R. Houst. Sodo Carb. et Acid. Tart. 4tis tion to the arm, with the following ;-

- R. Hyd. Sub. gr. j; Ant. Tart. gr. &; ft. pilula 3tia quaque hora sumenda.
- R. Vini Colchiei gttn. x; Mag. Sulph. 3]; Aque 3x; ft. haust, ter die sumendus.
- 12. No sleep; pain in the right arm diminished; has been very faint since the the integuments; howels relieved. Cont. leeches were applied; bowels moved twelve or fourteen times; motions fluid, yel-low, and offensive. On pressing the spi-R. Ert. Paper., Pulv. Rhei, as. gr. v; nous processes of the upper dorsal vertebra, she complains of pain, but not more so than when the skin of the back is touched. Says 5. Fainted once in the night; no sleep; her feet are cold and numb, and she has asked the attendants if the toes are not contracted. On examining the feet I found in the integuments of the arms; pain ab- them quite warm. Rept. medicina, et adde, Pale. Ipecac. C. gr. ii, singulis pilulis.

R. Liq. Opis Sed. gtts. xxv, h. s.

13. Slept four hours after taking the draught. Can move the arms without difficulty, but has still slight pain when pressure is made in the course of the arteries. The left foot and leg are extremely painful. On pinching the auterior part of the leg she is 8. Has remained much in the same state not sensible of pain, but complains of un-since the last report; very little sleep; pain easiness when the back part is pressed. No pulsation in the dorsal artery of the foot, and rather indistinct in the popliteal; heat of the limb below the natural temperature; slight tenderness in the epigastrium; no the most of the care was a superanative rounting; sounds of the heart rather loader; the carotide pulsating feebly, and on placing than natural; respiratory murmur distinct the finger upon them a thrilling quasation in hith hungs. The mences appeared on it communicated; "bruit do souffiet" obtained of the first time over ti Opil Sed. gtts. xxx, h. s.

14. Believe I can distinguish a slight vibratory motion at intervals, in the left radial artery. The patient sleeps for five or six bours; the right arm is again very po the gums are affected by the mercury. I have expressed a great desire for port Hitherto her diet has been detaconess, w descepus, with beef-ten and breth occasionally.

R. Ammon. Card. Di; Sode Cardi gi; Tinet. Aurant. 3li; Aque gvi; ft. mist. cujus sumt. 4 in succo limonis Stie boris.

Rept. haust. Opii hora somni.

15. Symptoms nearly the same as yesterday; no bellows sound over the heart; has taken 4 of a pint of porter; ordered one

pint daily. Cont. medicina.

16. Pain in the left foot and leg so severe that she is frequently screaming; no pulsation in the arteries of the upper extremities, nor in the left poplites; tongue red and moist; skin often covered with perspira tion. The porter to be continued.

- R. Haust. Sulph. Quinine gr. ii 4tis horis. Rept. haust. Opii h. s. Appl. Emplest. Belladonne cruri.
- 17. Foot and leg more painful since the popliteal, but very distinct in the femoral; in the course of the arteries; slight pulsation in the left brachial and radial arteries (beat synchronous with the heart). Dr. Whiting saw her again this afternoon, and recommended twelve leeches to be applied to the left groin; the foot to be fomented with hot spirits and water, and a large blister to be applied to the lower part of the left ande; pulsation absent in all the ex-abdomen. Dr. W. thought that by pursuing tremities Rept. med. this plan of counter-irritation we might prevent the spreading of the disease to the larger arteries. The Beliadowna plaster to he removed.
 - B. Ammon. Carb. gr. iii; Quinina Sulph. gr. i; Syrup. Simp. 348.; Aque 3x; R. ft. haust. ter quotidie sumendus.

R. Liq. Opii Sed. gtts. xxv, h, s. s.

applied; continues the porter; not fomentations to the foot. Rept. hanst. Quisian exthaust. Opin hera sound.

19. Foot purple and cold; pain increased; perspiration abundant in the night. Cont. medicina.

erspiration profess; no sleep. Cont. me- tion in the left arm for

21. Pain more severe; slept three or four the opinion and quint

turn of the left foot 80 Pa prints the last two or three days tours right popilical space; yesterday she felt pain and tenderness in the calf of the leg, and, at about eight p m., a numinosa in the foot, succeeded by intense pain, which has continued. On pressing along the course of the femoral actory, the pain is much aggravated; no pain when pressure is made on the outer and back part of the thigh; has also pain when the left femoral artery is pressed, but not so severe as it was on the 17th. No pulsation in any of the arteries of the extremities. The toes and sole of the left foot black; temperature 84; right foot 90. Ordered a blister to the outer part of the right thigh, and eight leeches to the foot.

- R. Pule. Opii gr. j; ft. pilula ter die sumenda. Rept. haust. Liq. Opii Sed. h. s.
- 23. Slept five or six hours; pain excruplaster was applied: no pulsation in the left ciating in both feet; fore part of the left, black; the instep and ankle red; temp. of ain much increased when pressure is made | the former 80; latter 91; feeble pulsation in the left racial and brachial arteries. Rept. Pilel. Opii et haust. Opii h. u.

24. Slept four or five hours; pain not so violent as yesterday; left foot much in the same state, temperature of the toes 60; antile 68; right foot S1. Rept. medicina.

25. Pain less; several phlyetenæ on the

26. Symptoms the same as yesterday.

Rept. mcd.

27. Feet very painful, especially the left, which looks rather better than on the 23rd; temp. of the sole 70; instep 83.

- R. Haust. Quinma ftis horis.
- R. Haust Log. Opii Sed. gtts. xl, h. a.

March 6. Since the last report the pain 18. Pulsation absent in both upper extre- has been excessive; very little sleep; night mities, and ceases about three inches below perspirations; has complained occasionally Poupart's ligament in the left thigh; slept of pain in the region of the heart; bruit de for a few minutes at intervals during the soufflet very distinctly heard; suffered yes-night; pain excessive; the foot and fore terday (for the first time since her illness) part of the leg of a purplish colour; the cu- with pain in the right side of the bead, taneous veins distended with dark blood; which subsided after a few hours. Bowels the tips of the toes cold, and the foot rather have acted regularly; motions healthy. The below the natural standard; perspiration fore part of the left foot in a state of sphaprofuse over the upper part of the body; celus, with a red line of demarcation exhaus been very faint since the leeches were tending obliquely across. Has continued applied; continues the porter; hot fomen the opium and quinine daily. Ordered

20. The foot is sug swollen; temp. 84 F.; ration she bes had less paint has taken port wine as

the limbs, but was perceptible in the left stump; pulse (left radial) quick; skin hot; arm, from the 23rd to the 27th. Rept. med. thirst, &c.

April 7. Pulsation ceases at about two inches below Poweart's ligament on both sides, and can be felt only at about half an inch below each clavicle; granulations abundant; since the 26th, has been able to take a mutton-chop daily, with port-wine and porter. Rept. med.

Oct. 1. Her health has gradually improved; the appetite is good; the tongue elean; secretions and excretions healthy. The menses appeared in June, and have a healthy appearance, and is now nearly continued monthly. During the last two healed. The catamenia appeared on the months she has complained of giddiness and 9th. occasional pain in the head, with dimness brachial and radial arteries for the last three, and large arteries. months; absent in the right arm since. February. She says that "this is not so cold.

22. Pulsation among the best extremition remarkably well. Gave her 35 drops of the since the 17th to the remarkable and moist; secretions and exceptions health; could find no trace of disease in them; they no extension of the gangeron on either of the fact. Rept. med.

28. Pulsation absent in the arteries of the fact. The well and the secretion and the secretion in the left street. The remarks are the secretion and the sec

R. Mist. Efferres, 4tis horis.

6. Slept two hours; pain less; a little oozing of blood from the wound. Cont. medicina.

7. Symptones the same as yesterday. Rept. med.

30. Has gone on well, with the exception of a little sloughing on the tibial side of the wound. The part, however, soon put on

Dec. 21. A portion of the stump, of about of sight coming on towards evening, but she the size of half a-crown, not healed; the says that "her health is nearly as good as granulations pale, with sero-purulent dis-it was previous to this attack." The pain in charge. Her health has improved since the foot has been ro intense, that for a con the last report, and she is able to get from siderable time she took six grains of opium one room to another with the assistance of daily. Notwithstanding this, the bowels crutches. The right foot is generally cold; acted regularly. She continued the qui pulsation the same as before the operation-nine, with the compound iron mixture, until Two gentlemen saw her on the 19th, and the 20th of June, since which time she has a thought they could distinguish feeble pultaken no medicine. The bellows-sound is sation in the right brachial artery." I have beart: feeble pulsation generally in the left bellows-sound is often heard in the heart

Remarks.-The foregoing case, both in a strong as the other, but that she is able to physiological and pathological point of view, use her necute nearly all the day." Pulsa- will, I think, be considered to be one of great tion ceases at about two inches below Pon- interest. Opinions will, of course, vary as part's legament in the less temoral artery; to the exact nature of the disease, but I in the right it can be selt as low as the imagine it will be generally admitted that triceps. Has lost the first phalaux of the there is mechanical obstruction to the pasgreat and little toe of the right foot; all the sage of the blood, and that the train of avmpphalanges, and three of the metacarpal tons described could not depend upon func-bones of the left; the two remaining are tional disturbance of the arteries. When I partly exposed. A portion of the or calcis' first mentioned the case at the London Medi-has exfoliated on each side; the toot is cal Society, I suggested the probability of much inverted; the integuments are pully, a metastasis of the integumental disease and painful on pressure. Is not able to (which appeared somewhat of a rheumatic keep the foot down for more than two or character; to the coats of the arteries, prothree minutes at a time, the pain being ex- ducing congulation of the blood, and, processive, and the skin assuming a leaden bably, a deposit of lymph. This opinion is hue; is very anxious to have the leg re- strengthened by the fact of the frequency of moved: the right foot and leg are generally translations in rheumatic disease to the heart and pericardium. The case appears 5. With the concurrence and assistance to me to confirm, in some measure, the of my friends Measrs. Bristowe, Bryant, correctness of Magendie's views with reand Beane, I performed the circu-gard to the son-muscularity of the arteries. har desistion, below the knee. Unsucken: I he recuir or one supersonant proven making the tourniquet. I found that there was blood circulated through the larger vessels, purp little bleeding from the large arteries, but not in sufficient quantity to call their purposes the continuent of the smaller related to the profusely, and it was produced. I invariably found, when necessary, the state of the making the carotide were greatly expanded, that the theorem is the carotide were greatly expanded, that the and she bore the opera- beart was beating violently, and that its pulsations were synchronous with the artery, sion it was the light at the morning visit.

I also observed that when pulsation was that the light will descend, with considerable in the left radial, the heart was acting able benefits of the foot, too plainly in feebly. The functions of the brain were cating that luxation had taken place. Fr. sourcely disturbed, although the blood was this period there was a succession of absent through its vessels with great force, accesses near the joint, terminating in fister-The profuse perspirations, confined princi-lous openings. The constitution, as may pally to the head and trunk, evidently re-duced the volume of the circulating fluid, and, after a time, allowed the vessels to assume their natural caliber.

CASE OF COXALGIA,

WITE

LUXATION OF THE PEMUR, ANCHYLOSIS, PERFORATION OF THE ACETABILUM BY CARIES,

AND

FATAL PERITONITIS.

Mercer's Hospital, Dublin.

Hospital, in November 1834, where he re-mained until his death, comprising a period of ten menths. As the principal points of Pressure in that region increased his sufpancture. The hip-joint and spinal column fatally on the 20th of September. under whose care he then was, without his ng able to detect any evidence of discase in either. There was no alteration in the length of the limb, or in the form of the found considerable effusion of serum, with mates; the swelling gave him little uneasi-ness, and soon subsided by rest and estitable presented the usual marks of infammation, treatment. Shortly after admission be was being in many parts coated with lymph, and attacked with violent pain, and acute in its capillaries being minutely injected. The dammation, of the hip-joint and upper part liver was in a state of hypertrophy, but it of the thigh, which, notwithstanding a strict was not altered in structure; there was observance of the recumbent position, and sero-purulent effusion in the cavity of the the frequent application of leeckes, with palvis. ather antiphlogistic treatment, terminated in a large abscres, which pointed in the inferior part of the groin. This was caused by paneture, which gave siteation, not admitting of most has a switcation, not admitting of most has a switcation. The limb was caused to a considerable discharge of pus. However, this was soon succeeded by a fact. Refore I proceeded in the discharge of the joint, I wished a saling the saling that his faint was assent in the automate. If the different element, it is the saling that the saling th other antiphlogistic treatment, terminated in the hip joint was segent in the extreme, of the different of About seven or eight weeks after admir with a history, a

be supposed, sympathized with the severity of the local disease, and wasting discharges, extreme emaciation, total loss of appente. profine night-sweats, with the other accompaniments of rapid hectic, brought the patient to the verge of dissolution. The in-teguments in the neighbourhood of the sacrum, and at the lower part of the back, were sloughing, from pressure, but this distressing complication was completely relieved by the use of Doctor Arnott's hydro. static bed. His constitution was supported with wine, porter, and nutritions diet, and by a perseverance in these means he slowly rallied. The discharges from the fistalous openings, gradually lessening, at length almost ceased; the head of the bone became By WILLIAM TAGERY, Rog., Surgeon to firmly anchylosed in its new position, and the recovery of the patient was so far advanced, that he was able, with the assistance of crutches, to move about the ward, THE subject of the following case, John and occasionally, in the garden, at the rear Tamor, a sailor, was admitted into Mercer's of the hospital. About seven or eight days interest were disclosed by the examination ferings very much. The pain extended from of the body after death, I shall curtail the this point over the entire abdomen, which history and symptoms of the case during became swollen, and exquisitely tender to the protracted residence of the patient in the touch. The man had constant thirst, she hospital. He was admitted with a tumour in the upper and outer part of the touch. The man had constant thirst, and incessant voneiting, which could not be thigh, at about the region of the tensor parently without muscular effort, immediately making femoris. The exact nature of this parently without muscular effort, immediately acted to the same of the countries. swelling could not be clearly ascertained at nance was sharp and anxious, and the pulse the time by an external examination, nor weak and rapid, with extreme prostration was it deemed prudent to explore it by of strength. These symptoms terminated

> Autopey .- The body was, generally, extremely emaciated. The abdomen was tumid, and on opening that cavity, there was

> On making an examination of the bip,

h the upper unt beneath Poupart's ligament, up unt beneath Poupart's ligament, into it a small flexible bougle, I into it a small flexible bougle, I ng into it a small flexible bougle, I was surprised to find its course to extend upwards, towards the abdominal cavity. On racing it I found a long narrow fistulous ract, which traversed the iliac and psoas nuscles, and terminated at the spine, where hetwo last dorsal vertebræ were found exensively carious. Another fistulous orifice vas situated at the outer part of the hip. In laying this open upon a grooved director, t brought me, by a tortuous route, to the acctabulum, the bottom of which was comsletely destroyed by caries, and allowed the lirector to pass freely through it into the savity of the pelvis, thus establishing a communication between this cavity and the he Museum of the Hospital

 t_{R}

the he says, "At the box-

4

all opening tom of the acetabulum there was an ulcerated opening, just large enough to admit a common probe, communicating with an abscess within the pelvis." In another case. he remarks, " there was an ulcerated opening at the bottom of the acetabulum, communicating with the inside of the pelvis." He likewise refers to two preparations belonging to Sir Astley Cooper, in which the abscess burst into the rectum. Other authors have recorded similar facts, but I am not aware of any instance where peritonitis was the consequence, except in the case I have just related. I have no doubt but that the peritonitis was the result of the carious acetabulum communicating with the pelvis, urface of the body. There was, likewise, a and I am strengthened in this opinion from istulous opening at the outer part of the the circumstance of the man's complaining high, lower than its centre, with one or two of deep-seated pain in the right iliac region, ther fistulous openings of minor considera- for two days previous to its being fully esion, in the neighbourhood of the joint tablished. I do not see much difficulty in the glutzus maximus and medius muscles, arriving at this conclusion, where a fistulous were much wasted, and intimately adherent tract exists, one orifice of which opens on o each other, and to the parts beneath, the outer surface of the hip, and the other which were altogether changed in structure, upon the inner wall of the pelvis. May not seing converted into a tough fibrous mass, inflammation have been transmitted by coninficult to be cut with the knife. The glutinuity to the structures immediately within an an inimus, pyriformis, gemini, and obtine pelvis, and from thence to the peritorator internus, with the sciatic nerve, neum, the secretion from the fistulous pasvere all so blended together, by the effects sage acting as a foreign body? When luxaof repeated attacks of inflammation, and tion occurs as a consequence of this disease, leposition of this new fibrous substance, I believe that the head of the bone is almost but it was impossible to distinguish one always found to have passed upwards and tructure from another. I could not per- untwards on the dorsum of the ilium. In wive any thing resembling a capsular figa- one instance only has Mr. Brodie observed nent. The posterior border of the aceta- a luxation for wards, " the head of the bone mlum was destroyed by electation, and the resting on the pubit." In the case which I enterior surface of the head of the femur have related, the head of the bone does not tas found immoveably fixed, and resting on occupy either of these positions, but is he ilium, close behind it, approaching the thrown backwards behind the acetabalum. schiatic notch. The great trochanter looked; and in a very slight degree upwards. Oborward, and somewhat outward, in front of serving the extreme tenuity of the bottom he original articulating cavity. Where the of the acctabulum, a person unacquainted read of the hone rested, a new socket was with the resources of nature in resisting the ornied, rather by a depression of bony effects of disease, would feel surprised that natter around it, than from absorption of matter did not more frequently make its he part of the os innominatum where the way inwards in such cases. Velpeau, in his read was fixed. The acceptabulum was much "Surgical Anatomy," has the following judieccupied by a ligamentous structure, but its clous observation upon this point:—Hesays, sottom was destroyed by caries, and, as has "the bottom of the acetabulum is so thin, seen previously observed, led by a fistulous that it would be very easy to perforate it in pening into the cavity of the pelvis. The disarticulating the thigh, and thus plunge read of the hone did not seem to have suf- the point of the knife into the pelvis. ered much from caries, as it appeared to be On the other hand, caries or necrosts may indiminished in size. A preparation ex- traverse it also, as toe frequently happens bibiting the diseased parts is preserved in in severe coxalgia, and if the pas do not then escape into the cavity of the pelvis. it is because the soft parts which line it beam aware that Mr. Brodie, come thickened and indurated, in propor-Meable work on diseases of the tion as the disease advances, and thus onpose to it a more or less solid barrier, but which, nevertheless, is not insurmountable, in any and a shall be solid.

Dublin, Dec. 22, 1836.

TRIAL OF MEDICAL MAGNETISM

AT WESTMINSTRE.

To the Editor of THE LANCET.

Str.-As I perceive with regret that my name has been alluded to in connection with mineral magnetism in your report of what took place at the Bestminster Medical public, crave a corner in your valuable PAROCHIAL MEDICAL ATTENDANCE. journal, to state a few facts connected with Society, I must, in justice to myself and the this subject. The virtues ascribed to mineral magnets by one party and denied by another, are, you are well aware, by no means new.

Dr. Schmidt asserts that his peculiar method of charging or increasing the power of the magnets is new, at least in this country, and his method of producing a north pole by a north, and a south by a south, while Drs. Paraday and Ritchie assert, on the contrary, that there is nothing new in the method; and as to the poles producing any other than these opposites, it is a complete fallacy, and both these gentlemen deny in the most positive manner the curative powers; and further, that no physiological effect can be produced by them, -that on

the living body they are totally inert.

But to enable Dr. Schmidt to prove the physiological as well as the curative powers; of his magnets, the Westminster Eye Hospital patients were offered him for his selectwo weeks, on Saturday the 12th inst., to the surprise of many, and myself among the Parliament."

Parliament. Parliament But of wha produced by the cold of the magnet. I immediately had a bar of wrought-iron, of nearly the same weight as the magnet, made in the form of a horse-shoe, and on Wedceday the 16th inst. In the Westminster Rye Hospital, Dr. Schmidt himself tried the effect of my har of wrought-iron on Mr. II. T. and on several other medical gentlemen present, when precisely the same physiological effects were produced on all. What carative effects may be reported, of course I have not the means of judging. In the above investigation I have had nothing for in the my object but an inquiry after truth, no person, no not even Dr. S. himself, will re-taics more than I shall do, if the magnets can be brought to our aid, if only in the unfair to settled yes

alleviation of the above you will very muc oblige that I remain, Sir, your very o By the in C dient servant, ROBERT DAVIDSON. Parliament-street, Dec. 29, 1835.

SCHEME

FOR REGULATING

To the Editor of THE LANCET.

UNCONNECTED as I am with any party in the profession. I have no besitation in expressing my sincere pleasure on perceiving a modification of your views as to the origin of the abuses now perpetrated in the rural districts, under the name of " Medical Re-

In the excellent observations contained in the leading articles of the three last Numbers of THE LANCET, you place the question in its true light. The blame attaches to the entire administration of the Poor-Law, and the Somerset-House gentlemen, as the head of that adiamistration, are the principal, though by no means the only offenders; nor is there any probability of redress until " the tion, and it seems that from eight cases of conduct of the Poor-law Conversationers and amaurosis, Dr. S. selected four of the most their assistants be brought before the consifavourable for the magnete. At the end of deration of the executive Government and

But of what use will complaints be, unless the Westminster Medical Society "that the we are provided with a remedy? In acmineral magnets had produced a certain condance, therefore, with your general rephysiological effect, both at the Eye Hos- quest to the profession to furnish suggespital and the Westminster Hospital, usurely thous, and as an answer to your direct ques-lachrymation and great mobility of the iris." tion, "what is the scheme that medical As I lelt very much interested in the sub-practitioners would recommend?" permit ject, it occurred to me that instead of mag- me to propose a plan, which, as far as it has netic influence, the physiological effects any merit, will recommend itself to your at-mentioned by Mr. H. Thompson might be tention, and to that of your numerous readers; and, even should it be altogether undesirable, will, I hope, be the means of calling forth more suitable and unobjectionable schemes of amendment. I propose, therefore, three principal measures.

I. That there be a certain and uniform remuneration for parish medical attendance.

11. That parochial surgeons he fully anthorized, in every case, to decide upon the nocessity of their assistance to sick par III. That the rate-payers of such

appoint the medical attendant of

let. As to Rememeration. Th of appointment by "tender," qualification of medical manifestly wrong, as

The Part words

ductive of transactions that its aboltion to the might be easily embodied in a scale similar character of the profession, that its aboltion to one proposed by Mr. Rumany, of Cheswould be hailed with estisfaction very revery medical man, except those infatuated specularity. The objection to a payment per case is, that lators, whose object is, at any risk, to occupy a point d'appui, from which to invade the practices of their previously established brethren. Nor is the plan adopted in some other Unions more defensible; viz. a certain remuneration offered, far below the previous expense of medical attendance, without any reason assigned, except that of "economy," and forced upon the medical residents under the threat of introducing one of the students, or half-pay surgeons, whose name, are on a list at Somerset House. Both these abuses would be removed by the adoption of a scale of remuneration, calculated upon the real cost of proper medical attendance. But suppose the principle of a fixed scale of remuneration were determined upon, several questions arise as to the mode and data of its calculation, and as to the persons by whom it should be calculated.

estimated by the total number of pumpers in the poor, to decide on the amount of remueach parish-or it must be by an average payment for each case of illness. The former appears most generally acceptable to medical men, and is proposed in an able pamphlet by Mr. Yeatman, of Frome: if adopted, however, the distance of parishes from the medical officer, as well as the seperficial extent of large parishes, must be provided for in addition to his plan.

But I doubt the propriety of this mode, for the following reasons . -- 1st, the difficulty of the calculation is much greater. Indeed, I know not exactly how a scale, containing a variation in the number of paupers, a varia-tion in the distance of parishes, and a variation in their superficial extent, could be compiled; and without either of these three items it would be imperfect as a guide to a fair and reasonable remuneration for the trouble and expense bestowed. 2ndly, the total number of paupers is not by any means always proportional to the number of met. 3rdly, disputes might often arise as to who are strictly paupers; since the regular paupers of the country are rapidly diminishing, as a distinctive class. And 4thly, it is probable that the administration of the Poor-law will reduce the number of paspers much faster than the number of patients who must be attended by the parish surgeon.

None of these difficulties present themselves with the payment per case; and it has the advantage of being recommended by sayment must, however, depend on the number of patients likely to be atthe distance of every patient the provisions of the Act on that bead to the distance of every patient that the provisions of the Act on that bead distance. These two condiments the three variations should elect their medical officer. This point medical of calculation, and is one, which is rather likely to be passed ded, and on the distance of every patient imprise the three variations

The objection to a payment per case is, that it is a temptation for the relieving officer to withhold slight cases from treatment. This objection is so valid, that it would be absolutely necessary to deprive the relieving officer of this power, before the plan were adopted. Then it would be unobjectionable. But more of this under my next proposition.

As to the persons by whom the calculation should be made, most certainly it should not be entrusted to the Poor-law Commissioners, nor to our own body, exclusively; but I think it might be fairly settled by the two parties in conjunction, that is, the country practitioners might appoint a certain number of deputies the fewer the better for the execution of the business), who should have power to treat with the Commissioners on the subject; or, what would be preferable, the Government might appoint some disinterested persons, whose attention may have been previously directed 2nd. As to the mode, it must be either to the expense of medical attendance for neration.

By whomsoever made, the scale should be in force only for two or three years, in order that unavoidable defects may be rectified, and unforeseen variations in prices may be periodically adjusted.

Srdly. As to the power of "ordering" medical attendance for the nick paupers. This must no longer remain in the hands of the relieving officers. It is atterly unjustifiable that these men, who in many instances are ignorant and unfeeling, necessarily absent from home during the greater part of their time, and anxious to curry favour with their employers by a rigid parsimony,—I say it is monstrous, that to these persons should be intrusted the delicate, important, and prompt decision, as to whether the applicant requires medical assistance. Almost all the coroners' inquests that have been held on neglected paupers since the introduction of the new Poor-law, have implicated the relieving officer.

It appears to me, therefore, that the medical officer must be the first referee in every case, nor should the sick pauper have to do with any other authority until medi-cal advice has been obtained. Some check would, of course, be required on the surgeon, to prevent the lavish distribution of relief to those whose circumstances do not entitle them to parochial assistance, and this might be arranged by a subsequent appeal to the relieving officers, or by the Board of Guardians declaring that the relief afforded is by way of loau, to be recovered according to

over as unimportant; to me it appears far otherwise; for even supposing that the first ineed as lateriers with the supervision and second propositions should be agreed to, which the Boards of Guardians, as the exceeding the laterier of the supervision which the Boards of Guardians, as the exceeding the supervision with the Boards of Guardians, as the exceeding the supervision with the Boards of Guardians, as the exceeding the supervision with the Boards of Guardians, as the exceeding the supervision with the Boards of Guardians, as the exceeding the supervision with the Boards of Guardians, as the exceeding the supervision with the Boards of Guardians, as the exceeding the Boards of Guardians, as the exceeding the supervision with the Boards of Guardians, as the exceeding the injustice and general injury, by the appointment of unfit and unacceptable persons to fill the responsible situation of parochial medical attendant.

Indeed, in proportion as the office might be made a more desirable one, so would a eystem of jobbing and favouritism prevail; more generally in these appointments. In a union of twenty or thirty parishes, the guardians cannot be expected to know the merits of each medical candidate, nor to judge impartially of the wants of each locality; the friends of the influential members of the board would, therefore, frequently be chosen in preference to the independent practitioners, who might possess no other recommendation than the confidence and good will of the parish in which they reside, — a recommendation which now often tells more against than for a candidate. Above all, the vile system of medical districts might still continue in force, for although the guardians would be unable to economize by it as they do at present, yet the mere wantonness of power, of more than a million of the human race, and the absurd fancy of simplifying their when suffering from disease, very properly arrangements, might lead them to appoint | reminded the profession, that the time is fast three or four medical officers, where ten or approaching when its members should agree twelve ought to be employed. These ap on some "almost unobjectionable plan," for prehensions are not merely speculative, but the removal of the gross defects of the prearise from a close observance of the work- sent system of medico-parochial relief. You ing of present measures.

Not only, therefore, as a preventive to sity of a change in the system, and that the these evils, but as due to the parishioners only question is, what are the principles on and to the medical profession, let each parish which the alterations should be made, and elect its own surgeon. The merits of the how they should be carried into effect? And, candidate will surely then be the only ques- finally, you have most judiciously observed, tion with the electors, and as no increase of that it will be of little use again to direct the expenditure would follow their exercise of attention of the House of Commons to the the right of suffrage, it is but in accordance subject, unless the profession be provided

should be extended to them.

The contested election between Mr. Cos- ledged. greave and Mr. Dunn, for the parochial It is now nineteen years since my senti-surgeoncy of St. Clement Danes, is a striking ments on the medical care of panpers were fact in support of my proposition. If four first recorded in the Medical and Physical or five guardians had been left to settle that Journal of London. In the year following or the guardians had been left to settle that. Journal of London. In the year following matter, it is just as probable that Mr. Dunn a plan was suggested by me for legislation, would have succeeded as Mr. Cosgreave, which was published by Longman and Co. although the latter was obviously entitled to The scale of medical pay, as contained hold the office, from "the humanity, skill, therein, was not, however, sufficiently grand industry, with which he had for nine duated, and was much toe high to be likely years discharged his duties in that parfah." to receive the sanction of Parliament, from Your remarks on that election were as just the which quarter alone any last and final secas its termination was fortunate.

put an end to the vexations and unsatis-factory mode of appointment now in vogue, contract system. Meanwhile, the to increase the respectability of the office, alluded to was distributed and and the prevent future chicanery and patronage, the rights of the rate-payres should be restored, and the parochial surgeon elected apite of expense and discourage

fauctionaries.

I have now, Sir, laid before you the heads of my plan, -there are many details which I refrain from troubling you with. Trusting to your liberality for the insertion of my remarks, I remain, at present preferring to be known only as, your obedient servant,

RURICOLA.

Dec. 21st, 1835.

PLAN

FOR REGULATING

MEDICAL ATTENDANCE ON THE SICK POOR.

" Da dextram misere," -- Vinc. Fa. lib. 6, 1, 379.

To the Editor of THE LANCET.

Sin .- You have, in advocating the cause truly intimate, that all concur in the neceswith the liberal spirit of the age that it with a remedy for the cvils, aircrady so fully made known, and so generally acknow-

its termination was fortunate.

Once more, therefore, I submit that, to From 1818 to 1834, I watched, with

and improved addicate was former, first inserting a copy of it in Tax Lancer for April, 1831, with a graduated scale, which cost me no little labour to construct. My plan, which embraces one uni-form system in the appointment and salaries of parish surgeons, consists mainly

of parish surgeons, consists mainly,
1st. Of a graduated scale of remaneration per head, and per hundred, of paupers, falling in price, in proportion to numbers, but below which rate of pay, no surgeon should be permitted, by law, to contract.

2nd. It recognises the principle of a comparatively minute division of medical labour, secured by appointing surgeons to parishes, or districts, in rotation (after two years' residence and practice), and limiting them to the care of two thousand panpers, annually, where medical men can be obtained in the immediate neighbourhood of the respective parishes or districts.

3rd. The contracts recommended, are to include casual paupers and interlopers, the treatment of compound and simple fractures and dislocations, and those attended under a suspended order of removal; no bill for extras being allowed, except for midwifery and trusses.

4th. It is also recommended that no pauper should receive medical relief, without an order from the proper authorities, unless in very urgent cases.

Permit me, Sir, to refer my professional brethren to No. 400, page 151, et seq. of your periodical, for the details of the plan alluded to, and to express a tervent hope that they will support it, unless they can produce one more worthy of their confidence, and of my humble but zealous assistance.

Many valued correspondents approve of the plan under consideration, while some propose, in addition to the salaries, so much per mile for journeys beyond the first mile. This item of pay, I apprehend, would be opposed in Parliament, because it would unsettle the amount of salaries, and open the door to real or supposed imposition. Surgeons would be suspected of performing more journeys than necessary. My experience, however, and close attention to the whole of this most important subject, induce me to recommend that the expense of drugs be defrayed by parishes or unions, instead of by medical contractors, the amount of which would be in augmentation of professional remuneration under my scale; and this probably might meet the views of those who think it too low, while it would remove all suspicion of paupers not being duly supplied with medicine. The medicine to be furbed by select vestries or guardians, with drice of the parish, district, or union paragraph by order of guardians or

attack, like the | stated hours, except in cases of emergency, when it should be done, as heretofore, at their own hopper and at their own expense. The mean of parishes has increased in author of medical monoplies, and, in the

same proportion, has rendered it impossible to discharge the medical duties, while many districts of unions are much too extensive for the medical superintendance of individual surgeons. The former miserably low rate of pay has been reduced in the districts and unions, and advertising for tenders is, in effect, farming out the care of the sick to the lowest bidder. In short, the well-known evils have been very recently multiplied and aggravated.

In defending the appointment of young surgeons, immediately from the schools of medicine, the Poor-law Commissioners speak of the superiority of their education, as compared with that of their elder brethren affirming it to be equivalent to the experience of the latter. But this singular argument, applied only to one of the de-partments of medicine - midwifery - will lead, if acted upon, to inhumanity and death: since in difficult cases of childbirth (about which alone, parochial, district, or union surgeons are consulted by midwives), nothing short of experience will enable them to overcome the difficulties of the case.

Another error of great magnitude has been committed by the commissioners, its advising guardians to pay surgeons so nuch per patient, instead of per pauper, per annum. The relieving officer, knowing nothing of the insidious approaches of disease, will, in numerous instances, refuse orders for medical relief, except in obviously severe and protracted cases of illness and accident. And it is frightful to contemplate as to what may become of pauper sick, after the half-crown fees, per patient, shall amount to the former salaries, for attendance on whom the district and union surgeons are not to be paid one farthing.

To amend the law regarding the medical care of paupers, will be as great a benefit to parishes as to the sick and hurt poor, since the latter, being more skilfully treated, will sooner be removed from the list of those receiving parish support. How many cripples, blind persons, and individuals unable to work, have remained through life a burden to themselves and parishes, in consequence of medical neglect, and the bad ranagement of fractures, dislocations, and dissesses of the eys, and of those numerous chaosic forms of disease, the victims of which might have been restored to health and profitable labour, if duly supplied with medicine and advice in the earlier stage of disease! How many parents have died, who might have been saved under a better system of the room to be in a convenient modical relief, and whose families have been Militich the surgeons or their as-thrown on their parishes for support! To come dispense the medicines, at say nothing of the impulses of humanity, a

change of system may be truly advocated in Parliament, in accordance with economy. No pecuniary saving will result from leaving one portion of the pauper population to the care of medical contractors, at 35, 36, per patient, while another portion is to depend only on the eleemosynary aid of medical practitioners, notwithstanding the fact that their services in this way are beyond all praise, services performed like those of the illustrious Boerhaave, who declared the poor to be his best patients, because God was their paymaster.

I remain, Sir, your obedient servant, J. C. YEATMAN. Frome, Somerset, Dec. 28th, 1835.

THE LANCET.

London, Saturday, January 2, 1836.

Ir may suit the feelings and objects of certain mischievous insps who play their tricks in the temple of bigotry in the Strand, to allege that the professors, the Council, and the proprietors of the London University, or, as it is hereafter to be called, University College, have been endeavouring to obtain for that institution an all but exclusive nomination in the charter, which it has of a metropolitan university. The allega- equality of all the candidates for literary tion is a gross, unqualified calumny, so and scientific honours and distinctions. In far as the professors and the Council are taking this course the professors judged concerned. What may have been done by rightly, both as regards their own reputathe proprietors, generally, or by individual ition and the interests of the public. They members of that body, we know not; but it have honestly denounced monopoly, and is notorious that neither the members of the they courageously rest their hopes of suc-Council, nor the professors, have ever made cess for their pupils, on the abilities which any application to the Crown, or to the ex- they 'the professors; are capable of disecutive Government, for any, the smallest playing in the discharge of their duties. exclusive privilege, either for their own Besides, it must be recollected, that the act benefit, or for the advantage of the institu- of applying to the Examiners who are to be tion to which they are attached. When appointed by the Crown will be a voluntary they endeavoured to obtain the power to one. There will be no compulsion when confer degrees, neither in their petition, nor lever in the case. The student me in the arguments of their advocates before may not, become a candidate for \$1 the Privy Council, was a single fact stated, and it would be madness to support or an argument advanced, which had a tend- curriculum will be framed will

ency to three the there the merits of their contemporaries, or the claims of other bodies to legislative honours and protection. This position was assumed with perfect justice, and was maintained with boldness and consistency. The senate claimed for their pupils those honours which were awarded at other universities, and where higher, or more efficient appliances for the acquisition of such honours, cannot exist. There was not the slightest pretension to exclusiveness, in any one of their denunds; but having felt that they were fully capable of rendering their pupils competent to undergo an efficient examination in literature, in the arts, and in the sciences, they claimed the privilege of awarding university honours, under the sanction of a charter, because, and only because, there was no public examining body in the metropolis to which the candidates for university distinctions could be referred.

No sooner, therefore, was the proposal made, that an university should exist in the metropolis, under the sanction of a charter granted by the Crown, than did the proforsors of the University willingly say "content" to the principle of a scheme been proposed by the CHANCELLOR of the which would recognise before the Examiners Excuseurs to frame for the establishment of the Metropolitan University, the perfect

the effect of determining the proceedings at which | through its possession, over the proceedings a man must choose to become a capalitate of Smithfield market, Suppose that in that for university distinctions. This consider charter the names of two or three counties ration, as well as a multitude of others, in England had originally been introduced clearly points to the necessity of establish- as those of favoured places, and that no ing the University in this metropolis upon cattle were allowed to be sold in that market, the broadest basis - upon the most liberal unless they had been bred in the counties and well-understood principles. It would particularized, the charter requiring that he far better to be without any university "certificates" in evidence of that fact should in London than to create a new monopoly, be produced by the sellers, to the full satisthough a new monopoly would be created faction of the Company of Butchers, that no beyond any doubt, question, or cavil, if the deception was attempted, that no fraud on pupils of particular institutions are to be the terms of the charter was about to be selected for examination, to the exclusion of practised. Not one whit more glaring is all other applicants. What is it that the such an absurdity, and, probably, not half Government designs to honour? Is it learn- so pernicious in operation would be the ing? Is it a knowledge of science? If it possession of this exclusive privilege on the he so, let the fact be declared, and let the part of the favoured counties, as would be example accord with the precept. If, on the exclusive privileges of two or three inthe other hand, the honour is to be ob- stitutions in the metropolitan universities. tained because there had been weight of if any were secured to them by the proposed metal in the pocket, instead of solidity of royal charter. The public would naturally information in the head, why let an accord- say, "How monstrous a thing is this! Here ant declaration be honestly and boldly made. " we are deprived of excellent beef, because We have always in this country laboured "no oxen can be sold in Smithfield, unless under the misfortune, in our national trans. " it can be satisfactorily certified that they actions, of beginning at the wrong end. In ;" were bred in Oxfordshire, Lincolnshire, or short, money has been made a possport to "Devonshire! And, more monstrons still, every office, to every distinction,-except, " the graziers in those counties, knowing indeed, in those few cases where money, "that no other cattle than theirs can be after talent has been left to work its way up " received into the market, have become to a certain point, has been used as the in- | " quite indifferent about the breeding, and strument of temptation, for moulding down " comparatively careless in feeding their the possessors of talent into pliant tools, to ju stock, placing full reliance on the force be used by the hand of power. It really "and value of that exclusive and monstrous would appear, from what is passing before " privilege which has existed so long in their us, that there is to be a free trade in every " favour. Why should there exist any other thing except in the means of obtaining know- " law upon the subject, than one which gives ledge and literary distinction; but is a prin- " to every proprietor the opportunity of ciple which is odious in the ordinary and " making the most of his stock? There are gross occupations of trade, to be continued "the oxen. They exhibit their own qualifor the purpose of fettering, restraining, and "ties. The slaughterers who purchase blading down, the faculties of the human "them are fully capable, from experience.

Without adverting to the general " of testing the nature and value of those mbloh have hitherto existed in " qualities. Why, therefore, should legal near attention for a moment !" restraints of any kind exist, relative to the of the City of London, and "breeding, the buying, and the selling of which can be exercised, " cattle? Common justice demands that "the occupiers of the soil in every county for a departy There partous, we my, are noof sale.

been sold, all under the operation of the cer- most pernicious impression on the minds of tificate system. And what do we discover the Examiners, as it is next to impossible to as the result? Why, that men of acknow- believe that those gentlemen would conledged talent, who enjoy University titles sider that the candidate had been defrauded and collegiate distinctions, constitute the out of so many pounds sterling, through the exceptions from the general mass, and that operation of the curriculum of the Univerthe great body of titled graduates, possess no vity. claims to public confidence, either in science. What just, what legitimate, what philoor in literature. We have had enough, then, sophical, or what rational connection is there of the old system. Away with it, and for between the payment of money, and that state ever. Let the Government establish in its of mind which renders a person copuble of place an institution which shall be ruled by showing that he is satisfied to distinction in the the principles of justice and common sense, ranks of his eventshe and literary countryand let public utility be the mark towards men? Let this be shown, and we will which every arrangement and every formu- hereafter remain silent on the subject. In lary shall be directed.

ability, and acknowledged liberality of sen- shall continue to think that the Professors of timent, who profess to be of opinion that an University College have done themselves examination, however comprehensive it may lasting honour by disclaiming for the be, or however well it may be conducted, bruted institution to which there cannot be readered a sufficiently estimate every privilege which is not if sory test of the quantity and quality of the common with even the less information which is passessed by a candi- their contemporaries. date who is under attachmention for a license

" in the kingdom, should be placed on a paragily assentatives raon occurring " perfectly equal footing, and the interests THE OFFICE OF UNIVERSITY SEAMINERS " of the public require that the property of They have too much doubt of their own " competition should be allowed to operate powers, to allow them to analyse with cor-" in the market, with a free and perfectly recences the powers of others. If men of "unrestrained scope." It is perfectly clear sense had not put forth such a statement, that the man who breeds the best cattle we should unhesitatingly have termed it wants no protection from the law, and it "nonsense," and have received it as the will, we hope, he willingly acknowledged that mere vapouring of undoubted imbedlity. the farmer who breeds the worst cattle, If, however, we were to admit to these parought not to enjoy a monopoly in the arena ties, which, of course, we should only do for the sake of argument, that the examination What has the exclusive system accomis not an adequate test of the abilities of the plished at Oxford and at Cambridge? What examiner, would the production even of has the same system accomplished in the half a thousand certificates of attendance hands of the knavish medical corporations of supon lectures, add to the number of the London? What has the certificate exaction mental acquirements of the candidate? wrought for science, or for the public? Would the possession of such documents The gentlemen who are engaged in framing increase his capabilities? Obviously not. the new charter should furnish the reply to But the display of a bundle of "certifithese questions. Degrees have been granted, cates,"-which, in reality, are only so many diplomas have been conferred, licenses have receipts for money paid, - might produce a

the incentime we shall confide in the ea-There are some gentlemen of known lightened views of the Government, and public and the profession.

kind was at the disposal of the Government, surrounded by applicants for the empty the matter excited but little attention. Un-chair. The liberals, of course, were early der vicious rulers, professional worth is com- in the field, and calculated, each, on the motion to be quietly settled between corrupt; the executive. Every doctor or surgeon more particularly the mode of advancement his friend, at once called the senatorial inin Ireland, where a "chosen people," few fluence into action, and sought to reduce great population, monopolized every place mises or threats of popular power. One of advantage or emolument within the gift candidate, indeed, is said to have stowed six suffered to enter the field.

the watchfulness naturally excited by long- test. endured exclusion. The principles of equity | As a refuge from the responsibility attach-

the Loan Exeurskant for the vacant place This circumstances strenging the line the Michael Hopeles, and with such per-Somtiment, by the Irish Government, of a severing solicitations, that his Excellency successor to the late Mr. M'Down in the would, we believe, have cheerfully yielded Richmond Hospital, illustrate, in a very up his power in exchange for an exemption striking manner, the absurdity of the pre- from the vexatious requests to which his sent mode of disposing of medical offices; office had subjected him. The instant it and also place in a striking light the opinion was known that the life of Mr. M'Dowal. which is now held respecting it by the was despaired of, the siege commenced; and before the undertaker had decently interred Formerly, when an appointment of this the remains of the deceased, the Castle was pelled to forego its claims, and leave pro- congeniality of his principles with those of patronage and its dependants. This has been who had an M.P. of the popular party for in number, and resident in the midst of a the Irish Secretary into obedience, by proof the Crown. No one, indeed, ever thought Members of Parliament into his barouch, of disturbing the set-led rules of nomination and made an overwhelming "avatar" on to vacant situations. The predestined pos- Lord Monrett with this exhibition of represersor of place was generally foreknown, sentative authority. The sudden and asand his induction permitted without any at- siduous display of social and domestic virtempt at competition, and almost without tues which was made on the occasion was complaint. The Tory administration of afrimost amusing. Fathers and fathers-infairs in Ireland bred their own agents, and law, brothers and brothers-in-law, uncles none but the produce of the old stud were said nephews, all forgot their differences in a moment, and struggled to obtain for some But at last the case is altered. The ex- dear relative the prize in the lottery of protension of civil rights in Ireland, by widen- fessional life. Every art, in short, which ing the grounds of eligibility, and inspiring ingenuity could suggest, was put in requihopes of preferment, has enlarged the sphere sition; and a very pleasant farce, called of rivalry for official situations, and raised a i "The Rival Doctors," might, with very little host of candidates to urge their claims with trouble, he elaborated from the contents of all the sturdiness of new-born liberty, and the Secretary's bereen relative to this con-

in the distribution of patronage, which that ing to the discharge of a duty which every substrine the administration of Lord Muz- Government, thinking correctly and meangave an additional impulse to the ing honestly, must consider itself incompegalisical parties in Ireland, and tent to discharge rightly, the Irish Execun the present occasion, in tive appointed three commissioners, Mr. listed activity. To such CHAMPTON, Mr. CARMTONIAM, and Mr. stem applications made to Course, to dispose of the situation. But in

the working of this plan, it is said, the Go jauch can vernment was disappointed. As might have rouse cannot be given; nor have any parties a more on this important subject. right to complain, so long as they acquiesce in the existing system of elections, and pursue the same obnoxious means of preferment as their successful rivals. What ought the feelings of fathers, or friends, or uncles, Members of Parliament, have to do with appointments to hospitals? Until this wretched means of promotion is abolished, and the "concours" established in its place, expressions of complaint and dissatisfaction will continually attend all hospital elections. Had those who now repine with disappointment met in conference, and, like the surgeons of the hospitals of Paris, on a recent occasion, protested against promotion by the vile machinery of private interest, they would have deserved the sympathy of the public, and the support of the press; but so long as they consent to be the agents of a pernicious and absurd system, they caunot justly look for either. Now their complaints are only mocked. Their own corrupt inclinations, and the incompetency of even the that a large body sho best Government to decide with justice in pose. Ten or a dead

hy chance, are now sho-Funderstood. From such reasons as been expected, the surgeons differed in con-these is it that we feel strong apprehensions! sultation, each having his own private in- of the successful working of that part of the terests to advance. The result, however, is, Metropolitan University scheme, which that Mr. Adams, one of the surgeons of gives to the Crown the nomination of the Jervis-street Huspital, and Mr. M'Donnet. | members of the "Executive." In organizing have been appointed; Mr. CARMICHAEL, a new project, and putting it into operation. the friend of these parties, having himself in the first instance, the appointment of the resigned to make way for one of them. The officers by Government, may not only be an gentlemen selected are certainly well-in-! excusable, but even a necessary, proceeding. formed men, and in every respect equal to If, however, it is intended that this method the discharge of their new duties. Some should be continued, without resort to the displeasure, certainly, has been manifested "concours," in filling the minor offices, against the Government, for the appoint- and thus gradually make it imperative on ment of Mr. Adams, in consequence of his the Government to ratify the election of political views, which are said to be alto- those men only who, by such an ordeal, gether Tory; but this is a ground of com- prove themselves to be the best qualified plaint which is hardly to be named in con- among the candidates, why then, indeed, the nection with a system of appointment Government plan could not be too severely which in its very essence outrages common reprobated. But, as we have already intisense and reason. Under the present mode; mated, we shall await the publication of a of arrangement, in fact, general satisfaction draft of the proposed charter, ere we say

> We have selected for insertion in this week's Lancer, from several letters which we have received on the same subject, two able communications, (pp. 540, 542,) both containing schemes for regulating the medical contracts in parishes. Mr. YEATMAN has on several occasions discussed this subject with very great ability, and in the lotter signed " RURICOLA" there is evidence that the writer has devoted the energies of a thoughtful mind to the question which is now occupying so large a share of the attention of the medical public. A careful consideration of the contents of these documents, must lead to the opinion that no useful or final settlement of a "plan" can take place, unless the parts of which it is composed, receive the most della vestigation in the presence of of medical practitioners.

sen the capabilities YNATHAN, the author of the letter of RURICOLA," would be us well qualified to execute the task, as would be a committee of one hundred. But when the importance of the ulterior object of influencing members of Parliament is estimated, the more numerous the attendance, the more favourable will be the chances of carrying out the contest to a successful result. Should it be determined, by surgeons who are practising in the country, to hold a meeting in the metropolis, we would suggest the propriety of postponing it until within a few days the Bats that Mr. Liston was solicited to after the meeting of Parliament, at which become a candidate for the chair of surgery, time the members of both Houses of the lately vacant in the University of Edinburgh. results, by their medical friends. We hope published in The Courier, evening newspaper. that experienced practitioners will not be remains not only unrefuted, but is fully consparing in their remarks on the plans which firmed by some remarks which have been are this week proposed by our correspond. made in the Town Council at a meeting of ents. The subject, altogether, demands a very patient investigation.

cover of THE LANCET of December 19, in come a candidate, as the patrons were at which it was announced that a Dispensary that time looking out for a fit person to fill the surgical chair; and Mr. Liston then had been opened in Aldersgate-street for the said, that be would not forego his prospects treatment of poor persons who may be in London for such an appointment. Since afflicted with fisculous and other diseases of that time, however, having had occasion to the rectum. The founder and surgeon of know if he would come forward; in answer this institution is Mr. SALMON. On first hearing of the proposal to institute such a Dispensary, we felt inclined to question the propriety of adding another to the number of our, so called, "medical charities;" but on giving the subject a more attentive consideration, we are inclined to believe that this Dispensary, if it be conducted on the principles which have been set forth in the pro. spectus, will be productive of some important rantages, not only to the public but to the The practice of this institution. erved, is to be opened, withat of a fee, to all medical the profession will now ty of ascertaining whether

of Mr. I that class of diseases which is to be received for cure at this Dispensary, occurs with such searvellous frequency as has been alleged by some Heing authors who have written on the subject; or whether, in fact, increased experience, and further opportunities of obscryation, will not tend to confirm the suspicion which has long been entertained by many eminent surgeons, that this department of surgery has long been made a source of profitable and disgusting quackery.

Ir has been denied by the hired tool of Legislature might be visited, with the best The statement, however, which was first that body, and reported in the Edinburgh Weekly Journal. On that occasion Convener Dick said, that

" When Mr. Liston was lately in Edinburgh, performing an operation, he (Con-An advertisement was published on the reacr D) asked Mr. Liston if he would beto which, in a letter he had received, Mr. Liston stated, that an appointment to any chair in the University, would not induce him to become a candidate."

This declaration of course will set the question at rest in the minds of all persons who have not some knavish or malignant feeling to gratify. "But oh!" somebody may say, "the Council as a body did not offer the chair to Mr. Liston." Of course it did not. The experienced men of the North are more cautious in their proceedings than to take such a step. Individual members of the Council having ascertained that Mr. Liston would not leave London. the Council, as a body, reasonably enough, refrained from addressing Mr. LISTON on the subject. This is the whole of the matter.

THE LATE DR. WARREN.

DR. PELHAM WARREN died at his house in Berkehire, in the 57th year of his age, in Berkenne, in two and distressing filess, during the best of its assessment in an analysis of the first of its and legs of Physicians, though it was considered faithful friend, Mr. Pen nington. His death quite sufficient to enable him to practice what was occasioned by an abscess in the liver, they considered as the higher department of the liver, they considered as the higher department of the liver, they considered as the higher department of the liver. atrabilious temperament, and of a siender timate objects of attention for a pure phyphysical frame, and had a dark and pene- sician, were not so comprehensive as to trating eye. He was constantly taking allow him to make any addition to medical snuff, indulged freely in the juice of the science. Indeed, excepting one paper, which in his person. The circumstances, alto-lence was a predominant feature, made it concealed, he never even attempted to not surprising that he should fall a victim make a contribution for the advance-to hepatic disease. He was laconic in his had a great deal of devil in your face.

was considered to be one of the most capeta men in the trade, contriving to leave behind him a considerable fortune, as the result of 'This d—d morbid anatomy will speil the practice of physic." "knowledge of the world," as it is called, enabled him to secure for his son PELHAM an easy and safe path to successful practice as a London doctor. Educated in a school where bigotry had arrived at its acme, and corruption swayed unmolested, young WAR-REN had every opportunity of deriving the trary to their wish, and thus got for himself advantages which attend a classical, and the character of rapacity for fees what has of late been even more highly uppreciated, an Oxford moral education; and never having applied almself seriously to between Windmill-street and St. George's the study of medicine, or any of the scician, and to procure for him a cordial wel-come as a Fellow within the portals of the College in Pall-Mall East,—one of the most venerable and antiquated institutions in the have been sufficient to real empire.

an ephemeral station in any profession, was educated and was seldom rise to great eminence in its ranks, throughout life, he seem

for they, st most powerfuled which excites to insubjects, as it were, ps. Dr. Wannen's ndre knowledge. fame, it may therefore be exgrape, and, like all sensualists, was slovenly was published in the "Transactions of the discourse and somewhat coarse in his that due contempt for anatomy and pathomanner, and to many was by no means a logy which becomes those individuals who pleasing personage. On one occasion a assume to occupy the "highest grade" in lady was humorously describing to him the the profession, and during a period of characters which saick but very jocose friend twelve years, in which he officiated as one of had drawn of several medical men whom she the physicians of St. George's Hospital, he had at different times consulted, among used to hoast that he had never once been whom was Dr. Warren himself. Sir Harry in the dead-house. Indeed, the levity and H. she described as having "the manner, derision with which this pure physician flippancy, and flexibility, which would have treated everything like pathological anamade him a first-rate valet, or a good tomy, will scarcely be credited. Sir Ben-lady's maid." Dr. Maton must have been Jamin Brodie, in confirmation of this disintended, she thought, for "a village school- creditable fact, narrates, with that satirical master," and Mr. Buopie "for a Wesleyan simper in which the pure surgeons include minister." "And what did she say of me?" when speaking of their still purer brethren asked Dr. Warren. "I will candidly tell in Pall-Mall East, the following anocolote: you, said his friend, that she thought you." One day, when WARREN was waiting in the board-room of St. George's Hospital, Dr. PELHAM WARREN was the son of the to know the result of a post-mortem exalate Dr. WARREN, the Sir HENRY HUNBUG mination that was going on in the deadof his day, a London pure physician, who room, he got impatient, and while warming was considered to be one of the most expert his coccygenl region at the fire, addressing

was not very highly estimated by the "subordinates" of the profession. Possessed of inordinate self esteem, he was more cager to dictate than to suggest means of treatment. He used, also, to prolong his attendance on patients unnecessarily-at all events con-

Hospital, he found quite enough of physic ences immediately connected with it, is to both to answer the purpose of a pure physi- be regretted, as he possessed a rather better ripire.

Those who acquire in the outset of life the views and opinions.

M. WARREN.

quirements, and of knowledge of Xenes knowledge of Xenognost one. The manner is accomplishment to enderstand the was a year of the whole dent. Dr. Wanner was by no means a works form a very under portion of those blind shifterer of human nature, and he was volumes which are necessary to be studied spate familiar with the twiatings and turn-by practitioners of medicine. With self-ings of the eel-backed President, and was by practitioners of medicine. With all ings of the ecl-backed President, and was those deficiencies of education, however, he wont to express hisself very freely on this was by no means deficient in practical dissubject. An event took place on the death agnostic tact, and he was sufficiently well of the late King, which induced him to exacquainted with the routine of his profession press his opinion very decidedly on Sir sidered a first-rate pure physician, though communicate the doleful tidings to the new his fees during the last few years, in conse-tking. The occasion which so speedily meltiquence of his illness, and the great change ed the heart of the royal successor was too which has taken place in the fee-trade of favorable to be neglected for making some

With all his peculiarities Dr. WARREN allowing him alone to form the medical possessed some of the best feelings of human staff of the household, and obtained the than the imperfections of his character. Some mention being lately made of these in a private circle where the death of Dr. WARREN was the subject of conversation, a lady thus interrupted the conversation. "Ah!" said she, "speak not slightingly of Dr. WARREN. I knew him well. All my family in him placed the greatest confidence, and I know he had a tender heart. He long and kindly attended my beloved sister, who died of consumption in the South of France, whither she was sent in the hope of saving her valuable life. At his last visit she asked him many questions about the danger of her situation and her hopes of recovery, and after having given her the best answers he could, and left the room, my brother, unknown to him, observed him,

In the capacity of a Fellow Dr. WARREN was considered as the leader of a kind of opposition party in the College of Physiclans, that opposition, however, not having for its object any "rational" improvement in its constitution, but being aimed to dislags or to clip the wings of the President, and so losg ruled with sovereign sway the walts of that sanctuary. In most Dr. Warren was a Whig, any was deemed the me show

sial ac- haughtily exercised as were those of Sir design the second of the Baronet, he never had to enable him to fulfil its ordinary duties. HENRY, and to pursue a course which was Dr. Baillie used to say of him that he was regarded by some at the time as of a very a "tolcrably good guesser." Many collateral manly and straight-ferward kind. His Maadvantages combined to introduce him, jesty had scarcely "breathed his last," when early in life, to a considerable extent of Sir Hanay hastened from Windsor, in the private practice; and for some time, eati-dead of the night, to Bushey-park, where mating him by his income, he was con- then resided the Duke of Clarence, to consulting physicians generally, diminished necessary worldly arrangements with Wilconsiderably. His illness, indeed, so mate- LIAM the FOURTH, and Sir HENRY'S persuarially interfered with his attention to busi- sive powers were such, that though the KING, ness of late, that, contrary to the opinion of prompted by the best feelings, had declared many, he left behind him but a very indifithat he would not change any of the nervants ferent practice for the aspiring generation of his brother, Sir Henry convinced his to succeed to.

Majesty of the "advantage to the nation" of nature, which it is more pleasant to notice royal promise to concur in all his recommendations. As might be expected, Sir HENRY, with his usual excellent discrimination, selected his own personal friends to fill every one of the appointments to which any emolument appertained, judiciously awarding to himself the most lucrative. From the position which Dr. WARREN at this period held in the College, Sir HENRY felt that he could not entirely pass him over in the new arrangements; yet he wished to place him in no situation of distinction. So, without asking Dr. WARREN'S leave, or saying one word to him on the subject, he gave in a list, and got it at once officially announced, in which Dr. WARREN appeared with the inferior title of " Physician Extraordinary." According to professional eti-quette this was considered both degrading standing at the top of the stairs, bathed in and insulting; so when this appointment was announced to Dr. WARREN, he declined the honour in the most contemptuous manner, emphatically declaring "that he would be d-d if he would accept any appointment from HALFORD," at the same time addressing a letter to Sir HERBERT TAYLOR, the King's private secretary, requesting him to cancel the appointment.

On another occasion Dr. WARREN dis-played similar feelings of contempt at the conduct of the President. When the ephe-The was deemed the se pass meral conversationes at Pall-Mail East [Birs-Birshes] and although Dr. were first got up, every means were adopted to results feelings and man; to procure a manufacture feelings and man; ings of action relief feelings and man to procure a crowded attendance, in order to show the influence and popularity of the

KING'S COLLEGE - MEDICATE TABLE.

College, and persons of every denomina-I medical College, and persons or every wanted to a wholly failed to obtain "remution, from the debinet minister down to a wholly failed to be to obtain "remution, from the archbishop to necessary," classes of students, and at least to the curate, received legislations. apothecary "par excellent that o The ohemist and the druggist, "subording and all, received cordial invitations to become actors in the scene. With a view to make the contrast between the Fellows and the licensed physicians on this occasion the more striking, it was contrived that the cards of invitation should be issued in the the Licentiates should thus be invited by the It is most probable, that, on finding them-Fellows to attend the meetings of their own selves out of employment, Messrs. MAYO to give additional lustre to the "higher grade" in the College, all the Fellows should appear attired in their collegiate robes. To this proposal Dr. WARREN contemptuously objected, observing, "that Sir HENRY, if he chose, might make a mountebank of himself, by wearing his robes, and he did not care if Sir HENRY came to the College with a feather in his ---."

Since the day on which the Council of the College of Surgeons admitted the Charing Cross Hospital, with its sixty beds, into the list of "recognised" hospitals, it has been a gradually increasing object of desire connect the College with that hospital, the nish us with a copy of it?

the College having understand, the argency of the case has led to the commencement of negotiations with the medical officers of the hospital, but as yet the parties in the College have not Means. Perricare and Howard (who carry their heads exceedingly high-on the occasion), that Mr. Mayo and Dr. F. Haw-KINS shall resign their professorships in far name of the President and Fellows, and that your of Mr. PETTIGREW and Dr. SHEARMAN, College. The insult had not the effect of and HAWKINS will retire to the Middleser driving away all the licentiates, though it School, where, however, matters are in alwas sufficient to prevent the most respections as had a condition as they are in the able amongst them from submitting to Strand. Yet, after their late and not yet the humiliation. This, however, was not finished correspondence it is difficult to ima-enough by way of contrast, and the in-gine how Messrs. Mayo and Hawkins can genious President therefore proposed that, act congenially together again in any school.

CORRESPONDENTS.

INSTRAD of publishing any one of several letters which we have received relating to the following subject, we beg to say that a general impression seems to be entertained in the Medico-Chirargical Society, that it is contrary to good taste, good judgment, and the spirit of his office, for the president of the meeting, whoever, for the time being, may occupy the chair, to address the assembly on the subjects under discussion, so many as twelve times in one evening.

We have mislaid the letter on Creosote in with the managers of the King's College, to the case of vomiting. Can the writer fur-

METEOROLOGICAL REPORT.

(Extract from a Meteorological Journal kept at High Wycombe.)

Days.	Thermometer.		Barometer.		Rain.	Ward.	Weather.
	Highest.	Lowest.	Highest.	Lonest.	Inc. Dels.	,	
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Dec. 29th, 1835.

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Vol. 1.]

LONDON, SATURDAY, JANUARY 9, 1836.

T1835-36.

LECTURES

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE CRIVER-SITY OF PARIS.

By M. ANDRAL,

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine of Paris.

LECTURE VII. CEREBRAL HEMORRHAGE.

(Concluded.)

GENTLEMEN, we have now studied rapidly the causes of cerebral hemorrhage, and have pointed out the several circumstances which favour the development of this discase, but we have not entered into the mi-nute history of each cause, a general view of the most important questions connected with diseases of the nervous system being the chief object of this course. Having thus deration of

The Symptoms which indicate the actual Rf-

cases they are merely the prodrome of the with a few anomalous phenomena that we hemorrhage which is subsequently to take shall have to consider apart; but before enplace. The patient is affected with head-acks, or giddiness, with numbness of the ask, can we have cerebral hemorrhage limbs, a disagreeable creeping sensation, without the manifestation of any symptoms? 26. In a word, with all the signs we have

12.5

by a violent effusion into the hemispheres. It is to this form that the term "apoplexy more peculiarly belongs. A great number of the symptoms of cerebral hemorrhage depend upon the actual effusion of blood; they are the result of the presence of a foreign body in the brain, compressing, or in a certain number of cases actually lacerating, the substance of that organ. Again, other phenomena that we observe, depend not upon the effusion which has taken place, but upon other morbid changes that coincide with it, such as ramollissement &c.; these form a third series. Finally, other symptoms manifest themselves, at a greater or less period after the occurrence of the hemorrhage. Thus we have occasion to see apoplexy complicated by the super-vention of ramollissement, of inflammation, of congestion, forming at several points of the brain, a long time after the first attack, and these circumstances, by troubling the march of the symptoms, by giving rise to various phenomena not connected with effusion, often render the diagnosis and treatment of cerebral hemorrhage a matter of some difficulty. Hence you see how several of the symptoms that accompany effusion of blood in the brain, do not depend on the hemorrhage alone, and can conceive considered the causes, we come to a consi- the necessity of distinguishing these secondary phenomena from such as are intimately connected with the original disease.

The Symptoms which indicate the actual Rf-fusion of Blood into the substance of the Brein.

These symptoms are such as to permit the in certain troubles in nutrition, relation, their division into several series. In some dy pointed out as indicating a greater currence of effusion of blood into the cereegree of cersoral congestion, and bral substance, is betrayed by symptoms comprised under the that leave no doubt as to the nature of the sion of "molimen henorsionally, the prementory
the to may be altogether possibility of cerebral henorrhage taking
these takes place with place without any of the great functions
the place of its approach, and
being disturbed. In proof of this 1 will county struck down quote the case published by M. La Nouman

in the Journal Heldomadaire, vol. 1, page 435. You will there find the case of a female. thirty years of age, who laboured under what is called the hemorrhagic diathesis, in a most remarkable manner; she had frequent discharges of blood from the mucous membrane of the intestinal canal; from the fauces and mouth; from the uterus; finally, tumours, evidently depending upon effused blood, formed under various points of the cutaneous integument, and the patient sunk under the exhaustion produced by this frequent loss of blood. After death a certain number of apoplectic coagula were found disseminated throughout the brain, yet this patient did not exhibit a single symptom connected with effusion of blood into the nervous centres. I do not know another example of the same kind in the records of medicine; hence, giving it the attention and regard it as an exceptional fact, as a case so extremely rare that it cannot justify the deduction of any principle.

We have distinguished the symptoms of cerebral hemorrhage into three classes, viz those connected with relation, with nutrition, and finally with generation; we shall sorbed, and the pressure thus removed. now take up the disorders manifesting themselves in the life of relation, and these comprehend derangements of the intellectual loss of muscular action coincides with the

Lesions of Motility. (Paralysis.)

The most characteristic symptom of cerebral hemorrhage is, beyond all doubt, paralygis: a sudden and permanent lesion of motility indicates effusion of blood into the cerebral hemispheres more surely than any other symptom we know of. Remark, however, that it must present the two characters we have just mentioned; the paralysis other. must be sudden; it must persist for a greater or less period of time. One alone of this is an important part of the subject. In the two circumstances is not sufficient to some cases we observe only a very slight indicate the existence of apoplexy; the loss engourdissement, or weakness of the affected of motion must have taken place in an ab- member. If it be the hand, the patient is rupt manner. When once established it unable to press an object with his accusmust continue for a length of time; with tomed force, although he can take hold of it these two characters we are justified in pro- with precision. The power of motion then nouncing on the occurrence of hemorrhage remains; we have simply a diminution of of the nervous centres; without these our the muscular force. In other cases the diagnosis should be given with some caution movement is modified in a still greater deand doubt. This diminution of muscular contractility exists, with various degrees of marked. Finally, in some cases motion is intensity, in nearly every case of cerebral completely destroyed, and the limbs are in a hemorrhage, we say nearly every case, for state of perfect paralysis. In a word, the the exceptions, though excessively rare, do sometimes occur; in a few cases no true paralysis has been observed, as for example in the one we have already cited. Another similar case has been published by Dr. tion of contractility SECRETIA, in his thesis on apoplexy, sus-may have no other trained in the year 1827. The subject of this do not present any observation died without having presented motility up to the the least trace of paralysis, and on examintack. In other cases, ing the body after death, a coagulum as large of actual paralysis \$

capying the pos-s at a hen a c misphere, above terior part of the think the ventriele, and extending thence into the posterior portion of the corpus striatum.

These are two very remarkable cases, I believe they are the only two which exist in the records of medicine; note them, therefore, with attention, and reflect on the curi-ous, the comprehensible circumstances of effusion to a considerable extent having taken place into the substance of the brain, without giving rise to the slightest derangement of the faculty of locomotion.

The paralysis once established, does it continue throughout the course of the disease with an equal degree of intensity? No; in some cases, even when effusion of blood to a great extent has taken place, the loss of motion, at first grave, may go off, and then return again with its former characweight it merits, we must at the same time ters. It is difficult to explain these intermissions in the principal symptoms of apoplexy. One would think these are times at which the blood acts with less force upon the brain than at others. However, in most cases the paralysis persists, and only goes off in proportion as the effused blood is ab-

We have next to inquire at what period the paralysis makes its appearance. The faculties of sensibility and of motility. 1st for instant of hemorrhage; it may suddenly acquire a high degree of intensity, and should a fresh hemorrhage take place, which is not unusual, it may augment. In general, however, it remains equable for some time, and then gradually diminishes; or it may increase until the patient dies, or, as we have already noticed, take on an intermittent character, and present itself with much greater intensity at one period than at an-

We now come to the degree of paralysis : gree; the weakness of the limbs is more lesion of motility may vary term capped ment, to a slight weakness of the ar-leg, and thence to be applete impossible muscular contraction. Be

and the first of the second

- Tomas AND HEMIPLEGIA.

*patient exhibits a congestion: the matter, without semastin and without motion; sometimes modified, or we remark other troubles of motified, or we remark other troubles of motified, and the case is then constantly tility, such as convulsions contraction of the fatal; or, after having characterized the onlimb, &c; however, these latter phenomena announce the coincidence of another lesion, and we shall have to speak of them more fully in a subsequent lecture. The para-lysis, then, commences with the effection of blood into the cerebral substance, and disappears with the removal of it; whenever another order of symptoms sets in, we may presume that some other lesion of the brain, such as congestion, softening, inflammation, &c., have given rise to it.

Paralysis, the consequence of cerebral hemorrhage, variable, as we have just seen, in intensity, presents numerous varieties, according to the scat of the effusion. We shall now examine this point; we shall take up, successively, hemorrhage of the cerebral hemispheres, of the mesocephale (pons varolli, of the cerebellum, and, finally, of the spinal marrow, endeavouring, as we go along, to point out how far pathological anatomy can throw light on the great varieties which present themselves; and, first, for

Hemorrhage into the Substance of the Cerebral Hemispheres. - How does this form manifest itself? Hemorrhage of this portion of the cerebro-spinal axis may give rise to either general or partial paralysis; it is general where both sides of the body, either in totality, or in some of their several parts, are deprived of movement. Let us now see under what circumstances we may observe general paralysis. The loss of motion takes place in one of the three following cases: -1st. When the hemorrhage is double-i. e. when it occupies both hemispheres of the brain at the same time; 2nd. We may observe general paralysis, with hemorrhage into only one hemisphere; but the effusion has been very extensive; the blood has lacerated the parietes of the lateral ventricle, and thence made its way into the other cerebral cavities, either through their natural communications, or by laceration of the septum lucidum, and other parts; thirdly, and finally. When the hemorrhage, as in the former case, is confined to one hemisphere, and does not communicate with the ventricles: being, however, sufficiently extensive to destroy a great part of the cerebral mass, and then producing double parathe two cases already enume-

then are three causes of general wiz. double effusion of blood; but passage of the blood

se allied to so many masses of inert matter, without fatal; or, after having characterized the on-set of the disease, it may disappear in a certain time, and become converted into hemiplegia. Of this latter circumstance we have witnessed a few examples, and it often arrives in the third case we have distinguished above, where general paralysis exists for the first twenty-four hours, and then terminates in hemiplegia. However, we would here repeat a remark which has been already made, that general paralysis belongs much more frequently to cerebral congestion than it does to hemorrhage, and that in cases where hemiplegia exists, it is 200 to 1 that the loss of motion depends upon an effusion of blood into the nervous pulp.

When the paralysis occupies only one side of the body, we call it

Hemiplegia,

an accident, we again repeat, which, when it arrives suddenly, is the best sign of hemorrhage into the cerebral hemispheres. It then persists a certain time, and is gradually dissipated with the removal of its exciting cause. When it does take place, we generally see both limbs on the same side of the hody affected at the same time. However, hemorrhage of the cerebral hemispheres may produce paralysis of only a single limb; sometimes the superior, sometimes the inferior extremity being the one affected. When both limbs together are paralyzed, we generally see the side of the face attacked. at the same time, with loss of motion. The muscles of the cheek, lips, &c., cease to act, and the antagonism necessary for the regularity of the features being lost, whenever the patient talks or laughs the mouth becomes deviated, and the face more or less partakes of the distortion. Gentlemen, it is a law, almost universal in its operation, that hemiplegia (and also paralysis of the face) is seen occupying the side of the body opposite the hemisphere into which effusion has taken place. Authors have endeavoured to explain this remarkable phenomenon, which they attribute to the intercrossing of the pyramids in the medulla oblongata. The pyramidal bodies are, you know, continued through the substance of the mesocephale to the cerebral hemispheres, and hence the fibres of the right hemisphere pass to the left side of the spinal marrow, and vice versa. This appeared a very natural ex-planation, and was universally adopted by nearly all those who have written on the pathology of the brain. But permit me to lay before you one or two observations, by which, I think, its value is diminished if not here to the other through which, I think, its value is diminished if not altogether destroyed. In several cases where the extensive destroy when this general range a loss of motion in the muckes of the face opposite the seat of effusion in the brain. Now the muscles of the face are optic thalaction brain. Now the muscles of the face are optic thaleast and the state side. This obsupplied by nerves given off above the inter-servation is varied and attackness. We hence we cannot have recovered the ana-tomical fact for the explanation of a phe-nomenon that occurs at least as regularly, if not so frequently, as the paralysis of the we therefore think we must accept the law already stated, without explaining it in the manner generally adopted.

per to ourselves, being all of them

Cases in which the Low of Motion occupied the same Side of the Body as the Hemor-

tail, requesting your attention to the sub- tomy, and capable of appreciating correctly

The first case of the kind is ancient. You; with the one cited from Formastics. will find it mentioned in the Senulchretum of

chap. 12. Here the case was that of a child examined with care, but no lesion of any two years old, affected with hemiplegia of kind could be discovered. Again, in his the right side of the body. After death, a thirteenth letter, he describes the case of portion of the right cerebral hemisphere was another female, twenty-four years of age, found in a state of ramollissement. The in- cut off by an attack of applying. Half the jury here does not in the least alter the state | body on the right side was paralyzed, yet of the question. Softening or effusion, no the only morbid appearance in the brain matter which, it is not the nature of the consisted in a clot of blood occupying the lesion we seek, but its connection with paper posterior part of the corpus striatum on the ralysis on one or the other side of the body. right side. And this great observer, who Even at the period when Fornzerus wrote, was perfectly acquainted with the law of op-the attention of pathologists had been turned posite paralysis, not content with his first towards the investigation of the point we examination, returned to the body again and speak of. He expressly mentions that he again; and, after a careful inspection of all looked for a lesion on the left side of the the left portion of the brain, in which hearbrain, but found none.

dealy with apoplectic symptoms, and hemi- described; while the igh on the right side of the body. After presses himself, show, each an effusion of blood was found in both found in the left i ventricles, and an crosion occupying the cause no lesion action

section of the pyramids just alluded to, and do not know the natural or extent of the crosion alluded to. You see at once that the case does not belong to Mongagni bimself, but is reported on hearsay. We do not, therefore, consider it of much value, and members on the side opposite the effusion; would rank it in importance with the first we have elted, from Bonnerus.

Our fourth case is an important one in more than one respect; it is reported by an We now come to other facts that are, as it excellent anatomist, M. BRUNNER ! the same were, tormenting to us, so much do they dif- who has left his name to the follicles of the fer from those we have left, and, indeed, from intestinal canal), in the " Acta Curiosa," deall that are considered as forming the type of cury 3rd. The subject of this case was a cases of cerebral hemorrhage. We have, as female, forty-seven years of age. During a you remember, laid down a general rule that period of four years she had been affected paralysis is seated on the side opposite the with paralysis of the right side of the body. effusion. Facts of this kind present them. BRUNNER found a cyst in the right hemiselves to us by hundreds; but we possess, in sphere of the brain, which showed that an the records of our science, twelve published effusion of blood had taken place into that instances, and we know one which is pro- part at a remote period; besides this he discovered a recent clot, the effect of the hemorrhage which had compromised the patient's life. The fact we now mention is an important one, because it belongs to an anatomist of established reputation, one ac-Let us now examine these facts in some de- customed to researches of pathological anaject as one of peculiar interest, although the the various morbid changes which present history into which we are compelled to enthemselves in the dead body. We therefer may appear a little tedious. We shall fore place it above the cases mentioned by enumerate them in the order of their date.

BONNETUS and MORGAGES, and on a level

Our fifth and six cases belong to the fas-BONNETUS: however, we shall not insist ciculus of Pathological Inalamy, of the justly much on it, because it is not given with suf- celebrated Mondae St. In his fifty seventh ficient details to render the case an impor- letter he speaks of an old woman who died tant one; let us therefore pass on to the with paralysis of the right side of the body. In examining the brain, he found a portion The second case belongs to Forgreeus, of the right homosphere in a state of ramoland is found in his observations, liv. 10, lissement. The left side of the brain was ported to find a lesion, exclaims, on d or the country of another, too cannot reject. The habits of Monagarians and a reduced with the country of another, too cannot reject. The habits of Monagarians are man seventy years of age; attacked sud-beyond all doubt the fidelity.

found in the left hemisphere.

softening of the cerebral substance, were tions of disease of the nervous system, and found in the posterior portion of the right note down the appearances after death, to hemisphere.

very extensive ramollissement. This case, your disorders. of the nervous pulp had taken place.

related. Here, then, are two cases, side as the effusion.

We now arrive a transfer a more recent haps this fact of anatomy may give an exchate; one of their transfer published by planation of the phenomenon now under M. Ball, in the River Medicale. The particular consideration. If we believe the assertalysis occupied the left side of the body, and on inspecting the brain, ramollimentaent was cerebral lobes seem to receive the fibres found in the left hemisphere. found in the loft hemisphere.

You will find our eighth case in the work of M. Rosran on Remollisement of Me. It is of the utmost importance, that the de-Brein, p. 29. It refers to a woman, eighty-iscription of the pathological lesions of the four years of ago, who died with an hemi-plegia of the right side of the body. Traces and detail. We would, therefore, of an aucient hemorrhage, together with engage you, whenever you make observed. endeavour to localize the lesion as closely The next case to which we would allude as possible; to measure its actual distance was observed by M. Leurer, and published from certain known points, describe every by him in the Journal de Progress des fibre that has been injured, and not neglect Sciences Medicales. The subject of this ob- a multitude of details, which, in any other servation was affected with paralysis and part of the body, might perhaps appear tecontraction of the right arm. However, diens. It is only in this manner that our after death the lesion was found occupy- knowledge of the functions of a complex ing both hemispheres. On the left side organ-like the brain can in the cud be exing noth nemispheres.

On the left side of the servation which has so long retarded the brain was the seat, on the contrary, of a progress of the science in the study of ner-

as you see, cannot have very great weight. I mentioned just now, that in addition to from the circumstance of the lesion existing the twelve cases contained in authors, simultaneously at both sides of the brain, knew of a thirteenth which has not yet been but remark that on the side opposite the published. This case was communicated to paralysis it was very insignificant, while on me about two months ago by Mr. Carvettthe same side a most extensive destruction at an. He saw an individual affected with the nervous pulp had taken place. paralysis, and found, after death, ramol-The tenth case is published in the volume issement or hemorrhage on the same side of the Rirus Medicale for the year 1826. An of the body as the loss of motion. I do not old cyst was found in the left side of the now exactly remember which lesion it was, brain, and the hemiplegia also occupied the but you can conceive that the fact remains left silt of the body. However, we must the same under either circumstance. What remark that it is an imperfect case. Thus we want to establish is the occurrence of it appears the paralysis was of recent date, paralysis on the same side as the injury of though the lesion was twidently ancient, the brain. I should add, that I have never Now, as the author does not tell us whether i witnessed a case of the kind myself. In all Now, as the autor uses not terms any paralytic those which I have had occasion to examine symptoms at a more remote period, we cannot strictly establish a connection between the symptoms and morbid appearances.

The autor uses not term is a connection of the part of the re symptoms and motion appearances.

The two last cases, completing the twelve, said, it follows, as a necessary and inevitable were published by M. BLANDIN in his edi- consequence, that from certain anatomical tion of the Anatomic Generale of Bichart, conditions which have hitherto escaped dis-which came out, I think, in the year 1831, covery, the paralysis may sometimes occupy He saw at Bicetre two old patients who died the same side of the body as the lesion. The in a paralytic state. After death the lesion facts we have cited, and many of them are was found occupying the same side of the irrefragable, prove this beyond any doubt; was sound occupying the same side of the irrutragame, prove this beyond any doubt; body as the paralysis. No morbid appears it is a circumstance worthy of every state-ance could be discovered in the other hemition, and you cannot apply yourselves to aphere. Now no person can doubt the the elucidation of a more interesting point capability of M. Blandin, as an anatomist, of the history of cerebral disease, than to the occurrence of hemiplegia at the same

authentic; we should have no- [As the commencement of the next lecture concludes the foregoing subject (occupying

three parsgraphs) we here subjoin it. En.L.]

I have laid before you an analysis of thirteen cases of cerebral hemostrhage, in which, while the effusion of blood occupied one side of the brain, the limbs were affected

in the annals of the science; to supply the omission, which I only disce-

vered since our last meeting.
Two cases of hemiplegia, effecting the rife. ame side of the budy as the lesion, have at considerable length between Measure been published in the Bulletin Clinique, by SERREN, PEREL, GRANDCHARY, ROSTAN, M. DECHAMBER, of Salpetrière. They are and Houseland; we may therefore ask ouraccompanied by all the details necessary to scives, give them authenticity, and merit our attention on that account, as well as for the interesting points which they illustrate. The letion in the two cases alluded to was ramollimement; but, as we have more than once said, softening or hemorrhage, tumour or encrsted abscess, no matter; they bear all deavour to answer. Within the last few the same relation of cause to the effects we years, several facts have been published, with investigate. Our object in citing authorities the design of showing that the motion of is to show that paralysis does not universally the abdominal member is regulated by the take place on the side opposite the lesion, corpora striata and the nervous mass in front in adding these two cases to the thirteen corum, and the nervous substance behind already mentioned, we have a body of fifteen the thalami: in other words, that notion of facts, some of which, especially the latter, the leg depends upon the anterior part of are precious, because they are recent. In the hemispheres, while the posterior portion age we live in.

The same number of the Bulletin Clinique also contains a note of M. Founter on a case in which sudden death took place from effusion into the brain: the paralysis existed on the same side as the hemorrhage: this makes up the sixteenth case; however, the latter has not yet been published; the Bulletin Clinique alludes to it simply as having been shown to the Anatomical Society.

Paralysis, when it attacks the side of the body opposite to the hemorrhage, most com-monly affects both the superior and the inferior extremity at the same time : however, one is generally more affected than the other. We have remarked that the loss of movement is very frequently more complete in the upper extremity than in the lower. is a common thing to see the arm perfectly immoveable, while the leg and thigh are partially under the patient's control, and when the two limbs are equally struck in the commencement, the thoracic extremity generally recovers its motion some time before the abdominal one. In some cases of perethe homorrhage, the hemiplegia is con-fined to a single limb. The patient, for ex-ample, is unable to move his arm, while the where the inferior of

This point has been discussed lemin !

This is a question which we shall now enand for this purpose ramollissement will an- of them; while motion of the thoracic limb swer just as well as effusion of blood. Thus, emanates from the thalami nervorum optimedicine we require recent facts: the sci-governs the movements of the upper extreence should, as it were, be remade from time mity. We have submitted this opinion to the to time; for it is a principle in human na-test of facts. Here is the result we have ture to reject or look with coolness upon the obtained. We have collected 75 cases, in We have collected 75 cases, in ture to reject or look with coolness upon the obtained. We have collected 75 cases, in testimony of ancient facts, and run with which the lesion was circumverified in one avidity after more recent discoveries, al. part of the brain or other, and after having though, perhaps, they may be nothing but a analyzed these 75 cases, the result we came revival of points known many hundred years to was negative. In 40 of the 75 cases alludage, but fallen into disuse and obscurity, ed to, the patient was hemisleght: the arm merely because they do not belong to the and log were equally paralyzed. Now of the 40, we found the lesion situate in the corpora striuta, or anterior lube, in 21 cases: while in the 19 remaining, the hemorrhage, or softening, existed in the thalami optici, or posterior lobes. Again, of the 75 cases, we found 23 where the paralysis was limited to the upper limb alone. Now if the theory were correct, we should discover the lexions in the posterior portion of the hemispheres. What do facts show us? Of the twenty-three cases, we found two in which the lesion existed in the middle lobe of the bemisphere; eleven, with lesion of the corpora striata, or anterior lube; this remark is quite opposed to the ideas of the authors we have alluded to;) and finally, there were ten cases in which the lesion was seated in the optic thalami, or the nerve

pulp behind this part.
Thus you see how the same idlesion of motility coincided with a lesi various parts of the brain, and of the arm, at least for the The whether the effusion

i twelve ce and in two only of the lesion in the posterior Here, indeed, the nur favour of the theory which attributes me tion of the lower limb to the anterior less but one case is sufficient to destroy the va-lue of the rule, and we have more; we find, as you see, two cases of twelve where paralysis of the leg co-existed, not with a lesion of the corpora striata, but of the optic thalami and parts posterior to it.

The only general consequence we are entitled to draw from the facts which we have just passed in review, is, that dissimilar parts of the brain direct the movement of the different limbs, but that in the actual state of the science we cannot say what particular point of the hemisphere commands the motion of the upper extremity, and what point governs the lower limb. This is merely a negative conclusion, but we should not neglect it on that account. In the study of medicine, negative facts have their imporus wasting our time in the investigation of circumstances whose value has been already appreciated, point out various sources of error that we should avoid, and thus render our march in pursuit of knowledge more rapid, more secure, and more certain.

Is the faculty of motion deranged, when the lesion is confined to the periphery of the

When Effusion takes place merely between or upon the circumvalutions?

Certainly, gentlemen, we have cases where the lesion was strictly limited to the surface of the hemisphere, yet paralysis occurred with the same phenomena as if the blood had been effused into the centre of the organ. thesis sustained by Dr. Fasar in the year the whole of the lecture, a great part of 1832; it is I think No. 133 of the series for it being devoted to an address to students that year. Here the lesion existed at the lateral, posterior, and external parts of the left bemisphere; the author describes a congulum as large as a sparrow's egg, situate between the convolutions at this part, and the patient died paralytic. This case is not unique; we can find other examples. Similar cases are contained in the excellent work of M. LALLENAND on the pathology of the cain and its dependencies; in his first cain and its dependencies; in his first ster, page 63, you will find one; a second test, page 151; was completely confined to the man of the completely confined to the completely confined to the confined was completely confined to the confined with the hourselves, and the that hemorrhage confined that when the confined remarks regions.

the temperature minutes what may be called a direction from a distribution of the gray substance, we often do not abserve any paralysis; but, on the other shind, we have opposite facts to prove that when the convolutions are isfured, paralysis supervenes, although the white substance is little or not at all compromised in the lesion.

At the commencement of the present lecture, we said that loss of motion also ex-isted with effusion into the pons varolii, the cerebellum, or the spinal marrow. Let us next take up each of these parts in the order enumerated, now, however, only mentioning the mesocephale. We possess a certain number of cases in which we find

The Lexion confined to the Pone Verolit.

and we may draw from these this general principle, that the four limbs are rapidly struck with paralysis. However, in the science of medicine, we unfortunately find, at almost every step, certain exceptional cases which we are compelled to take into Thus, apoplexy of the mesoceaccount. tance as well as positive ones; they prevent phale is sometimes accompanied by bemiplegia, not by general paralysis : but in cases of this kind it has been remarked that the lesion generally is situate more at one side of the pons than at the other.

COOMBE LYING-IN HOSPITAL

DUBLIN OPHTHALMIC INFIRMARY.

THE Introductory Lecture, delivered, in the above institution, at the commencement of the present session, by Mr. ROSERT F. POWER, L.R.C.S.I., and one of the Masters of the Hospital, has been submitted to our examination, in manuscript. Want of space You will find an example of this in the in our columns will not allow us to insert on the importance of a scientific knowledge of his art on the part of the accoucheur; but we may select the following passages for publication, with a certainty of their posseesing interest for every class of medical readers. Before making the extracts, we may premise that on the death of Mr. O'Baza, the former " Master" of the hospital, the governors appointed two medical officers to fulfil the duties of the institution, which had previously devolved on one. The new masters were Mr. Powsa and Mr. HUGH CARMICHARI, the former gentleman undertaking the labours of the midwifery department, and the latter those of the Ophthalmic Infirmary. In the commencement of his lecture, Mr. Powns comments, of southilty, as when it in terms of Indignation. "on the attempt," as he describes it, " which has lately been did remark that when made" (by a magnate in the London Collegs of Physicians, before the Parliamentary where the stick.
Medical Committee), "to revive the anti-cased of air.
quated opinion that the practice of mid- "But suppting

From the statements of Mr. Power, wa From the statements of her. Fewers, was the property which induces the mother to existed for rather more than fifty years, and cliffs to her little home and family, until was established for the admission of parturient women, through the exertions of the late Mr. RICHARD GREGORY. It contains fifty beds, in spacious and airy wards, which, from its being situated in a densely populated part of Dublin, are continually occuunder which the hospital was erected, which place of their labours. That such is the case follows the subjoined statistical statement of cases, will be read with feelings of pain-ing facts. Before this hospital was estaful interest :-

of the present mouth of November (1835, placenta, occurred. The remainder of these although coming under the head of irregumales were delivered, and attended through stracts show that the external department such misery was the result of it comprises the greater number of cases, gradation on the part of which, upon first consideration, might apjudifference in quarters per pear extraordinary, where so much poverty shelr welfare, we are not prevails, for comforts like those which are ingit even to arise from to, be met with in a well-regulated hospital let us trace the effect seem thus to have been neglected, in cases as the sufferers may like

eed of aid.
"But assopting as is a comfortable asylum wifery was a disreputable branch of the in these instances, to poverty in its most medical art, because it occarionally involves adjust form, for algest indeed it is in the the necessity for manual operations." theless it is not sufficient to overcome that the last moment at which she conceived she can remain with them. The consequence is, that, in a vast number of instances, females who really intend to become inmates here during the period of their confinement, are overtaken in their illness, and thus have The account of the circumstances their own homes unexpectedly rendered the will at once appear evident from the followblished in its present form, that noble insti-"The registry of cases kept in the house tution on the north side of the city, the for the six months preceding the first day Rotunda Lying-in Hospital was the only one in Dublin. The distance, however, between shows that, within that period, of 713 females it and this spot is so great, that although who have been delivered within its walls, the length of time required in the distress-626 labours proceeded according to the ing journey was, from repeated occurrences, usual routine of nature, and eighty-seven made strikingly evident to females who presented departures from that course. Of resided in this neighbourhood, still the these latter, nine were cases of breech pre- feeling to which I have just alluded could sentation, fourteen were abortious, two el- not be abated; and as extern assistance to bow presentations, five twins, four attended females in the parturient state was not with hemorrhages, seven instrumental, of recognised by that hospital, those who wishwhich latter, in two, the crotchet was used ed to avail themselves of its aid, could only to break up the child in order to extract it; obtain it by becoming immates therein. The in two raptured uterus, and in five retained consequence was, that, in many instances, placenta, occurred. The remainder of these females, who began to proceed thither from cases did not present any particular event, the liberties, were overtaken in their labour on their way to the institution, and the lar labours. There is also attached to the wretched halls and alleys of this impovehospital what is termed an externe depart- rished district became the places of their ment, affording assistance to females who, confinement, perhaps in the dead of night, from any particular circumstance, cannot and at the most inclement seasons of the avail themselves of the comforts of the year, for the bitter destitution of the inhahouse, and are confined in their own homes. bitants precluded the possibility of a con-The registry of the latter class of cases veyance being obtained thither, even on such shows, that, within the same period, 811 for occasions as these. The scenes that sometimes then presented themselves were of a their confinements, without the doors of the most distressing character. A wretched bospital. Of this number 702 were natural tellow-creature, surrounded, at this event, by labours, and 100 irregular. Of the latter, thir- her small and equally wretched family (who teen were breech presentations, twenty-nine flew to her at the moment), then giving were abortions, eight twin cases, one triplet birth to an infant under these humiliating (three children at a birth), eight cases of circumstances, at once struck the heart with hemorrhage, two inarrumental, nine retained placenta, five footlings, two funds regret filled the mind for the misery from presentations, one arm presentation, two which such scenes could proceed; while the placents presentations, and three convul-crics of the new-born babe fell on the sax, sions, making in all an aggregate of 1524 its wallings sounding like means at the hecases, of which 1328 were natural, and 196 reditary misfortunes of its race, of which is were variations therefrom. These two abnow was come to bear its part.

tends so much in

bf legradation, and the state of the moment, that blight of our coronted country, party; this will be admitted by all who have witnessed such scenes, that they were not more the scource of those who were exposed to them, than they were diagraceful to those whose duty it was to remedy the crill,

those whose duty it was to remedy the crit.
"Since, however, the establishment, which we are assembled has been in operation, such truly pitiable occurrences have sltogether ceased, and with them those unfortunate results, then so prevalent, as the death of the infant, and recovery on the part of the mother with consequences so unhappy as to incapacitate her from the future fulfilment of her maternal and domestic duties. Indeed to such an extent did events like these prevail, that a respectable practitioner, who resided for a long time in this part of Dublin, at his death bequeathed an annual legacy for the establishment of a Lying-in Hospital in his district, after having spent the best part of his life in representing the necessity of such an institution to Government, but to which a deaf car was turned. Through the kindness of Doctor Bell, one of our most auxious supporters, and than whom no one is more conversant with the former miseries of pregnant females in the liberties, that legacy is now devoted to the support of this house, and the delays which used to lead to the events I have described, is remedied, a skilful pupil being now sent from this hospital to take charge of the female, and conduct her through her perilous situation."

CASE OF

OBSTRUCTION OF THE BOWELS,

WITH SUCCESSIVE OPERATION FOR THE

FORMATION OF A NEW ANUS.

To the Editor of THE LANCET.

Sin,—I publish the following most interesting case at the request of several medical friends, detailing the state of original imperforation, the means used for its remedy, and the time when the obstruction commenced, its progress, and the effects produced on the constitution of the patient until relieved by the operation which has led to the publication of the present article. The relation of the patient's subsequent condition, and the treatment, I have given its a condensed form.

I have added a few practical reflections, the stand to render it more acceptable to the members of the profession, and whom it is my more especial spaper should be useful. I

Charle Lempsay, Surg.

Case.—8. P., a boy, was born of healthy parents in April 1822, with imperforation of the anus. The surgest whose attendance was required; has several difficulties to contend with in making an opening into the roctam, as there was no protrusion of the first several attempts failed, but at length an opening was made at the lower end of the gut. Several attempts failed, but at length an opening was made at the lower end of the os sacrum, at the root, and towards the left side, of the os coccygis. The opening thus formed was kept patent by sponge tents and other means, but it was small, and liable to obstruction from slight causes.

On the recommendation of a friend, the child was first brought to me in December 1829, he being then eight months old. At about the same period he was examined by Dr. Weir, then senior surgeon to the Royal Infirmary, who recommended the use of bougies and enemata, which were accordingly had recourse to daily; the former were gradually increased in size, for the purpose of procuring a regular evacuation of feces and enlargement of the passage, which, with a few powders of Submuriatis Hydrars. ct Pule. Rhei, had the desired effect of improving the general health. Notwithstanding, however, the feces were passed involuntarily.

In course of time the child became a stout healthy boy; but when running about with his companions, having no power of retaining his fecce, they were constantly ooxing through the artificial anus, causing always a disagreeable smell about his person, although his mother, who was very cleanly in her habits, paid every attention to his comfort, by washing him frequently, for the couvenience of which the under part of his dress consisted of petticoats only.

The prospect of their son arriving at manhood under so loathsome an infirmity, was distressing and humbling to his parents, whose fears in this respect were, in the autumn of 1834, changed to feelings of a more painful description. At that time his health began to decline; his evacuations per anum were scanty, and passed with difficulty, even although rendered almost fluid by medicine. His belly grew large, while the rest of his body became emaciated; the functions of digestion became irregular and impaired; his appetite fell off; and, ultimately, hertic fover was superadded, which reduced his strength to such a degree as to confine him constantly to bed.

Such was his condition towards the end of January 1835, when I was desired by his fathor to visit him. He had now arrived at the age of five years and three quarters, and during the last four months his health had been obviously and rapidly declining. Language would scarcely describe the miserable appearance he presented. I no longer heheld the little plump radely boy which he for-held the little plump radely boy which he for-

painful contrast with his exceedingly one- the last hone of the secrem, rendered hope-

painful contrast with his exceedingly one-cisted cheer and extremities. Bestless any attempt at enlarging it, which was, Bestless the hectic symptoms, his mother: indees, he less desirable, as it would have mentioned that for several weeks previously left the justient to pass the feces involuntarily he had obtained no evacuation per annua as before. except what was produced by the daily use "all probe could be passed about two of the hougic and the purgative enerosts, including the position the boy was in at the state of the character means in when a little is the time, the noint of it being close moon acription. These symptoms led me to suppose that a flap, or false membrane, had under these circumstances, it occurred formed near the extremity of the rectum; to me that the most proper way of render-which, acting as a valve, prevented the exit ing him relief, would be by making a new pushed back by the introduction of the glys- tum, by that method avoiding the os coccygis ter-pipe. To ascertain this, I proposed to altogether. examine the parts with the finger, which I The objections to this were principally consider the best probe on such occasions. His mother's feelings, however, were overcome so much by the terror of cutting, that she even objected to allow the examination, danger of injuring the hisb of the urethra. especially as she considered his case to be therefore, continued, and by constant per- sacrum, I withdrew it. severance, they succeeded, at times, in On introducing my finger into the wound, bringing away a little feces, which had the and taking the probe in the other hand, I

ever, I was requested by his father again to substituting in its place a director, which I wisit him, when he promised that nothing desired an assistant to hold, so as to press should stand in the way of doing what might its point as much as possible outwards, I be considered recessary, the boy having be-come much worse for a day or two provious, with a scalpel, when, to my great satisfaction, in consequence of the usual means failing to the instrument was brought out soiled with have the desired effect. Accordingly, on the ferce. I now pushed my fore-floger right day following, I visited him, at their resi- into the rectum, when a large quantity of dence, about two and a balf miles from Chas- feculent matter escaped. A mild purgative

Setting a table opposite the window, I had the little patient laid upon it, with his abdomen downwards, which was prevented from pressing on the table, by putting one pillow under his breast, and another under the head of his thighs. On attempting to introduce my little-finger into the artificial anns, I was surprised to find it too small re its admission, even although considerable ares use used, it being not larger than to allow a goose-quill to pass with sass. The integraments around it, which were very hard, appeared to be nearly destitute of either auscular or cellular substance, as if the parts were cicatrined after having been in a state of plocestion, which I was inforward had indeed been the ease. The pre- he personn.

heary imperfect, being merly was, and his extremely large abdo- sept established in the or coccepts and men, which were hard as board, formed a limited or conflict in the or coccepts and

the time the physter-pipe was in, when a little the time), the point of it being close upon The time the gramer-prise were m, when a little the time; the point on it being there is being the focus and matter excaped by the side of it; the cervits of the bladder, and about fifteen which generally stopped as soon as it was lines inward from the perineum. No flap withdrawn. Such, she said, had uniformly or false membrane could be detected by the seen the case during the time specified, alprobe, nor could any assistance be obtained though the dejections were of a fluid de-

of foces, except during the time of its being mus, nixteen or eighteen lines nearer the scru-

hopeless, connected, perhaps, with the dis- taining the probe in the old anus, I took a agreeable reflection, that although his eva- straight-pointed bistoury, and holding the custions were reinstated as before, yet still back of it towards the hulb, thrust it inthe boy's prospects for the future were any wards, about an inch. at that point where thing but pleasant. Purgative enemats, the raphe terminates posteriorly, and enwith the use of bougies of a small size, were, larging the opening a little towards the

On the 9th of February following, howenema was then thrown up, which brought away a great quantity more. In this evacuation there was a plum-stone, which the patient had swallowed four and a half months previous, during the fruit season in automn.

This stone, it will now be observed, I been the cause of the obstruction, any flap or false membrane, as I ha supposed. The stone, after personnels and intestines, had made ment by the eide of, a

us four menths as

is soccygis, from white the context of the hard and unyielding state of the parts, suc-rounding the artificial anus, and being greater in dismeter than the opening than it had been prevented from excepting. A If had been prevented from escaping. A constant tenesums had tormented the patient, while on every occasion of his goin to atool the stone, filling up the diameters the outlet, prevented any feculent writter from escaping, except when pushed back by the glyster-pipe, or a small bougle, as before stated.

Every experienced surgeon knows that in private practice it is rarely possible to get a patient to comply with all that is desired, especially in surgical cases, and it was so in this instance. The nature of his disease rendered the little patient peevish and fretful, and made him averse to be examined. Indeed, the first and only opportunity of examination was immediately before operating. The probe then slipping past the stone, as it was introduced, although turned in every direction, gave no indication of its existence, while the escape of a little feces, as before observed, prevented any assistance being obtained by the eye.

A piece of candle, four inches long, was new introduced as a bougie, and was secured by a pad and T bandage, the abdominal part of it being made of flannel. This was about one o'clock p.m., on the 10th of February. At four p.m. of the same day, he had another large evacuation of feculent matter by the new opening; after which, a new candle bongie was substituted in place of the former, which was partially melted. He was then put to bed, and enjoined rest, with mild diet : he remained in this state until about midday of the 11th, at which time he had another evacuation by the new anns, from 388 of Ol. Ricini which had been administered that morning. A wooden bou-gic, made very smooth, of seven and a half lines in diameter, was now introduced, and was ordered to be kept in and out for four hours, alternately. The abdomen had by this time become pretty empty and flaccid; pulse 150; skin hot; otherwise the boy was in good spirits, and had passed urine twice within the first twenty-fours after the operation, quite freely, and without unessiness B. Submuriatia Hydrary. gc. iv; Pulv. Opil gr. J. M. Chart. No. iv, quarum sumat unam guique hora quarta.

12. Skin more cool; ordered a new bongie of nine lines in diameter, et Ol. Ricini

Mr. Skin again hot; pulse 140; the parts renewed, and a poultice of of one applied to the anus, years sixth hour. The bou-letter as hour, and our * The electron with a thick

at of the layer of the following cintment. B. Armpi Ricentis Sien; Bat. Belladouna, Acet. Plumbi, og 3ij. M. P March 5. General health much improved.

The new anus looks well; it is open at the time of withdrawing the bougle, but closes gradually by corregation; very little pus. the parts being nearly all covered with a smooth membrane; nothing coming by the old anus but flatus. Bougie ordered to be kept in only two hours every morning.

17. The motions have been passes gularly by the new anus. He has been walking about daily since the 10th instant, by which exercise, a small quantity of feeslent matter is forced out by the old anus. especially when the howels are loose.

B. Nit. Argenti gr. xx; Aq. Distillat. ij: rolve. Inject a drachm into the old and morning and evening; a piece of lint well covered with Ung. Resinos, to be afterwards introduced, to produce in the first instance a rawness of surface; after which, the solution of Nit. Argent, being discontinued, Tinct. Canthar. Vesie. is to be substitut and the pledget of lint, with the cintment, continued.

This course was persevered in for several weeks, with very little advance towards closing up the first opening, the main difficulty in accomplishing which was, the manner in which it had been excavated or hollowed out (if I may use the expression) by the great pressure of feculent matter, previous to the operation being performed, which has made it like an inverted cone, the outlet being the spex.

Considering such to be the case, I thought the only rational way of closing, or, rather of filling up, the posterior opening, would be to treat it as a fistula. So on May 19th I divided the space intervening betwirt th old and new opening, with a probe-pointed bistoury. When for this purpose I sutroduced my finger into the new anus, t sphincter closed round it with great firmness, which convinced me of his being able to retain his feces by the new passage, if the old one was filled up. A piece of o caddice was introduced into the wound, and accured by a positice and a T bandage. A teaspoonful of paste, in imitation of "Ward's Paste," was applied three times a day, for the purpose of assisting to form granulations.

This course was continued long enough to convince me, that something else was necausity to be done before sufficient grame-lations could be produced for filling up the cavity, which desirable object was considerably retarded by the pressure of focus often times displacing the dressings.

This electron is highly recommended by Ba-paytren, who used it in case of fissure about the arms with decided advantage. See Leiter of March

June 26. Coarse green flax was substi-tuted in place of the lint, and covered well we may come at the same point, by cutting at each dressing with the following:— or placeding from the perineum, at the pos-lation. Resince 3); Pade. Canther. Veric. terior terior insting of the rapide, as before gr. xx. M.

Previous to the introduction of the flax at

comes in contact with every point of the cavity, and is with the lotion and mixture already producing copious granulations, which are springing up rapidly. His health is excellent; no feculent matter has come by the posterior part of the opening for the last fourteen days, and the pledget of flax, which is renewed every morning, and which I direct to be kept as much as possible towards the sacram, remains in from the one dressing to the other, without being displaced as before. The bougie is to be inimmediately withdrawn.

From that time he was allowed to walk about, and on August 26 the medical remeup, so that neither feculent matter nor flatus form diameter, nor is its clongation so comcould escape by it. Being now able to retain his feces at pleasure, he was dressed in male attire, a circumstance that pleased

him very much.

Remarks.-This case being brought to a introduce a few practical reflections, suggested by what is contained in the foregoing case, and applicable to those of a similar nature, although not intended to apply to cases of imperforation in general. Having waited for a day or two, or, in some cases, for three or four days after the birth of a child with imperforation of the anus, in most cases the integuments between the nates gradually protrude, and become of a livid or black colour, from the pressure of the meconium within. There can, then, be no difficulty in determining how to proceed. With the pointed bistoury we make an opening, and, enlarging it with the aid of a director, nothing further is necessary than to keep it patent, and attend to constitutional symptoms, until the infant recovers.

But in cases of imperforation of the anus,

where no such profrusion takes place, and where no other mark indicates the position of the rectum, we are beset with greater

difficulties.

With a view of lessening these difficulties, I would suggest proceeding as in the case of S. P., by making a small opening with a narrow bistoury, just large enough to admit the probe on the left side of the os coccygis. If, with the probe, we succeed in seaching the gut, it can easily be ascertained, by its hogany, or

detailed; after which, the small opening at the root of the ea cocoygie may be conve-niently closed up by adhesive plaster.

the dressing morning and evening, 3] of the inically closed up by adhesive plaster. following lotion was thrown in with a small a detention to these directions may, I consyrings:—II. Dececti Gentiane Ib iss; Acid. critical series and least the difficulty in making a proper than at first, in cases where Joly 21. The flax tent, with the ointment, the gut can be found, by piercing at the root of the coccyx; and we may rest assured, that we never can make an artificial anus in any other situation than the one here recommended, with a probability of rendering the individual comfortable through life. There we have it at the most depending part of the trunk, so that no sac can form beyond it. We have the probable existence of that essential part of the anus, the aphincter muscle, without which we cannot retain the feces; we have also the two nates, like powerful sentincls, both adding strength to troduced into the new annu once a day, and the passage within, and affording security from injury without.

For keeping the anus patent, after it is made, I would prefer the wooden bougie to dies were discontinued, in consequence of any other. The sponge-tent is irregular in the posterior cavity being completely filled its surface, and does not continue of a uni-

plete as is required.

The wooden bongie can be made of any size, or of any form required, and never alters its figure by use; unguents of any kind, with which it might he proper to cover it, adhere better to a bougie made of successful issue, it may not be improper to wood, than to those made of bone, ivory, or metal. It is, besides, an advantage pos-sessed by the wood, that it

never communicates the same unpleasant sensation of cold to the parts as is the case with any of the others, unless previously immersed in hot water, which render them unfit for receiving a coating of ointment, if thought neces-

Bary The kind of bongie which I have found to suit best is made in this form, very much like that of a candle, with a rim, or border, at the farther extremity, to prevent it from sliping in, the pad and bandage, without the aid of tapes, serving to keep it from coming on extreme length which I h

of too small, a new to at a very trifling expelle

For a tent or pledget, my experience leads sac to think that green flax is preferable to caddier. Flax accommodates itself with great accuracy to the surface with which it comes into contact, and by its roughness it provokes the formation of granulation while it is sufficiently soft to yield wand protect them when forming. The size of the pledget requires to be reduced from time to time, as the cavity fills up, until it is finally

rendered unnecessary.

It will be observed, in perusing the above case, that from the 17th of March until the 26th of June, the time was in a manner lost in vain endcavours to close the old anus; this partly arose from the size of the cavity being so wide as to always allow a large quantity of feculent matter to descend and displace the dressings, but principally from the actual inefficiency of the applications. Some little progress was indeed made, but nothing compared to what was afterwards attained, by the use of green flax, cantharides ointment, and lotion, the paste at the same time assisting in an inferior degree.

COLICA SPASMODICA.

FOLLOWED BY

INFLAMMATION,

TERMINATING FAVOURABLY.

To the Editor of THE LANCET.

Sin,-I beg to transmit the following case for insertion in the pages of THE LANCET. I am, Sir, your obedient servant.

MATTHEW GIBSON, Surg. Govan Haugh, Glasgow,

Dec. 22, 1835.

Case.-John Maxwell, aged 20 years. while engaged at work on the night of Thursday, December 18th 1634, and in a state of profuse perspiration, took a large draught of cold water, and at 10 o'clock, an hour afterwards, was seized with a pain in the abdomen, exactly over the region of the caput cæcum coli. By l a.m. it had increased so much that he was forced to leave work. On arriving at home he swallowed two ounces of Epsom salts, which were in the house, and in half an hour afterwards had a motion in his bowels, but felt no At six the pain had so greatly in-accompanied by a disposition to his friends requested that he

tatin, et idem schib, q.q.

abr at the above-mencontinuerased much upon
passage in bowels, other
table mach swollen, and
the same. Contin. piluba.

was soft; tongue forred; pulse not much altered; the bowels had been constiputed for two days before. He was ordered Pulv. Opti gr. ij; P. Rhei Dj; Magnes. Ust. 323. M. Divide in partes tres, sum. j, q.q. 2d

Dec. 19, 3 p.m. Prin still continues, and is fixed; pulse quick; tongue very much furred; skin hot and dry; headache and pain in back; some thirst; had vomited the powders; no stool. R Submur. Hydr. gr. vi; Opii Pulv. gr. 1. M. sumat statim, repet. idem q.q. 4th hor.

Saturday, 20. Was called in haste this morning at five o'clock. Is much worse: pain considerably increased, and extending across the belly, aggravated very much on the slightest pressure; did not vomit the powders; pulse 80; no stool. Mittat sang. e brach. zvi oz. Applic. sinap. part. dol., et cap. Ol. Ricini 3i, statim. Si non respon. in hor. quat., hab. Sulph. Magnes. 3ij. q.q. hor. donce amp. purg. Enem. donest. statim.
12 noon. Two hours after the oil had been

taken he vomited; passed the enema almost immediately after it was given, mixed with no feculent matter; pain not in the slightest abated; general tenderness throughout the abdomen most intense over the caput cæcum coli; pale anxious countenance; great thirst, frequent vomiting, and flatulent eructations. Admov. hirud. duodecem ad dol. part.; postea foment. calid. Enem. adhib. statim. Contin. Sulph. Mag.

4 p.m. Received notice that he was considerably worse, and on arriving I found the former symptoms much aggravated; pulse 100, full; tongue the same; right cheek flushed; great anxiety exhibited in countenance; skin covered with perspiration, and is unable to move himself in bed; had vomited the salts; enems still retained. In consequence of some misunderstanding the leeches had not been applied. The former blood not cupped, but several parts of it covered with lymph. Mittat sang. 3xvi. Admov. hirad. statim. Rep. enem. Cap. Ol. Croton gtt. ijss.
10 p.m. Two hours after the croton oil had

been taken he vomited some glairy kind of mucus; passed both injections, with no stool, but it had a feculent smell; blood slightly cupped and buffed; takes nothing but water-gruel; pain, with general tender-ness, no better; pulse 100. B. Pil. Al. c. Col. unum q.q. 2d hor, sumend, tere in pulse Impon. emplas. canth. vesicat. ad abdom.

Rep. enem.

21, 10 a.m. Passed a bad night, has taken five pills ; no stool ; blister rose well. and thinks the pain is rather easier; pulse 96; other symptoms the same. Applic. catap. emol. ad vesicat. Cap. pil. col. duas

statim, et idem schib. q.q. 2d hor. 8 p.m. Has had the pills regularly, but no passage in bowels, other symptoms much

Monday, 22, 10 a.m. Has had the pills regularly since last night, and has had thirteen stools, which are feculent and of a brownish colour; the first stoel was about an hour after last night's visit; expresses himself as considerably better; the hand can be pressed on the abdomen with great freedom, except above the capat on-cum coll, which is still tender; pulse 86, soft: skin meist; still some thirst; no more vomiting; did not rest much, from purging. Contin. cataplasm. Discontin. omnia medic.

10 p.m. Has had no more stools, but continues easy; blister discharging. Quies,

Cras mane.

Tuesday, 23, 10 a.m. Pulse the same; has had several stools since last night, which are mixed with a flocculent kind of matter; tongue cleaning; still some thirst; in other

respects pretty well.

Wednesday, 24. Has had six or eight stools since yesterday; thirst diminished; blister nearly healed; scarcely any pain in abdomen; pulse 82; tongue nearly clean; beginning to feel a little hunger; ordered some mild soup. From this date he gradually continued improving, without the aid of any more medicine, his bowels being freely opened once and twice every day, and in four weeks he was engaged at his usual employment.

Remarks.- In this case, it would appear from the prevailing symptoms, that both the beginning and the termination of the bowels were in active operation. That the greater portion (if not the whole) of the small intestines were acting naturally is certain, from the retention of the larger part of the medicine, and the consequent violent purging which ensued after the subsidence of the complaint; and that the greater portion of the large intestines was also acting naturally, is equally certain, from at the end of the small or at the beginning leading circumstance in the history of this cum coli, which is proved by the pain com- swoke in the morning with a violent pain

What was the pathology of this affection? | " A month after this attack," poses all cases of colic to be? Or was it spasm, which Dr. Cullen's views would lead us to believe? Or was it a case of common inflammation?

For my own part, I should consider this to be a case of obstruction, not altogether, however, arising from constipated howels (although the patient had had no stool for two days previous), but, as Dr. Cullen would case is, that after a

milit contractor. I have arge draught of cold water ations had drunk whilst perply, his bowels being sluggish time, both co-operating tagether, by giving a sudden check to the perdration, and nervous system, and thereby bringing on the disease in question, which coded, with the severe symptoms which ensued, in inflammation.

CANCER OF THE UTERUS.

To the Editor of THE LANCET.

Sin,-The importance of clinical lectures above all other lectures is unquestionable, and all men of science who feel for the welfare of a profession which stands first in the scale of humanity, must rejoice in the adoption of a mude of instruction, which but a few years ago was unknown in the British metropolis. Much also are the public indebted to THE LANcur for the wide diffusion and the consequent practical benefits of such lectures, which, had they ever been delivered at all, would, without the efforts of that journal, have been confined wholly to the limited circles in which they are pronounced.

In THE LANCET of November the 7th, in the clinical lecture of Dr. Elliotson, a case is given of "Chronic Inflammation of the Uterus," which, when I read it yesterday, impressed me very forcibly with an opinion, that its details and conclusion might tend to lead to much practical error. "The next case," the lecturer observes, "is one of diseased womb, in Elizabeth Warren, aged the expulsion of the different enemata which 29, a married woman, without children. were given. Now the fact comes to be this; Now this is to be noticed, that she was that the complaint must have been either married and had no children." The of the large intestines. In my opinion the case is, that about three months previous complaint was altogether in the caput ca- to her admission into the hospital, she cum coil, which is proved by the point course in the hypogastric region, accompanied by and also from the observations previously "a severe hearing down." "She had menstructed regularly hefore, and very copiously." " which was the Was it a case of simple obstruction in that monthly period, "she had a profuse dis-part from constipated bowels, or a loss of charge of a black colour, containing large muscular power in the part, and consequent clots of blood," and this lasted "for five over-distention, as Dr. Abercrombie sup- weeks." On her admission to the bosnital. On her admission to the hospitale the uterus was found to be so diseased, as to induce a doubt whether it was not of rhous (cancerous) nature. Sheobia under the treatment adopted of mercurials with opinm), and in the temporary she from town, as "relieve"

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ion the 12sh she at the second of the second

The neglect, then, of an exercian when under amendment, to ascertain when ther the uterus was then "solid and fixed," or softened and more compressible, has thus consequently involved this case in a supposed doubt as to its nature; and is doubt Dr. Elliotson concludes his observations on the case: "But I will not say at this moment whother the disease was simple induration, or scientist, in the modern exclusive sense of the word," all of which embarrassment might have been avoided.

The directly probable state of this patient was that which Dr. Elilotson supposes might have been the case, viz., that "the uterus had fallen anddenly into a state of inflammation," and the circumstance of her not having had any children—and having menstranted "very copiously "previously to the attack, confirms the probability of the opinion that there existed a predisposed state for such an attack. But, on the other hand, all the history and circumstances of the supposition of a doubt that in its then reported state, it actually partook of any thing like the nature of scirrhus in the modern exclusive sense of the word."

In my "Inquiry into the Nature and Action of Cancer," published in 1805, 1 attempted to show and establish, that sein-thus was the result of "permanently altered structure" and "acquired actions" leading to cancer as a secessary consequence. This doctrine was opposed to the then prevailing opinions, that the disease depended upon some "specific poison," some "leaven" or "ferment" or "formes," or some "animalculæ of an hydatid nature."

This doctrine, supported as it was by the facts connected with the origin and progress of cancer itself, necessarily slow in its origin, was generally admitted, and so far influenced Dr. Ballie at the time, as to induce him, when he published his third edition of "The Morbid Anatomy," to withdraw certain opinions which he had formerly stated relative to the precliposition of parts as being the produces the disease, when

speaking of the "scirrhous and cancerous stomach."

So much is stated in application to the

So much is stated in application to the case in question. There never was sudden attack the immediate result of which was scierter "in the modern exclusive sense of the word."

The morbid, the permanently morbid altered structure, must be the progressive effect of some former injury or disease of a part, wherever scirrbus or cancer exists.

In all this the late Dr. Denman concurred, confirmed as the concurrence was by his own able and extensive observation and experience. Scirrhus of the uterus was never known to exist in a menstruating woman of twenty-nine, and therefore could not have existed in Elizabeth Warren's case; but which state the diseased condition of the uterus would necessarily lead to at some distant period, if it were not wholly removed, or if the patient were not previously destroyed by some fresh attack of inflammatory ulceration of the organ itself.

All the symptoms of Warren's attack proved it to be inflommatory, -andden, and not previously slow and progressive. Her copious menstructions" previous to the attack, sufficiently indicated the state of things, followed, as it was, by the after "profuse discharge of large black clots of blood," which lasted for "five weeks," and by which nature herself very sufficiently and impressively pointed out the treatment for relief, and which was adopted in this case, but in part only, and not completed. She was "relieved," but not wholly so. The treatment, therefore, as a case, was un-finished, and here was the error. The patient should not have been discharged as "relieved," but the state of the uterus absolutely ascertained by examination, the treatment continued, and the case not lost sight of, until the disease was wholly removed, or found to be incurable.

As these observations may be applicable to other and similar cases which may occur, I have thought it practically important to send them for publication, which, even if, Mr. Editor, you should not agree with me in my views, I yet claim, at your hands, upon the just principle which has hitherto influenced the conduct of Tag Lancer,—viz., that I may be heard, and, if wrong, that I may be set right, but if right, that that which is right may be established and promulgated. It is not, in this individual case of error, as I conceive it to be, that I respect Dr. Effects on less, but that I esteem the promulgation of truth more.

Amidet the labours of an extensive private practice, no honourable man can fail to entertake facings of respect for the public exertions of Dr. Elliotson in the general cause of science, which stand so pre-emimently in contra-distinction to those of that

Poless moneyers was the late annieble to be a not be a no

court "blow-fly," Sir Henry Halford,-the once wriggling magget, Vaughan.

ggling maggos, I remain, Sir, Your obediess humble servant, SAMUL YSDM Strutts, East Looe, Cornwall, Dec. 26, 1835.

FREE GASES IN DIABETIC URINE.

To the Editor of THE LANCET.

SIR .- For some months I have been much interested with respect to the free gases supposed to be contained in healthy urine, and have put the question to the test of experiment, by submitting the urine of different healthy persons to the action of my airpump, in the manner formerly explained in the pages of your very valuable Journal, but I was not enabled to extricate a single bubble of gas from any specimen of urine

experimented on.

Not deterred, however, by this, I was again induced to experiment on the urine of a sailor, belonging to this port, who had long been afflicted with that incurable and most severe disease, diabetes. This person, a dependant in the Sunderland Workhouse, came at two different periods to our infirmary, and in my presence passed twenty ounces of urine each time, in the most steady and correct manner, so that no gases were lost during micturition. The exact proportions of gases which ten ounces of this urine; ganese, put into a bottle which will hold contained at the first micturition, were as

Cabic Inch. .02 Carbonic acid gas19 Nitrogen gas

follows :-

From the second of the two micturitions, which was performed about five days after-wards, I obtained from a similar quantity of urine the following gases :-

Cel	Cabic Inch.		
Oxygen gas	.03		
Carbonic acid gas	.02		
Nitrogen gas			
	21		

I need not point out to the medical faculty the importance of these facts. I beg that they may be compared with what I have published in the pages of Tax Lancer, with respect to human arterial and venous blood. I remain, Sir, your most obedient servant.

W. REID CLAWNY. Sunderland, Dec. 24, 1835.

P.S. Figures to the first of the property of the manipation, that in every experiment with my man safety-lump, I used bladders of congas, or emplosive atmospheres of coal-gas and de last

MEDICAL PREPARATIONS OF MANGANESE.

To the Editor of THE LANCET.

Sia,-Among the numerous metals which have been introduced into the class of medicines, I have never observed any prepara-tion of manganese. This metal is principally employed in the art of dyeing, and for chemical purposes, but I now wish to introduce it as a remedial agent. About two years ago I prepared a chlorine solution of that metal, and introduced it as an alterative and tonic, but afterwards found it a valuable medicine for epistaxis. Several remedies are now employed for this complaint. under the name of styptles, but I believe they are not to be relied on in severe cases of hemorrhage; and the acetate of lead is frequently objected to, on account of its irritating property.

It will be useless to mention the number of cases of epistaxis which have effectually yielded to the chlorine solution of manganese, as I have given the form for preparing it, and will leave the surgeon to judge of its application from his own experience.

To prepare the chlorine solution of manabout two pints, one ounce of carbonate of manganese previously mixed with three conces of distilled water. Let a current of chlorine gas be slowly passed immediately upon the mixture (by means of a glass tube connected with the retort whence the gas is distilled; until the manganese is dissolved. The solution must then be put into a flask, and a gentle heat applied for a short time, when the mixture will become clear. Filter when cold, and add one ounce of alcohol.

This process occupied a great deal of time, and was attended with some little trouble; therefore, instead of using the chiorine gas, I have since prepared a muriate of manganese, which is not attended with trouble, and its medicinal properties appear to be precisely the same. To prepare the muriate, take one ounce of carbonale manganese and two ounces of muriatio mix them together in a flack, and a treat of a lamp for a few m the mixture to cools file ounce of alcohol.

With respect to: of this medicine, 1 cient proofs to in its praise, but

proved a very good, antimony, &c. For itte e may be given, in combination with m rilla, with a very good effect. In some obstinate cases of chronic rhot also been given with advantage. The fol-lowing will be the best mode of administraing the muriate of manganese :-

As an alterative, tan or 60 be given twice or three times pe may a day in water. For epistaxis the same dose may be given, to be continued for a week or ten days, or antil a sensation of vertigo comes on, which usually takes place. If the hemorrhage continue for some time without intermistion, and the surgeon think it necessary to heck it immediately, give ten or twenty irops every quarter of an hour, until the pleeding stops, or until vertigo is produced, and continue its use for several days after. in every case which has yet occurred, the second dose has always succeeded in stopping the discharge, and without prolucing any subsequent unpleasant sen-lation. The muriate will sometimes proluce nausea, when the bowels are in a lisordered state; therefore a dose of some sperient medicine should first be given, if ime will allow, and also after vertigo is proluced an aperient must be given.

For hemoptysis this preparation has not et been given with success. However, it ias only been tried in two or three cases. When combined with Sp. Æth. Nit. and Inf. Anthemidi, it has proved serviceable in some cases of hematuria, but it must never

se given when fever is present.

By giving to the foregoing a place in your raluable journal, you will, Sir, oblige your bedient servant,

HENRY OSBORN, Chemist. Southampton, Jan. 5, 1836.

AMAUROSIS, ..

FOLLOWING.

SUPPRESSED FEELINGS or PASSION.

To the Editor of TER LANCET.

Sin, -I send you the following case, thinkng it worthy of a place in your journal; it scourred in the Hotel Dies, Paris, last sumwhere I was then studying. Your ot sgryant,

J. I. IRIN, Surgeon. Yorkshire, Jan. 4, 1836.

> tat. 35. tailor, of Paris, an affection of the

ary, states that he has been subject to violent pain of the head for two years and a half, but that it has become much worse lately, and that he had been totally blind for five and that he has seen totally mind for live months. The immediate cause of his blind-ness he attributes to a violent mental emoon, experienced whilst at a review of the National Guard, of which he is a soldier. Being strongly, and, as he considered, un-justly reprimanded by his captain, and not daring to reply to his superior officer, he was obliged to contain his violent feelings, in consequence of which partial blindness, attended with a strange sensation in the head, was the immediate result. This blindness rapidly became worse, and at the end of a month he was perfectly blind. For this affection, as well as for the pain of the head previously, he was repeatedly bled, both in the arm and the foot, and had cauteries applied to the head &c. but without the slightest benefit resulting.

His symptoms at present are, intense pain of the head, great heat of the sealp, watchfulness, agitation, vacant amaurotic stare, with dilated pupils, and numbress of the right arm, approaching to paralysis. Pulse 50, regular, but weak; tongue rather furred; appetite bad; akin cool; bowels regular; urine natural, and in proper quantity. Indeed it is only of the pain of the head that he complains. He answers questions rationally, though the other patients

state that he is occasionally delirious The treatment at this time employed by Dr. Recamier was very simple. It consisted in the constant application of cold to the head, by means of a tube communicating with a tub of cold water placed just above his head; the exhibition of purgatives, when necessary, and in keeping him on low diet. These means have not the effect of relieving his intense sufferings, though the sensation of cold, from the constant application of a stream of water to his head, is very agreeable to him.

I watched this case very attentively for a considerable time, but no improvement took place, at least with regard to the affection of his eyes. The pain of the head did, indeed, occasionally abate, but only for short times together. He grew exceedingly emaciated, and, finally, decided symptoms of mental derangement ensued, in which state I lost sight of him, as he left the hospital.

Observations.-Here we have a case of amaurosis which was decidedly produced by congestion of the brain, causing paralysis of that part of the brain from which the optic nerve takes its origin, the exciting cause being a fit of passion; the predisposing cause his sanguineous and plethoric temperament, apparently not hereditary, as he inwas admitted formed me that his parents were healthy old samier on the people. The congestion appears to have faction of the been of that form which is described by M. assesses. He Andrai as the "first seriety of coretral con-

gestion," in his lectures now publishing in structure. It is supply to guberty the body THE LARCET (and from the publication of and mamma were well formed; but the time, lost."

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CASE OF

COMPLETE ABSENCE OF THE UTERUS

A FEMALE, forty-six years of age, who had never enjoyed good health, and was of weekly constitution, had arrived at the age just mentioned without having once men-

See Lancer for Dec. 12, 1825. e Bie Abererouble's work on the Brain, p. Bit

which I became one of your subscribers; menetrual discharge was replaced by a conwhich I became one of your subscribers; intensival discharge was replaced by a confecting greatly obliged for them, knowing, from personal experience, the value of the oral instructions of M. Andral. M. Andral pelvis. The exacerbations of the pain were there states, in speaking of cerebral cost excompanied with vomiting, and occurred gestion, "that it is attended with pain in the gestion, or that it is attended with pain in the gestion, which was a subscribed with vertice, singing in the ears, giddines, in the result with vertice, singing in the ears, giddines, first time, a state discharge of blood took and, momentary aberration, or loss of sight, place from the wagns, the patient being discharge of the conference of the state of the s &c." And again, in another part, he says, affected with acute fever. At the age of "in some cases of cerebral hyperemia the symptoms may continue, with little or no to medical advice, from an increase of pain intermission, for several months, or even for in the left hypochondrium. The symptoms a whole year." Now in H. Forester's case the congestion apparently continued unrelief woman now permitted an examination mittingly for seven months, and it may have of the genital organs; the external parts continued a much longer time, but as he were in a normal state, but the vagina, then left the hospital I had not an oppor-which was about one inch in length, termitualty of hearing any thing more about him. nated in a cul de sac. In the course of a year This case also well illustrates what Dr. this patient died of peritonitis; and, on ex-ARERCROMBIE states in his excellent work, amining the body, Dr. Albers found the in-what speaking of the symptoms of different ternal genital organs in the following state: affections of the brain. He refers these The vagina, as already said, terminated in a symptoms to seven classes. † This case culde sac. About one inch and a half from comes under the second form, or that of it, and placed laterally, were found two how headache, with affections of the senses." dies not larger than a good sized walnut I will quote what he says: "After some these were oblong in shape, and did not continuance of fixed healache, the organs seem to have any connection with the vaof sense become affected, as sight, hearing, gina; however, each of them sent off, up-taste, smell, and, occasionally, the intellect, wards and sidewards, a distinct bundle of The loss of sight generally takes place gra- fibres, terminating in the vicinity of another dually, being first obscured, and, after some body, which appeared to be the imperfectlyme, lost." developed ovary. Each of the oblong bo-Numerous cases are recorded somowhat dies, which we must consider as the rudi-

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CASE OF ARTIFICIAL ANUS.

PRODUCED BY A LANCE WOUND,

CURED AFTER A NEW METHOD.

Related by Professor DIEFERMANN, Berlin.

A Polish officer received, in combat, a thrust of a lance in the abdomen : the blade penetrated up to the shaft. The result was a wound about an inch broad and two inches from the umbilicus, from which blood and excrementitious matter were simultaneously discharged. The patient's life was saved by an antiphlogistic treatment, but an artificial anus remained, which resisted the means used by several surgeons to close it. The whole circumference of the opening was surrounded with a hard cicatrized mass, whose long diameter was five inches, and its breadth two inches. The middle of this mass was occupied by a round hole, which easily received the tip of the middle finger: its inner edge was lined with the mucous membrane of the intestinal canal; probably the transverse colon. An examination of the cavity of the intestine showed not only that it was united to the abdominal parietes. but that its caliber was considerably diminished. As soon as the opening was uncovered the contents of the intestinal canal issued forth; while it was compressed with a printe and bandage they were retained. However, when the patient went to stook it was impossible to prevent a discharge of fecal matter through the artificial anus. After various unsuccessful attempts, the patient had recourse to a celebrated physician at Berlin, who thought he could close the opening by a milk diet, restricting the use of all solid food. The treatment had no other elfect than that of rendering the patient exceedingly thin. He now placed himself under the care of M. CARPIR and the author. The first care of the latter surgeon was to restore the patient's strength by proper diet &c. They then attempted to destroy the hard edges of the orifice with the actual cautery, but this means was also unavailing : an ill looking, pale, granular mass constantly shot up, which they could not get rid of. M. DIRPERBACH now determined on endonvousing to close the artificial anus with a ction of integument taken from the sound is; for this parpose he commenced by do a transverse incision of long, shove the wound, the of skin, two and this that WAR CORties only with

having arrested the hemovrhage, M. Dirr-PERBACH turned this flap downwards over the artificial opening, and united its edge with the lower edge of the circumference of the round cavity: here the two edges were united by a great number of small needles and sutures. The large wound thus produced was filled with charpie, to diminish the dragging and extension of the stitches. However, this experiment failed, the flap of skin died, and the granulations which sprung up were not sufficient to close the opening : the latter remained, although somewhat diminished. The author now proposed a method of treatment quite different; this consisted in destroying, with the actual cautery, the edge of the bowel united to the orifice of the wound, and also, at the same time, a considerable portion of the intestine within the orifice, sparing however, at each cauterization, the external integument. edge of the intestine was touched with the actual cautery the first day: a few days later he introduced a hot iron, crotchet-shaped, and as thick as a pen, into the intestinal cavity, and touched its parietes all round. This gave little or no pain, and was followed with a happy result. The opening was immedi-ately reduced by the rapid growth of granulations; and finally, after a treatment of nine months, the fistula was completely closed .-Kleinert's Repertorium, November 6, 1835.

CASE IN WHICH THE

ESOPHAGUS WAS INTERRUPTED IN ITS MIDDLE PORTION.

The Superior Moiely terminating in a Cul de Sac, the Inferior Opening into the Trachen. —Observed at the Hopital des Enfans Trouves, Paris. By M. Padiev, Interne.

A CHILD of the female sex, one day old, was brought and deposited in the "creche" of the hospital, on the 6th of August, 1835. Immediately after its reception the infant was seized with frequent vomiting: she threw up a sufficient quantity of bloody maccesity to induce the nurse to say the child vomited blood. On the 7th the vomiting continued. The matter ejected consisted in a very spurious miscosity, tinged of a rod colour from the blood. The colour of the 8th, some vomiting; the integuments are cold; the pulse excessively small; the respiration embarrance; face a little bluish; the drink taken into the mouth was rejected very soon after having been swallowed. Death on the 8th,

Body examined on the 9th.

on- Body well formed externally; strong; with length 183 inches. The brain and its mem-

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ŒSOPHAGUS WAS INTERRUPTED IN ITS MIDDLE PORTION.

The Superior Moiety terminating in a Cut de Sac, the Inferior Opening into the Trackes.— Observed at the Hopital des Enfans Trouves, Paris. By M. Padiev, Interne.

A CHILD of the female sex, one day old, was brought and deposited in the "creche" of the bospital, on the 6th of August, 1835. Immediately after its reception the infant was seized with frequent vomiting: she threw up a sufficient quantity of bloody mucosity to induce the nurse to say the child vomited blood. On the 7th the vomiting continued. The matter ejected consisted in a very spurious mucosity, tinged of a red colour from the blood. The colour of the skin was slightly jaundiced. On the 8th, some vomiting; the integuments are cold; the pulse exceedively small; the respiration embarrassed; face a little blaish; the drink taken into the mouth was rejected very soon after having been swallowed. Death on the 8th.

Body examined on the 9th.

Body well formed externally; strong; middles only with length 184 inches. The brain and its mean-brance healthy. The largue, truches and

broughl, examined in situ, do not present any thing irregular. The lining membrane of the larger and traches appears only a piece little more red than natural. The heart is sid a not voluminous; the forames orale is the

greatly develo

natly developed and open.

Intestinal Canal.—The pharynx and inferior moisty of the camphagus are healthy; was given. She was also ordered a draught the stomach is very small; its parietes are of the carbanate of sois, with some laurel in contact with one another; the cavity con-water and sirrigent spectomanha. Pleasly, tains nothing but some mucosity mixed with a lavement was thrown up. The howels, a brownish-coloured matter. The mucous however, remained obstinately costive. The membrane it healthy; the small intestine is patient vomited frequently, and was seized imperfectly developed, and its cavity scarcely with constant hiccup and great anxiety and admits the blade of a common-sized scissors, agitation. The abdomen appeared much The large intestine is also reduced in di-developed between the umbilious and false ameter; but the descending colon and the ribs; almost tympanitic; however, there sigmoid flexure are more dilated; they con- were no absolute inflammatory symptoms. which is intersected for a greater or less ex-tent, have terminated in a blind sac.—Bul. was small, and the infant was nourished ar-letin of the Anatomical Society of Paris, tificially; however, it thrived well. 1835, No. 3.

TWO CASES IN WHICH THE

CESAREAN OPERATION

SUCCESSFULLY PERFORMED.

surgeon at Geldern. - A strong healthy pea- had inclined inwards towards each other in sant, who had been delivered by perforation such a manner, that the arch of the of the child's head three years before, de-l was completely gone, and the twif' manded on this occasion that the Cusarean formed an acute angle at the sy operation should be performed. The conjugate diameter of the pelvis was less than with the finger; at
two inches. She felt distinctly the moveinner was two inner was ments of the child; the labour-pains were transverse did very frequent and severe; the liquor annil especially the discharged; the couter moderately dilated. of the polvis The head was the part which presented. The Under these of author, having bled the woman, and coupled sidered the o to bladder with a catheter, made his inci- lay in yer

e infant, with the cente, easily extrac ed: the intestines through the wound. After at seemed well were constian Emule. c. sel. Glaub. et nitr. tain a considerable quantity of meconium. The patient was now ordered an inf. fol. On examining the traches a second time, it senue compos, to be followed by an enema was found that a small opening, of an ob- of Glauber salts with hypeciamus. This long form, easily dilatable, and closed by the produced at first several feculent stools, and puchering of the tissues which surrounded, a discharge of flatus issued, succeeded by existed at the bifurcation of the bronchi, acute pain in the pelvis; at the same time.

This was the orifice of a musculo-mem- the discharge of bloody serum from the inbranous tube which leads to the stomach. ferior angle of the wound, left open on pur-The superior molety of the ecsophagus ter- pose, was much diminished. In order to minated in a blind sac about an inch below prevent the passage of the secretion from the laryng, and was here united to the pos- the wound into the abdominal cavity, the terior wall of the traches by condensed cel- woman was now placed on her alulomen, and lalar tissue. The inferior molety, ascended a clyster of starch, with opinm, was admi-in its usual direction from the cardiac orifice inistered at once. The purging and painful of the stomach, passed along the right side sensations soon diminished, and terminished, as we have charge from the wound took place with its said, in the inferior part of the trachen, near former abundance. Cicatrization now raits bifurcation. This form of malformation pilly advanced, the patient taking back, appears to be unique. In all those hitherto calumba root, and wine, and on the eleventh observed, both extremities of the asophagus, day after the operation the patient was able

CARE 2. Related by surgeon Von der Puhr. of Dulken .- The subject of this case was a female, thirty-six years of age. Labour had commenced twelve hours before the operation. This woman had already borne four children without any particular difficulty; but after her last delivery she commenced experiencing pains in the limbs, and especially in the region of the pelvis; these gradually increased to such a degree, that she was at last unable to move or walk. On examining CASE 1. Related by Dr. Werranor, army the pelvis, it was found that the case pub

to the action to the bearing

This was accordingly done the first assual they conduct the blood into the cens or such that the conduct the blood into the cens or such that the operation the patient seemed also exist in the corpus cavernous ure three more lively than could have been expected, (corpus sponglosum), and especially in its but in a few days unfavourable bysaisons but in viz. frequent verniting and costive of the professor has not disast in viz. patient felt much improved. The amelioration continued for the seleving days: the See Muller's Archiv. fur Analousie. lochia now set in, and milk was secreted from the mamme; however, the wound did not present an appearance of speedy union; it was half open, and at the second dressing its edges were completely separated. The author, therefore, thought it best to heal by to suppurate; every thing went on well, and t was healed in less than seven weeks. During this period the woman did not suffer rom any of her former pains, and was carefully restored. The child died on the fifth seck .- Kleinert's Repertorium.

DESCRIPTION

THE ARTERIES

PAGAGED IN THE

ERECTION OF THE PENIS.

ANATOMISTS are not yet agreed on the nechanism of erection, nor in the manner ov Professor MULLER: -

M. Mexican distinguishes the arteries of he penis into two kinds, differing in their ourse, form, and termination. One act erves for the nutrition of the organ, the ther are the vessels which determine erecion. The untritious artery (arteria probada penis) passes to the apongy substance if the organ; its branches anastomose with ach other, subdivide, become finer and iner, and, terminating in capillary vessels, an no longer be followed by the eye. The rectile arteries (arterie helicine) are very hort and small, and are given off at a right men the larger and smaller branches profunds penis; they enter pens; they enter sitter and sither sit cal de sac, or by an analon, will that siving any either o, white giving any furcalling of the arteria are is sumed, not only ties, but also of which probably reis flaceid,

set in, viz., frequent ventiling and costive not numerous; the professor has not dis-ness. Some calonal, with an occasional covered them in the venous cells of the curema, was administered; this brought gians penis. These rectile beauches are away a quantity of fecre and wind, and the most casily discovered in man; less so in

HOPITAL DES ENFANS MALADES, PARIS.

the second intention; the wound soon began RESEARCHES INTO THE DISEASES OF CHILDREN,

CONDUCTED ON THE

KNOWN PRINCIPLES OF ANATOMY AND PATHOLOGY.

TUBERCULAR MENINGITIS.

Child eight years of age; measles precoding; palinonary consumption; death from scale hydrocephalus. Tabercolar granulations in the pla micro of cerebrum and cerebellum; educion into the venticles; praisi camollissement of the brain; excavaticas in the lungs.

CARR 2 .- Pauline Arnaud, eight years of age, of lymphatic temperament; with light hair; fine white ratio skin; eyelashes exceedingly long, &c. Her father and mother are healthy; she has not been affected during infancy with any eruptions of the scalp, or glandular engorgements. At the age of seven she contracted the measles; the erupn which the arteries of the corpora caver- tion went through its course with regulaiosa penis are distributed in the interior of rity, but left behind it some accidents, hat tissue. The following is a resume of in particular a catarrhal affection of the he researches lately made on this subject bronchi, slight, however, and never forcing the patient to keep her bed. In the year following the attack of measles, the cough was moderately frequent; headache from time to time; never hamoptysis or convulsions. On the 1st of August she was seized with malaise, vomiting, and a little fever. These symptoms persisted for three days. On the fourth she was admitted into the hospital.

Aug. 5. At the morning visit she presents the following appearances: - Embonpoint moderate; face a little flushed; decubitus dortal; cough not frequent; expectoration none; little or no difficulty of respiration; heat of the sk.a moderate; pulse 108; respiration 24; the tongue is covered with a light whitish for; the nauses and vomiting have disappeared; the abdomon is indolent and supple; the stools natural; no headache; the intellectual and sensorial faculties are Intact

Had the examination of the patient been

Author exertion, bercular meningitie, from page 695 . We continue our series of cases of tu \mathbf{C}

confined to determining the above symptoms, we might naturally have considered trunk still very well and the lit is imposher as convalencent from a slight gastric attack; but on practising percussion and auscultation we soon discovered the existence of grave disorders in the thoracic cavity.

Under both clavicles percussion grave and sound. The stethoscope revealed the presence of gargouillement and pectoriloquy in the most decided manner; the inferior pulmonary lobes alone were permeable to air. The disease was at once diagnosticated "pulmonary phthisis." A pectoral emulsion was ordered, and the patient allowed to take some solid aliment, as the digestive passages were in a good condition.

During the following days auscultation and percussion furnished the same signs as before, and confirmed the diagnosis. No change took place in the patient's condition until the 19th Aug. At this period diarrhora set in, accompanied by an access of fever every evening, and terminating during the nightain abundant sweats. The alvine flux was very obstinate, and resisted the employment of enemata with starch and narcotics.

On the 26th. The patient appears very dull, she refuses every kind of aliment. She answers the questions addressed to her with impatience. She avoids the light, and buries berself constantly under the bed-clothes. The pulse, however, remains calm. In the morning it gives only 84 pulsations. The respiration however is a little more accelerated; it is now 36. The abdomen is slightly tense, and painful to pressure; the chest is free from all kind of uneasiness; the patient complains rather of her head; no convulsive movement has been observed.

29. Profound alteration of the visage; alternating redness and paleness of the face; intense headache, forcing acute cries from the patient; vomiting. Sinapisms to the lower extremities. In the evening, convulsive movements of the muscles of the face and eyes; delirium; acute cries at intervals.

30. Deep prostration and suppor; pupils dilated and oscillant; complete loss of the vision; conjunctive injected; irregular movements of the globe of the eye; permanent rigidity of the muscles of the neck and trunk; resolution of the limbs; the sensibility of the skin is much diminished, especially on the right side; no trismus; no difficulty of deglutition ; face is pale ; abdomen supple ; diarrhosa persists; five or six involuntary evacuations in the twenty-four hours; skin dry and warm, is covered with sudamina over the front of the abdomon and chest; pulse 144, small and frequent; respiration 40, and unequal; no cough or expectoration. Blister to the neck; sinapisms to the lower extremities.

. 31. The patient's eyes still agitated by convulsive movements. She murmers every now and then some inarticulate words, without meaning or connection. The face is spinal matrey are as

trunk stiff very well states. It is impos-sible to place the child sitting up in bed. She is lifted up as if made of a single bit. The sensibility of the skip still obtuse at both sides of the body. The kimbs are in a state of resolution, except the right arm,

Sept. Text symptoms continue to present the raine character. The patient now lies in a state of complete coma. All the senses seem abolished except that of hearing. Twice we addressed a question to the little patient in a very loud voice, and twice she made a movement as if terrified.

2. Coma more profound. When the evelids, which had hitherto remained half open, but now are closed, are drawn asunder, the pupils appear a little contracted; the conjunctive are injected, and seem ecchymosed in some points; the cornea is dull; its surface covered with an albuminous exudation. The movements of the globe of the eye are less pronounced than formerly. Persistence of contraction of the right arm, and of the tetanic rigidity of the neck and trunk. Polse excessively accelerated, filiform; evacuations are involuntary; death at eight o'clock in the evening.

Body Examined 37 Hours after Death.

External Appearance. - Body but little emsciated; no cadaveric rigidity; anterior parietes of the abdomen present a greenish tint.

Cavity of Skull and Rachin .- Skull well formed; dura mater healthy; the glandulæ pacchioni seem small in number. Underneath the arachnoid which lines the convex surface of the hemispheres, exists a great number of granulations of a whitish-yellow colour, and varying in size from a milletseed to a large pin head. They are more numerous on the left side than on the right, and are chiefly confluent on the middle and external portion of the left hemisphere, and at the base, in the fissure of Sylvius. On the auterior and external surface of the left hemisphere, they are multiplied to such a degree as to produce small yellowish spots adhering on one side to the arachnoid, on the other to the substance of the gray matter forming the convolutions; the latter is softened with injection of its substance to the extent of an inch square, and to the depth of two or three line lateral ventricle contains alout of scrum. The fornix s of the ventricles are any change of colors. No al rest of the corestal mass; The pia mater covering the No alters presents granulations; organ and of the pre-The fibrous and an

able quantity of second estudies chord itself is perfectly normal.

Chest .- Adherence of both lungs to the costal pleurse. Each of the two superior lobes is occupied by a large empty anfrac-tuous cavern. The other lobes are healthy; we do not find in them any tubercles, either isolated or en masse. The larynx, traches, and bronchi, do not present any hing ro-markable. The bronchie fields are hy-pertrophied, but have not undergone the tu-bercular degeneration; heart and pericar-

dium healthy.

Abdomen.—Peritoneum free from alteration; mammellonnated appearance and slight injection of the mucous membrane over the great cul de sac of the stomach; the rest of the membrane is of a rosy gray colour, and does not offer any change of consistence. The mucous membrane of the small intestines is, generally speaking, pale; it presents some points of ulceration near the end of the ilium. Some of the mesenteric ganglia are tubercular. Numerous ulcerations exist in the crecum and in the colon; around the edges we detect a remnant of tubercular matter. The consistence of the mucous membrane of the great intestine is throughout diminished; the liver has undergone the fatty degeneration; the other viscera are sound.

P. H. GREEN.

LATE ELECTION

AT THE

RICHMOND HOSPITAL, DUBLIN.

To the Editor of THE LANCET.

Srn,-Knowing that the pages of your invaluable journal perform at once the duplex functions of exposing medical abuses and suggesting practical remedies for their correction, may I, therefore, beg your attention to the subjoined statement of facts, which have produced much talk, if not excitement, amongst the politico-medical circles in this city, during the last fortnight or three weeks.

Mr. M'Dowell, a gentleman of much intelligence and indefatigable industry, who held the important office of Surgeon to the Richmond Hospital, fell a victim on the 7th tions to an over-test in his professional regits, which unfortunately outlived the wers of an endeut mind and a delicate resident mind and a delicate leave the melancholy ask of waiting the enlogy of man and excellent surgeon, pen than I can wield, and present by declaring

what the solate family have experienced an irreparable loss, society has been deprived of one of its brightest ornaments, and the surgical profession in Indiand of one of its most distinguished and independent members.

I need scarcely inform you that Mr. M'Dewell's death created a vacancy in the Hospital in which he was so efficient an officer. An inconceivable number of candidates for the vacant situation suddenly appeared in the "contested field," each putting forward his qualifications and claims to the best of his judgment, either by letter, proxy, or in propria persona, to the members of the Irish Government, with whom this appointment rests. Mr. Cusack Roney, the ex-surgeon, who in prophetic talents, in matters of self-interest, rivals Pastorini, in this transaction anticipated the uncompromising hand of death, and in what he no doubt considered a clever hit, sought by a very early, if not an indelicate application, through his friend Mr. Moore O'Farrell, M.P. for Kildare, and one of the Lords of the Treasury, that situation, for an ob relative, which was as yet the vested and legal right of the unfortunate sufferer, and for whose place, in excellence of character, it would be difficult to find a competent successor. Mr. White, of poor-law and cholera notoriety, employed as his advo-cate the cloquent Member for Tipperary, Mr. Sheil, who "could see no reason why his friend should not be appointed at once; he who had trodden the beaten path through the vale of years, and whose brow wore the indelible impress of the scathing hand of unsparing Time; in a word, he whose locks had not only grown gray, but had actually acquired an argentile brilliancy, in the cause of his country and suffering humanity." The Attorney-General, Mr. O'Loughlin, thought it would be no great compliment for the Government of which he is so distinguished a member, " to nominate his cousin, Mr. Kevin, who had been shamefully neglected, not only by former Governments, but by the public at large, for more than half a century." Mr. Trant's cause was ably advocated by his friend, Mr. Maurice O'Connell, the honourable Member for Traice, who stated that he spoke the sentiments of his father.

This was an unfortunate mistake in the learned gentleman's address; for, when he had concluded his oration, Lord Morpeth, by way of reply, slily drew from his pocket a letter which he bad received from the Liberator himself, in which he strongly recommended to his Lordship's attention another person, Mr. Lynch, whose capability as a clinical lecturer is but foe well known

to the pupils of the Jervis-afreet Infirmery.

Mr. O'Reilly was escorted to the Castle
by a Mr. O'Farrell, the M.P.'s brother, who ented death, introduced him to Lord Morpeth, as being said, discon- "the most efficient surgeon that could be found in Dublin," and at the same time as- rece sured his Lordship that " he spoke the sen- legit timents of his brother the honourable Member for Kildare, who would take the earliest to the Bioline possible opportunity of waiting on his Lordship, as he was much interested in favour of his friend the Doctor." Here a very and ward scene occurred similar to what took place in the case of Messrs. O'Connell and Trant. Lord Morpeth having listened with great attention to Mr. O'Farrell's statement relative to the deep interest which his brother took in the success of Mr. O'Reilly, smiled, and said, " This is really very strange, and then produced the letter pital, caused by the death of Mr. M'Dowell, which the Member for Kildare had written and that a Mr. M'Donnell was nominated to him some days previously, by solicitation in the room of Mr. Carmichael, who had of Mr. Roney, in favour of another person.

A Surgeon Ferrall was introduced to the Government through a petition from the Sinters of Charity, which was most numerously signed by the members of that community. The petitioners humbly entreated " that his Excellency the Lord Lieutenant would be graciously pleased to carefully consider the claims and acquirements of their long-tried friend the Doctor, and that he would look with an eye of benign conwideration on the object of their solicitude and maternal care, and that they would ever

There were many other candidates in the field, but as I am not well acquainted with their mode of approach to head quarters, I cannot pretend to describe with accuracy the particulars of their canvass, or the parts which they played in this truly ludicrous " comedy of errors." The Government find. ing themselves thus beset and besieged by a number of applicants of conflicting interests, yet all happening to be their supporters, felt desirous of getting rid of the embarrassing situation in which they were placed, of making an invidious selection of one from amongst many friends, had recourse to the following extraordinary expedient -They appointed Mesers. Crampton, Colles, and Carmichael, as a board of commissioners, and furnished them with a list containing the names of the candidates, from amongst whom they were desired to nominate the individual whom they deemed best qualified to fill the vacant situation. Well, the commissioners met, and met again, to consider and discharge the important duty confided to " their better judgment;" they felt puzzlod and confused, for the list was composed for the most part of Roman Catholics, and it contained none but reformers; they could not, therefore, conscientionally recommend any of the persons whose names were on the Castle list; but agreed to recommend to his Excellency's consideration a gentiernan, hir. Adams, who was not on the list, but who had the good fortune to be the political and personal friend of the impurish and arust-worthy delegates! Mr. Adams was fast, re

the sudac ed insulting protest, if is appoint med Hogil order to support the " che cal school of Deblin"!!! er of the medi-Although such a statement may appear incredible and prereaders of The Lawcer, yet it had " the desired enter; ? and, accordingly, in the course of a few days it was formally, and, I believe, officially announced in the newspapers, that " Mr. Adams was appointed to the vacancy in the Richmond Sure generously resigned to make way for his friend."

Thus ended the bungling and jobbing transaction, which in itself would be de-serving of little public attention, were it not for the extraordinary circumstances connected with it, and the rank and infinonce of some of the parties concerned. This given the whole affair a degree of seriousness and political importance, quite sufficient to set reformers of every class a thinking. In the first place, let me ask, what, in the name of common sense and common justice, could have induced the Irish Government, aye, and in this city, where party and political feelings run so high, and where partisanship and jobbing of the most flagrant and shameless description are deemed a legitimate part of the staple trade of the metropolis, to shrink from the firm and impartial discharge of its duty, and delegate the power and authority with which it alone was invested to three experienced jobbing intriguers? This may appear to those who know nothing of the former practices of the new-fangled commissioners, to be barsh language, but persons well acquainted with the intrigues of the medical profession, such as Cusack and Co., will readily un-derstand the propriety of its application, However, for the information of the uninitiated, I wish to justify my expressions, and illustrate their truth by a reference to facts which challenge contradiction. Mr. Crampton has, by a steady perseverance in that tact and managerism of which he is an accomplished master, succeeded in getting three of his own apprentices, one of whom is his nephew, appointed surgeous

to the Meath liospital. Amongst the numerous p ments of Mr. Colles, I have to tention to one which certainly be furgotten on the present of eighteen months ago, Mr. C ance with an agreem into by himself and. league, Mr. Cu Willy, appainte

Illabia was done. luminary whom the contracting parties deemed a suitable successor.

So much for the practices of two of the faithful delegates. As to Mr. Carmichael's

dik it prowess as an intriguer, I don't think it necessary to add one word beyond that has been already stated—namely, that he has been induced, within the last few days, to re- regarding Mr. Adams, I do not wish to be sign a post of honour on conditions best understood as speaking disparagingly of him known to himself. What could be more insulting to the candidates, all of whom were legally qualified to fill the situation, and of professional information, and that he is whose names were forwarded to the com- an honourable man. However, when I exmissioners, than to pass them by, and nomi- press myself thus, I wish it to be distinctly nate one of their own creation, assigning as understood that the conviction on my mind their reason for so doing the unblushing is, that he owes his present appointment Dublin?" This is not only an insult to the sorry to say that Mr. Adams ought to be medical teachers of Dublin, but a false re- classed with such rancorous bigots, both in usefulness he extended by his recent ap- Government. Oh, shame, where is thy pointment to the Richmond Hospital! In no blush! pleased to pursue in the exercise of their and place on their political enemies, to the high judicial authority, in treating with con- unjust exclusion of their own supporters! my success authority, in treating with con-ting distributions whose names were in-bed on the list which was sent to them and the success of the success of

cheers protegé of a reform Government! t doubt if a greater enemy to reform, or prized, by advertisiont, or otherwise, that doubt if a greater enemy to reform, or a his disinterested professesor had any inten-tion whatever of resigning in favour of the possibly be found in the medical profession then Mr. Adams. As a proof of the truth of this statement, I beg to apprize you that during Lord Haddington's ephemeral administration in this country, Mr. Adams was, on principle, appointed to a lucrative Government situation.

When I state these incontrovertible facts either as a surgeon or a gentleman. On the contrary, I believe he possesses a fair abare falsehood that it was necessary that Mr. more to the religious and political prejudiess. Adams should be appointed to preserve the of the commissioners than to his scientific respectability of the "medical school of attainments or private worth. I should be presontation in which the commissioners religion and politics, as Messrs. Harrison, betrayed their trust to the Government Jacob, et has genue owne, who take a pride which gave them power Why, Mr. Adams in declaring, on all suitable occasions, their and the learned commissioners would not be uncompromising hostility to the present lin, even if it were ordained by Providence tred to every thing liberal. By the way I that they should forthwith be translated have just heard that the veracious Mr. Harto another and a better world." However, rison wished to become a candidate for the
let us now, for argument's sake, suppose Richmend Hospital, and so far succeeded in
Mr. Adams's exertions in the cause of the imposing himself as a liberal on the able and rising medical generation were ten times learned Member for Wexford, Mr. Walker, more efficient than they ever have been, that Mr. W. actually exerted his influence in and inquire how could the sphere of his favour of this political cheat with the Irish

one way. Yes, Sir, I repeat it, in no one way | Well, Sir, we are told that "out of evil can his new appointment render Mr. Adams's cometh good." Such being an acknowservices more useful to his pupils, or "the ledged truth, the friends of reform and fair medical school of Dublin," than they were play could not possibly wish for a stronger before. Mr. Adams was attached as leed turer to a school which afforded him ample interference, as regards medical appoint-opportunity of imparting information to his ments in Great Britain and Ireland, than the pupils; he was likewise one of the surgeons one I have laid before you and the readers to the Jerria Street Infrmary, and had of your journal. Had the system of election there abundant scope for giving clinical by concours been in operation in the present instruction to the pupils of that institution. Now, I beg leave most respectfully been driven by the humiliating act of a misto sak the commissioners, Messrs. Cramp-taken expediency, to the appointment of an ton, Collos, and Carmichael, to justify them-improper Board of Commissioners, nor could selves in the line of conduct they were they be taunted with having conferred power

> there is no person more membered, both by Mr. Warburton and the Adams himself, that he, Government, should the premised Medical-the particular friend, Reform Bill lead to the establishment of a fine himself the harmony central board in Dublis, as persons who have, by their recent conduct, completely

disqualified themselves from atting or cooperating with any body of men whose duty and rule of action should be the exercise of impartiality and fair-play towards all persons, without reference to the religious or political opinions of any. Playe the honour the honour to remain, Sir, your obedient's vant.

OBSERVATOR.

Dublin, Dec. 30, 1835.

METROPOLITAN UNIVERSITY DEGREES.

To the Editor of THE LANCET.

Sin,-Having read two letters in recont Nambers of your Journal, on the subject of the remoured ministerial University, from students, it will not be thought, I trust, presumptuous in me, though but a country apprestice, yet equally concerned in this intoreating event, to say a few words on the

Thinking with your correspondent who signs himself " A STUDENT," that the plan divulged would be little better than a continuation of the certificate system (which enriches the few at the expense of the many), I wish to be considered as replying to some few of the extraordinary statements contained in the letter of the "King's College STUDENT." On seeing this signature, I was led to suspect something unsound, and my suspicions were increased, when, on reading the letter, I found a long account of the immoral tendency of students having to prepare themselves for examination, without compulsory attendance on "recognised" schools. Your correspondent seems to have overlooked one source of disadvantage to the student from the present plan. Are the morals of young men more likely to be endangered in country towns, under the eyes of their friends and relations, or when crowded together amid the temptations of populous and dissipated cities? It is not so much the love of mero pleasure, as a fond-mose for company, that leads young men into the excesses of youth. Your correspondent seems to wish, that no degree should be granted noises the candidate has obtained ertificates of attendance on lectures, when he himself allows that they are often prosured without attendance. " How many ' he exclaims, " who never show suscives in a instarr-room more than three or four times a week!" And yet these mag men obtain their "certificates." Why then should sertificates be required? Provided approbation, or ready to a student passes his examination, in course to any measures a quence of having acquired sufficient know- views of the old figs to enable him to perform the imper-m duties of a medical practitioner, what away come of

in he needed was honest govern ment?

The present system who tends to prevent the country practitions from raising little and above standardity, she has no inducement to devote sends time to the instruction of those pupils who are placed under his class, and who, after spending five years in comparative idleness (unless there be much dispending systemations), go to London attend dispending operations), go to London, attend the "recognized" hospitals, and there are professed to be taught their profession, while, in reality, the system in the end produces little more than the "fecs" which they are obliged to pay to the lecturers,not a harvest of knowledge to the students.

But, Sir, that part of your correspondent's letter particularly astonishes me, where he says, that if young men "were to graduate directly on coming to London, relying solely on their own exertions for getting through their examination, and without being put to any expense, being sons of farmers, tradesmen, &c., their graduation would detract from the respectability of the graduates as a body." This, in the nineteenth century, from a student of medicine and surgery! The gentleman, no doubt, is the son, or perhaps the grand-nessy, of one of the " big wigs" of the profession, or surely he would not write thus. Are men of enlightened minds to be refused the means of graduating, because, forsooth, they are sous of tradesmen and farmers? Surely the gentleman forgets bimself.

Praying that the cause of which you were so long the sole supporter, may soon trample down its great enemies, monopoly, prejudice, and self-interest, I remain, Sir, your abedient servant,

A COUNTRY APPRINTICS. Taunton, Dec. 18, 1835.

THE TUNBRIDGE-WELLS CONTRACT.

To the Editor of THE LANCEY.

Sin,-As I am the "individual" alluded to in the communication made by Mr. Way in your last week's LANCET, allow me through the same medium to state the rossons why " I alone of all the medical a objected to sign the regulations entered by those gentlemen who formed the m ing referred to. I did not, as is there a " decline from the first to act fessional brethren." On the op Way's house), perfectly wil in any arrangements whi

compensed, I was all acquainted with a nature of the resolutions passed; until the nature of the resolutions passes next meeting, when I read the included in the state of emerge two principals, an a large man the state of emerge two principals, an a have never before a ran as follows: ran as follows: - The me themselves individually not to outer into any contract with the Guardians of the Poor, for the whole or any district of a union, without the concurrence of Me Way, West, and Starling." ed mattion the Committee had an arranged mat-ters, that no one should, consistently with his honour, have anything to do with the parishes, excepting such portions of them as they, presuming upon their appointment. might be disposed to give up, being either at too great a distance, or not worthy of their notice.

When Mr. Way called upon and pressed me to attach my signature to the resolutions, which I had returned without signing, I objected to do so on the score of the third resolution, and was then told by Mr. W. (one of the Committee, that the consequences of my refusal would be exclusion from all future medical meetings, and that should I at any time require assistance in any case of emergency, it would be denied me by all the medical men in the place and neighbourhood. * * * It is further stated in a resolution passed

on the 26th of November,-"That the meeting express their deep sense of the apparent injustice which the Board of Guardians of the Tunbridge Union have committed in appointing a gentleman who had been less than four mouths in the district, to the charge of the sick poor of four parishes, which have hitherto for many years had the attention of five of the oldest practitioners in the place and neighbour-hood, who were willing, if required, to continue their services on the proposed terms."

• In reply to this, I beg to say. that although I have resided in the district only four mouths, I have, nevertheless, lived several years as assistant to one of the first practitioners, and in that situation have had the care of a part of the district. If the meeting meant, when they said, in their resolution of Nov. 25th, that the district had been formerly under the care of the oldert practitioners,- to convey the idea that the practitioners, I beg to remind them e pauper poor have been hitherto of those old practitioners; sting a minute in one of the completing in no measured at time received from an

to add that I have at have given place, and

al secure to the poor sees of patil the in all cases of egger have never before enjoyed. ently, bonour to be, Siremetre very obe HEXRY L. SOPWITE.

> lesmat-terrace, Tunbridge Wells, December 23rd, 1823. 7, Maner P

"." To prevent a long and fruitless controversy on matters in which Mr. Sorwirm himself has not been placed in the situation of defendant, we have withheld from publication some passages in his letter. They relate to questions which are not really involved in the points at issue between Mr. Sorwith and the deputation.

THE CERTIFICATE SYSTEM.

To the Editor of THE LANCET.

Sir, -As I perceive from the letter at perceive 516 of THE LANCET, signed "A STUBBET. that the writer is willing to end the controversy, I shall, to prove myself actuated by a like spirit, forbear replying to many of his assertions, and shall content myself with laying before the public the following extract from a lecture delivered by Dr Elliotson, at the London University, being the first he ever delivered at that institution, and containing a most excellent programme of what a medical education should be. I myself was a much-pleased auditor, but any of your readers who have not read it, may had it at page 64 of the volume of THE LANCET in course of publication in October 1831. The extract is as follows :-

"The mode of instruction by lectures, though by no means sufficient of itself, is in my mind of high importance. When a whole subject can be taught in a solitary course of lectures, and the exhibition of nothing is required, so that a mere delivery of statement constitutes the whole task of the professor, there can be no doubt that a good work containing all the same information might be studied in private with equal beneal. and indeed with this advantage, that it would after probably costing less, remain in the possession of the student, to be consulted by him whenever he thinks fit. But when a circle of instruction is required, when the subjects are numerous, and demand many courses of lectures and many professors, th student cannot be committed to his Without lectures he would become also a cortainty bewildered, study at irre intervals, and wander from one sale another, gathering little fruit from interest, as well as a regu as shall which are of impalculable utility.

Such are the spinious of Dr. Ellicteon on this much-disputed point, and as he is one of the most talented members of the medicalreform party, these arguments, strengthened by the authority of his name, will go much farther towards producing conviction, than any I could adduce. I therefore far the present hid farewell to this subject, which I have not undertaken without pondering well over the following lines from Horace's book "De Arte Poetica:"

Bunoffe materians vestris, qui scribitis sequem Victimos un venste dis, quid farre reconent, Quid volume houveri. Cui lecta potenter exit res, Not hoppadis, deserct hanc, nec tueldus ordo."

That I was not inadequate to the office I undertook, is, I hope apparent to all. I have endeavoured to treat upon the subject with all possible calmness and moderation, and in retiring from the field of controversy, allow me to thank you for your liberality in allotting so much space to the writings of a political opponent. I remain, Sir, your obedient servant,

A KING'S COLLEGE STUDENT OF MEDICINE AND SURGERY. December 29th, 1835.

*.º Our correspondent commits a great error in quoting the opinion of any lecturer in favour of attendance on lectures, and on the propriety of rendering that attendance imperative on students. The question, however, is not whether certain courses of lectures may be advantageously attended or not, but whether the student shall be compelled to pay for certificates of having attended those courses, and many others.

REDUCTION BY A TWIST.

To the Editor of THE LANCET.

Sia,—Although dislocated hips may generally require pulleys and polling, yet the profession should knew that they will some-sines "go in with a twist." Last evening I was quietly taking my infusion of green tea, when "our hospital man," as my waitress calls a certain personnge, announced a dislocated hip taken into Gay's, adding that Mr. "Morgan was sent for." Knowing by dire experience that Mr. "Knowing by dire experience that Mr. Knowing by dire experience that Mr. Line of the command students assembled in the theatre, and an arundal system in the special and muffled men in a gray frieze cloak, handling ropes, palleys, &c. in the srea. A small candle personal in of a junto, would conscious countenance, and cast a dim religious light on the specialed and muffled men around. I special the gray man, the puny candle, the spectators, and the circle in the cares page of Tan La From half to there quarters of an hour with every seak

1.00

however classed, the find the became different, the discovered find at last the han in gray discovered. This is naciont gentlement with a broad-infinished particular, before the thourse and enoughed. Moreovered the thourse in reduced. Mr. Morgan bids me my that he extended the limb, and it went in with a terior.

with a twist."

I demanded to inspect the patient, and found him to be a man with a thigh like a life-guardsman &, and a beily to match. "Lucky fellow!" thought I, as I entered the case in my book, "to have thy dislocation go in with a twist! Enlightened students, to get such a clear and copious clinic, by proxy, on the case!" Your obedient servant, Mr. Editor, Q.

Dec. 24th.

The Dublin Journal of Medical and Chemical Science, January 1836.

Tur fund established during the recent summer for the support of Ireland's "only Journal," is not yet, it seems, exhausted. Another number has just come out, in which the causes of the expensive failure are still more manifest than on any former occasion. The communications called "original," by custom or by courtesy, we presume, are below the usual average of such contributions even in that Journal; the reviews exhibit the ordinary mixture of partisanship; and it is enough to say, with regard to the " nolities" of the Journal, they are by Dr. Jacob. But what opportunities for observation, what records of disease, or what talent in its investigation, could bring into favour in Ireland a work which is notoriously designed to promote the local professional advantages of the party by whom it was instituted and is supported? The feelings of distrust, suspicion, and contempt, which the appearance of each number of this periodical excites in Ireland, render the work a most inaut and uncongenial periodical for the circulation of scientific matter in the profession. Even had it the command of very numerous and able communications, which it com not, its character as a meant of the personal interests and of a junto, would ever name its utility and inflaence.

In November or subsection in the current or had pages of Tas La

CARL STOCK BOOK OF THE CONTROL OF

imied through a special securities," went to some "Norna of the Pitful annications" in the Dahlin minerilany. In Head" to purchase a favourable wind; and he number of the work for January 1636, the results in both cases are much the same, we literally find a thing to a have Dr. Jacob again upon the a of the infra-orbital carffi is the deers and an- country friend. telopes. When his labours may terminate on this subject there is no possibility of stat- of that kind of composition which generally ing, as they conclude upon this occasion prevails in the articles that are read at the with a mere conjecture that these cavities tes-and coffee meetings of colleges and are intended for the secretion of a peculiar balls, had better peruse attentively the odoriferous matter, by which the animals "Observations on Diffuse Celinlar Inflamthat possess them are enabled to distin- mation, with some Remarks on Contacton." guish sex, or recognise species. In corroboration of this opinion he gives an analysis in the number. It is a prim, pretty, pedanof a large solid mass of the indurated secre- tic production, which illustrates well the tion of these cavities in the wapiti deer, con- substitution of sound for the emanations of ducted by Dr. Geoghegan, who describes sense, wherein common-place announcethis material as consisting of a " number of ments are rendered particularly original by hairs, with a quantity of cuticular delicate the dexterous collocation of words and sonflakes, the whole intimately mixed with a tences. To the merit of such an achievedark matter composed as follows: a brown- ment the author is certainly entitled, and ish, viscid, oily substance, probably contain- we award to him the palm with the atmost ing resin; a volatile odorous principle; ex- readiness, but his reflections are by some tractive, soluble in water and in alcohol; years too late to secure him any further colouring matter which adheres to the flakes credit for the article, the facts and opinions of cuticle; lactates of soda and lime; a trace out of which his paper is manufactured being of phosphate of lime; and chloride of sodium as familiar to the profession as "household in considerable quantity."

This paper is followed by three cases of malignant Diphtheritis by Mr. BEWLY. They lows, by Mr. INGLERY, Professor of Midare detailed with an attention to the record wifery in the Birmingham School of Mediof unimportant particulars which bids de-leine, who nestles here after having wanfiance to analysis. It must therefore suffice dered to and from almost every other medito say that the subjects of this dangerous cal periodical in the three kingdoms. His disease, and of Mr. Bewly's more than pa-| subject is, " Laceration of the Uterus and ternal care, were three sisters, aged, re- Vagina, with Cases." From whatever cause, spectively, five, three and a half, and two it has been generally remarked, that proyears; and that notwithstanding a diversity fessed writers on midwifery are the most of treatment adopted in the different cases, prosing and tedlous story-tellers under the and the advantage of the opinions of several sun. We do not consider the opinion amimactitioners, the disease proved fatal in sersally applicable, but yet it is almost imeach instance. Morcury was extensively possible not to suspect that the authors who employed in these cases, and nitrate of all- treat of "obstetrics" become unconsciously ver was applied to the fauces, but without infected with the garrulity of the sex upon affording relief. Mr. Bowly also informs us whom they attend. Their prolixity, at least, that he proceeded to Dublin to have the ad- is unquestionable. We remember Dr.

we the "filtres" of the Dublin sage being no miles theme more serviceable than the "potions" of his

Whoever is curious to study a specimen of Dr. CHARLES LENDRICK, the next article words."

A paper of a somewhat similar kind fol-Graves, who, from the prescrip- Hamilton's lecturing for a whole week on to the report, recommended the chlothe case of the Princese Charlotte, though to be given internally, and ap- four hundred miles separated the commences. The chloride seems to tator from the subject of his criticisms durme better effect than the ing her illness. Mr. Ingleby's paper occuyed. Mr. Bewly's ples twenty-seven pages of print, and in them is consult, the cut of by the editor just at the point where it the reader of the terminates as an introduction to some cases, while the "olden He commences on an regular a plan of divi-

sion and exhibition, of heading and "brief- words analyses, led to ing," his subject, as it me were not uside in the middle a favour the world with a cyclopedia of uside in the middle of marks;" "The Frequency of these Inja- upon this new as ries;" "At what Period of Programoy aris- for it has been very successful in my hands!" ing ;" "Laceration usual in First Labours;" All medicines, indied, possess this luck in "The Reason of this Explained;" "Lace- the hands of Dr. Graves. Any agent of ration considered under two Principal the Pharmacongola that he may fortunately Heads;" "Subdivision of the First Head;" and so on through all the grades of division, distinction, difference, and definition, that imagination can conceive.

The next paper consists of a series of observations on Fractures, by Dr. Houston. It contains a number of cases successfully treated according to a plan respecting which Dr. H. claims credit for some degree of originality. In this conceit, however, he erre, for the plan which he describes with such insufferable minuteness, differs neither in principle, nor much in detail, from that which in common use in Dublin and elscwhere. But the cases are creditably drawn up, and accompanied by some remarks on ses be well founded and correct.

and Dr. Bardsley, it appears, performed a of his volume. Perfect knowledge of any similar service for him on the present occa- branch of art can only be acquired by consion. "I was first," he says, "led to use tinuous study, and may as well be derived this medicine in considerable doses (the from a big book as a little one. The Doctor is an apostle of the heroic-dose pal charm of a "minual" is it school in the latter stages of protracted and its consequent accessib fever), on the recommendation of Dr. Bards- rality of epitomos and ley, for the purpose of preventing that state grossly imperfect, of howels which so insidiously leads to the abridged, works of siceration of Payer's glands. " After now before an in

had make apply it for this dele or later tages of fever, and gratulate myseli of the remedy, be " led to use " or patronise, presto becomes "successful." The great desideratum attained in the "flying island" will doubtless be achieved one of these days by the Doctor in the "extraction of sunbeams from cucumbers!"

New and Complete Manual of Auscultation and Percussion applied to the Diagnosis of Diseases. By M. A. RACIBORBEL, D.P.M. formerly Surgeon in the Polish Army. &c. &c. &c. Translated by William Fitzherbert, B.A., Cantab. London: Bailey and Co., 1835. Pp. 204.

spasm of the muscles in fractures of the THE work of Dr. Raciborski has acquired extremities, which may deserve attention. great popularity in France, the birthplace of However, Mr. Radley, in recommending the auscultation. In his preface, the author abandoment of splints, showed that an im- says, "The present publication is a mesus portant part of his plan consisted in the on asscultation and percussion; that is, a prevention, or in affording the means of the portable book. All elementary books should speedy allayment, of spasms of the muscles be portable; not merely because the form in cases of fracture of the long bones, as one is more convenient, but also because the result of the disuse of splints. Much of the domains of a science being once well deterlabour of Dr. Houston is expended uselessly, mined, and reduced within proper limits, therefore, if Mr. Radiey's views and premi- those limits are always within bounds!" We have ever considered that knowledge should Dr. Graves has discovered another form be carried in the head, or remain in the of disease for which his " sugar of lead " library, and not occupy a place in the purket is a "sovereign remedy." The readers of of a medical man. Consequently, to "radethe Journals are, of course, well aware of mecums," and "manuals," we have usually the specific virtues of this medicine in shown ourselves to be inimical, as invencholera, through the writings of Dr. Graves. I tions which are only designed to relieve the One of the medical attendants of the cho-| occasional embarrassments of ignorance. lers hospitals in Dublin put him on the We do not therefore appreciate the value scent of that valuable remedy in cholers, which our author sets upon the portubility

Sutline of the su voted, and in physical eclerics such as that knowledge of the percussive responses in of medicine, when much personal cheerva-tion is implied, and a compendition, may in its proper place provides an adequate mutatitute for a more voluminous work. Manuals may be correct, though they cannot be full. A scholar's globe may be perfectly accurate, though it can present but few details of the face of the earth, and the stadent will gain much knowledge of geography by its use. Indispensable qualities in an elementary work are, correctness of arrangement, clearness of principles, and strikingly illustrative details. We will try the volume before us by these tests.

The science of auscultation, on its first introduction into this kingdom, experienced the fate of all important discoveries. It was received with almost universal ridi cule; but year after year the number of its disciples has increased, and, being dispersed throughout the various provinces of the empire, have propagated its doctrines so widely, that there are not now twenty men, - unless they be pure physicians and Pellows of the College,-who do not use the stethoscope in forming their diagnosis in supposed affections of the thoracic viscers.

In reply to the general demand for guides on this subject, almost the only work we have been able to mention with approbation, is the translation of Lacunce's work by Dr. Forbes, the cost of which is expensive. There are many persons, therefore, who, without our attempting to draw for them a comparison between the two works, will be glad to meet with the translation made by Mr. Pitzherbert, who states that the chief merits of the volume consist in the new matter which it contains, and the clearness with which the author has arranged all that is yet known on auscultaion and percussion. The author's preface we condemn, as full of erroneous dogmas. The translator should excise it in the next dition. The introduction forms an incerious essay on the utility of auscultation ne. The work itself is divided 1. The explanation of difmined by percussion and auss of particular diseases. ences, fully and satisall the regions of

to added they are the pricty of this accompanion is obvious. the healthy state, must precede a knowledge of their morbid deviations. Then comes a judicious essay on auscultation in general. In describing the normal respiratory sound, M. Raciborski controverts an opinion of Dr. Bean as to its physical causes :-

> " The friction of the air against the parietes of the bronchi and vesicles, appears to us, as it did to Laennec, the suppose its formation. According to Dr. Bean, the the resonance, in the whole colum inspired and respired, of the sound resulting from the pressure of this column against the soft palate and adjoining parts.' When the gutteral noise is suspended, says Dr. Bean, 'the trachesi and vesicular noises no longer exist, the respiration, although silent, takes place as usual, and if you did not feel under the ears the thoracic parietes retire and advance alternately, you might believe the individual did not breathe.' We object to this, that if there were no other signs of respiration but those afforded by the depression and elevation of the thorax, it is very probable that respiration did not take place, and that if it occurred without noise, it was because the air cid not arrive in suff cient quantity, nor rapidly enough to produce it; and that the reasons for which the tracheal and vesicular sounds did not exist, are precisely those which would hinder the formation of the guttural sound. As to our own experience, it has furnished us with results directly contrary to those of Dr. Bean. Patients required to breathe on a sudden, and therefore making more noise in the traches, have the respiration very slightly remarkable; on the other hand, the respiratory murmur, although feeble, has been distinctly heard in persons with whom the soft palate made no noise. But to meet with these cases, you must choose persons with whom the expansion of the lungs is habitually marked, or whose respiration is puccile. Although Dr. Bean pretends to have heard normal respiration, by blowing through a tube of paper against the soft palate of another person who held his breath, we have tried the same experiments several times, without producing analogous results. Most commonly we have heard nothing in the chest, but sometimes an acho of the noise produced in the throat; echo, however, had no similarity to the murmur of respiration."

M. Raciborski's remarks on the asseults. s evidence afforded by these tion of the respiration and the voice, sally with our own conclusions on the subject We quote the following moroscur relati to the more interesting assemb

"When a cavern bursts in the cavity of of the cavity. These was, by falling upon the pleurs, this cavity contains a collection of liquids proceeding from the broken on analogue (similar) to the produced by the verm, or afterwards secreted by the inflamed of liquid. In this case asscultation will feel of adapt of wasping and contain containing the cavity of the feeling of liquid. This quently dotted in the cheek, a particular results of the feeling of t quently detect in the chest, a particular noise, called by Laennec tintental matel-tique. The father of auscultation attributed the fintement metallique to the vibration of the air at the surface of the liquid, when the latter is agitated by the respiration, the voice, or coughing. Dance brings forward the following opinion with regard to the formation of this noise. When the level of the liquid, contained in the cavity of the plears, is superior to the orifice of the cavern, the air which enters at each inspiration into the lungs, rushes into the cavity of the pleurs, rises through the liquid in the shape of a bubble, by reason of its specific gravity being less, and arrives at the sur-face, where the bubble breaks, and produces the tintement metallique,

This observation had passed unnoticed-It is only lately that Dr. Bean, without being aware of the coincidence, happened to suggest the same ides, which he explained and verified by numerous experiments.

"The tintement metallique, for which Dr. Bean has substituted the term tintement bullaire, may, according to that writer, be equally well heard during expiration, coughing, talking, and expectoration. In fact, he observes, although in these acts the air be expired instead of inspired, still in the majority of cases of the presence of caverns, the surrounding part of the lungs is hardened, and does not collapse during expiration, the air expelled from the rest of the lungs rushes from the traches into the open bronchi, and from thence acts as air in-spired. Most generally this noise follows each act of respiration; sometimes, however, it takes place slowly, which seems to arise from the circumstance, that the bubbles before bursting may stop some time at the surface of the liquid.

"According to Dr. Bean, the same noise is sometimes heard in large caverns, filled in a great measure with liquid, and in hysumothorax, without any communication with the respiratory passages. But in these two circumstances, it is difficult to enceive the formation and supture of bubbles, and we must admit, in certain cases of tintement metallique, the simple explanation of this sound given by Lacanec in the case pared to the plaint of a gewhen it accompanies the repture of caverns name of topphonic.

into the cavity of the pleura.

"It happens frequently with patients in Tegeshonic is in uncertain these conditions, that when they change a tainly not always easy? I horizontal for an upright posture, drops of liquid, adhering to the plengs, or retained by hame the distinguished. uid, adhering to the pieura, or retained by may be disting se membrance, become separated from the "When the mem of liquid, which falls to the inferior part over a meet of

"The cases in which the fintement metal-Mose is observed, systems another phenomenon. Whenever the cavity of the pleura, or a higher payers in the lungs, contains liquids and gives, you will hear, when you shake the thorax, the fluctuation of the liquid; this is called by Hippocrates successions. sion, and since his time, has been known as Hippocratic succession. You may imitate this phenomenon by shaking a decanter containing a small quantity of liquid."pp. 82, 83, 84.

The following paragraphs relate to the abnormal resonance of the voice through the

parietes of the chest.

"The resonance of the voice is very distinct in the regions where the bronchi are superficial, but less so in those regions which correspond to laminæ of vesicles, on account of the numerous divisions experienced by the undulations of sound in arriving at the extreme ramifications of the bronchi.

"I. Hence, if the cavities of the vesicles be destroyed by any cause whatever, the voice will resound in the bronchi corresponding to the obliterated vesicles, and that in proportion to the greater or less extent of the obliteration. This abnormal resonance of the voice through the parietes of the chest, is called voix bronchique or bronchophonie. The impenetrability of the cavities of the vesicles, whether it result from the presence of tubercles, or from the concretion of the sero-sanguineous matter secreted by the parietes of the vesicles in the second stage of pneumonia, will therefore occasion this phenomenon.

"2. The same phenomenon is observable when the impenetrability of the vesicles is produced by an effusion in the cavity of the plcura. But if in this case the liquid be in too small a quantity to compress entirely the lamina of vesicles, and only causes a closer application of the pleurs to the parietes of the vesicles, so as to form therewith a mambrane more or less tense, applied to the extremities of the respiratory passages, the resonance of the voice will, in this case, offer a very remarkable character. It is a broken interrupted sound, like the sound of a person who stutters. It he

"According to certain

wals the case in plantal dilatation of a broad-chus, or in an exceptation of the lungs, con-sequent upon tablercles, the resonance of the voice in those parts is such, that the pa-tient seems to talk in the ear of the examiner, especially if the latter amountate with the stethoscope. This is pectorilogue, which is complete when the cavern is superficial, and adheres by its sides to the costal pleura, and when its angles are indurated; but it will be more diffuse, and may be heard over several different points of the chest, when it indicates a considerable dilatation of the bronchi. The hand applied over the arietes of the thorax during bronchophonic feels the parietal vibrations as in a normal condition. This phenomenon is no longer met with when the lungs are separated from the thoracic parietes by a certain quantity of liquid.'

The division of the volume which is devoted to the organ concerned in the circulation of the blood, is amongst the best in the work; it contains much original information, communicated with great perspiculty; but we shall quote no more, lest, without sufficient justification, we lay ourselves open to the charge, after treating the literary product in our critical alembic, of leaving only the caput mortuum for the benefit of the author.

The second part of the book is appropriated to the mode of applying auscultation principles to the diagnosis of particular diseases, and these are arranged into affections of the abdomen and pelvis, of the organs of respiration, and of the organs of circulation. Upon the whole, we can, in strict justice. recommend this "compendium" as a faithful and intelligent guide to all those who are desirous of learning the art of diagnosis by auscultation.

The Cyclepadia of Anatomy and Physiology Edited by R. B. Tonn, M.B. London: Sherwood.

THE publishers have now issued a sufficient portion of this work to enable us to form a better estimate of its claims to support, then when it last received a notice at ands. Parts 1, 2, 3, and 4, are before think that they afford materials perrect general view of the the undertaking. On ex-

omission: but as the arrangement of tonics is alphabetical, the deficiencies may be rectified in the future Parts, and we consider it probable that the Cyclopedia of Anatomy will ultimately supply an acknowledged histus in the literature of Great Britain.

The articles which have already appeared are for the most part well treated,-the natural result of a good selection of authors, in the list of whom, indeed, are the names of very many gentlemen of whom we may say, without any incautious respect for the authority of mere fame, that their engagement on the work affords a pledge that it will contain a large number of very excellent encyclopedic essays. The announcement of some of the "minora sidera" certainly excited a smile, and some surprise, perhaps. Their light, however, though simply twinkling, and not brilliant, may yet prove useful. As the Scotch say, "Many mickels make a muckle."

The nature and variety of the subjects embraced in the plan of the Cyclopædia are well known through the advertisements. The plan combines Physiology and Anatomy (Human and Comparative), with the essentials of Animal Chemistry.

With regard to the details of such a work, it is not in our power to give any useful account of them here. In speaking of the execution of the articles, we may particularly allude, for their excellence, to those on "Absorption," "Age," "Arachuida," "Aves." " Blood." Let us, however, take the opportunity of suggesting, that, as the work will necessarily be an expensive one. it is incumbent on the Editor to interpose his authority for the prevention of every circumstance that is likely to enhance its price without increasing its value. It should be the peremptory duty of the conductor to revise all the articles, with a view to repress diffuseness of style and redundancy of quotation. The exercise of a capacity to review the facts is not sufficient. The labours of literature, in a redacteur, comprise something more. The connection, also, which exists between the subjects of Zoology and Comparative Anatomy should not be broken, but to decide upon its extent the judgment and official powers of the Editor should be called into requisition, or the evil we have menhave schooled for explanationed may become a just source of comtioned may become a just source of e good, and afford most material sastistance in also of many intrinse per joyeve the author's pulsars

In the desertment of Comparative Anatomy Dr. Town possesses the assistance of the science-Professor GRANT and Mr. Owner, and every fresh record of the exertions of these able and learned philosophers adds to the gratification we derive from baving been the hamble means of blending this branch of stady in the department of medical education in England. Comparative Austoney was known to but few as an important division of medical learning until the brilliant course of Professor GRANT obtained universal diffusion in the profession in the pages of Tun LANCEY. The impression of its value and interest is now continually being testified by the writers, and in the schools devoted to our art. Dr. GRANT's "Lectures" constituted almost the only comprehensive and accessihis source of information on this subject in the English language. Now the parent has a numerous progeny. The "lectures" of Dr. GRANT, however, will for years stand unique for arrangement and details. But comparative Anatomy has now many labourers in the field, whose fruit is engerly sought, and duly devoured.

Compandium of the Ligaments (illustrated by Woodcuts), and the various Cartilages, Bynovial Membranes, Bursa Mucora, and Bones of the Joints; the Dislocations, Fractures, Physiology, and Pathology. By A. M'NAB, M.R.C.S., London : Benshaw. 1835.

Two work is a synopsis of the principal facts relating to the anatomy, physiology, and pathology of the joints. The author remarks that the study of medicine has been facilitated by condensing the writings of good authors, thus affording to all, the means of learning their contents at a cheap rate. The fibrons seructures especially, which are in immediate connection with the joints, are in general described in voluminous works, d these descriptions are dispersed through different chapters. Mr. M'Nab does not profess to present us with any thing novel, but he has collected the facts with industry, and arranged their with judgment.

Respecting the wardcuts, the less that is said of their execution the better. They How then con the

other respects the volume will prove morful details are faithto the dissense, because it two chief inhousers in that interesting ful. To the established presentations, too, it may serve as a useful " farmer."

THE LANCET.

84

London, Saturday, January 9, 1836.

No apology can be necessary for resuming, after a very brief interval of time, the question of founding a national University in this metropolis. We must regret appearing to be tedious on this or on any other subject, but we must hope that the objects which it is sought to accomplish by establishing the new institution, are of so important a character, and must, in their resulta, be attended with so many mighty consequences to the country, that too clear a view of the whole of the circumstances involved in the consideration of the proposed scheme, cannot be taken in the present early stage of the inquiry. If the members of the Government proceed with any degree of precipilately in this matter, they will erect a monument to perpetuate their own folly. In giving the executive Government credit for the best intentions towards the objects of science and the interests of the country. we cannot refrain from reminding them that something more than mere evidence of purity of motives is required in founding a great national institution, which is to be devoted to the culture of the powers of the human mind.

In contemplating the objects for which the University is to be called into an the principle on which it should. and governed, is not less as intellect of the philauthe sopher, then is the sun. senses of the andest.

the state of the

nervenier the on recognised schools, or institutions. The ratification, by moral CHARTER, of so monstrous a proposal, would andoubtedly tend to bring the Ministers of the Crown into contempt, because it would evidently have a tendency to make them appear as the abottors of monopolies, or of signalizing them as persons of too contracted an intellect to frame a scheme of University Government which should be national in its principles, and national in all its arrangements and functions. There is one sign which ought to warn them of the dangerous ground on which they now stand. We allude, necessarity, to the approval of the scheme by nearly the whole tribe of medical corruptionists and monopolists. Why have those persons given to it their sanction? Because they are well aware that if the University be founded strictly on the plan of the CHANCELLOR of the Excusquen, that the result will be a failure. These persons have sufficient cunning to know that if an University be not rich in its endowments, it cannot receive general support upon any other ground than on the solidity and extent of its reputation. In the instance before us there are NO ENDOWMENTS, and, unless appuration be first secured, if is not likely that any endowment will oppositly exist in the new University. Upon these views the calculations of the entire gang of corruptionists and monopolists are founded. In the infancy, at the sary entect, of the institution, unless the University take a high, an elevated position, in the opinion of the enlightened portion of the public, the candidates for the degrees will scarcely outsumber the memthe examining council. And we ask, That can be the extent of its aurusebume be only oriculated to and syour, to the odious of ""recognising" this been so long

position be sanctioned, or even tolerated, of old medical conscirutions? This question resion of that principle, to should be answered, deliberately answered, the functions of houndaries of two or three by the Ministers of the Crown, before they proceed with their project one step ferther. We repeat, that precipitancy on this occasion, will plunge them into an occasi of troubles and difficulties. How often does it happen that in discussing the details of a measure of referm, the principles which called that measure into existence, are wither wholly misrepresented, or are passed over in silence by the disputants. Who can have forgotten the reasons which were publicly proclaimed for founding University Callegs, viz., that the youth of the motropolis might enjoy the benefit of an University education; and, secondly, the establishment of an institution in which University henours might be acquired by all persons, without reference to religious creeds and distinctions? The objects, therefore, and the means of securing them, were resolvable into one general principle, of a wholly naliere we observed that tional character. the vile and sordid practice of "recognising" particular establishments, to the exclusion of others, in awarding University honours, was scorned and repudiated, not indeed so much in words as by the very principle which conferred upon the new institution life, energy, and strength. The partialities of Oxford and Cambridge had long been denounced, because it was generally falt, by the more enlightened portion of the empire, that in those Universities, bigotry and religious prejudice had often but too much share in making candidates successful in their applications for degrees. The "recognition" in those institutions was not of a favourable description, maless there was a " subscription " to cortain andcles of belief,-an exaction of too insolvent and odious a character to be any longer endured by the members of a well-informed community. What then, are we to have in the new University of London ? Not. indeed, the demand of a signature to "curtain articles of belief,"-not a "minimurles

most butsful. Both demands are equally the buildings, and the general arrangements changions to the cultivation and the free of which appear to be capable of accomprogress of the human intellect. The stig- plishing the objects which are specified in the brand, of partiality, is manifest in the University curriculum, then it must be hoth cases, and although some excess might at once confessed that the new institution is he found in the instances of Oxford and not dedicated to the knowledge, but to the Combridge, for an adherence to a line of wealth of the nation. It would be another circumstances of the period when it was of oosn. Have the members of the medifirst suggested and set in motion, yet there cal profession forgotten the anathemas which can be no just ground whatever, while esta- have for so many years been fulminated blishing an University in this empire, in the against the President, the Censors, and the minuterath century, for rendering wealth, or, Fellows, of the London College of Physimore correctly speaking, the non-aristence of cians? And what has been the offence wealth, an obstacle, as gross and obstructive with reference to the procuration of Univerity honours, as was that of religious intolerance in the fifteenth century. We again ask, "What is it that the Ministers design to reward?" and in answering the question we trust that the real sentiments of the individuals will not be disguised by a liberal display of plausible words. If the portals of the new University be thrown open to candidies, without any regard to the places of their education, and no other introduction to the examination be required than is to he found in the testimonials of an unimpeachable moral character, the University of London would at once far excel, in reputation and utility, every other University in Europe. But if Ministers, in setting this metional institution in motion, require that it shall be reached only through two or three "recognised" TOLL GATES, representing only new colleges, or old corporation schools, it will but exist, as we have already said, as an unhappy evidence of the absence of angacity and foresight in the minds of its founders. There can be no mistake as to the result. The gift of prowherey is not required in this instance to the country, institu

ticular cross,—but the eri- foretell the state of the festire, for in the of a miles pitter of money. In the one very arrangements which have streamy been case the Dangon or Ricorn's is to be pro- suggested, there are seen the elements of tiated; in the other, the DEMON of disunion and decay. If the "recognitions" of the senate of the new University are to be grealy say which Dunson is the confined to particular schools,—the funds, inclubich may have been justified by the costly and pernicious sacrifice to the nower committed by those parties, - the one offence which has obtained for them either the hatred or the contempt of every liberalminded physician or surgeon in this kingdom? It was simply this,-that they refused to examine any condidates for the Fellowship of their College who had not obtained degrees in medicine at Oxford or Cambridge. Really this is a striking fact. 'It was owing to the existence of this disgraceful partiality that the recently-established University College received the warm and generous support of so many enlightened medical practitioners. The Fellows of the disgraced College of Physicians have contended, and still contend, that the charter has ever empowered them to make exceptions in favour of graduates of our two ancient Universities. What, then, are we, in founding a new institution, to create other exceptions, which must prove as obnoxious and pernicions as those which are already in existence? The Fellows of the College of Physics their conduct have utterie only the respectability, the their institution. ously and invited

Insolently and lamphtily to every condidate | juga all distinctions, partialities, and except who had failed to supend-uselessly expend tions, with ref hundreds of pounds starling at Oxford or Cambridge, that College would at this moment have been taking the lead of every other medical institution in Europe, in all matters relating to the interesting and important science of medicine. From acting, however, in the odious system of restriction, partiality, and monopoly, the College of Physicians carries with it not the slightest degree of influence with any ten individuals belonging to the least-informed members of the profession. Every man, therefore, who prefers honesty of purpose and comprehensiveness of principle rather than intrigue, monopoly, and narrow-mindedness, will learn with a sense of loathing, if not with a feeling of horror, that our present liberal Ministry have, even for a moment, entertained the idea of framing a charter, in which, under the authority of the sign-manual of the King, there should be constructed, in the year 1836, some new arrangements for carryon, with increased vigour, the old exploded system of favouritism, recognition, and monopoly.

" But," it will be remarked, "if distinc-" tions be made in favour of University Cul-" lege, King's College, and two or three other " catablishments, will not the privileges thus "conferred, prove of great advantage by " raising the standard of education in those " institutions?"

If this observation be well founded, are the utterers of it to limit the general tendency of its application? If the standard of education is to be raised in two establishments, why not in six, and if in six, why not in all that the country can produce? This would be a real national benefit. Then, indeed, a stimulus would be given to the a of literature and a knowledge which the existing monopolies ngossible to destroy, or even the charter, there-Ministry to ab-Water tar Salt . in

rence to Universities, or -many valuable years of his life, and many scholastic establishments, of whatever description. At the same time we desire of them to insist that the senate of the new University shall require from the candidates for the degrees, such proofs, furnished craffy and in writing, of an extent of qualification which shall entitle the candidate to receive the honour which he is auxious to elitain,the University distinction which they are empowered to award. In such a scheme no sanction will be given to " curricula" for "the schools." The examination alone will, in such cases, necessarily determine. in the best and most effective manner, those subjects of study which ought to the aresented by the professors to the attention of the student. The object to be attained, will be the natural and rational stimular of the pupil, and the subjects to be included in the public examination before the senate, will necessarily determine what shall be the qualifications, and what shall be the duties, of the professors and lecturers in the chief scholastic establishments of the empire:

> Under some such scheme as this, the new institution would rise at once into beauty and grandeur, as an offering rendered to THE GENIUS OF THE NATION. If, however, it is to be made a thing of " shreds and patches," of jumbles and exceptions, distinctions and partialities, it will be called into action under the influence of an unworthy spirit, and as such, it will remain an object of perpetual reproach to its well-intentioned but deluded founders.

> Since the foregoing article was written, a report has reached us which is in no repect curious, except for the malignity of the falsehood on which it is based.

> It is stated that the CHANCELLOR of the Excusouss, after having received deputations from those two filthy dens of menopoly and corruption, the College of Physicians, and the College of Surgeons, has referred the arrangement of the Valversity The talk of participation

to the talk or bearing and it goods

constion, so far as the medical department foolish, Separas It is is consorted, to Dr. Characters, Dr. Hot- mischievers, to require any person who is LAND, and Sir RENJAMIN BRODIE. This is not thus qualified, to execute the important the report. This is the felsehood. If Mr. functions mikich Coroners, at the great Sixture Ries could have given but why majority of inquests, are necessarily called should we say if! The thing is impossible. Still, we say, if Mr. Ricz have listened in silence to such a proposition, he ought not to escape without being reminded of what was said by himself in the House of Commons, when the Lords examined the Town Clarks of the old Municipal Corporations, as to what had been the result of the old eye-They obvious reasons, will resort to every species of stratagem, and every manosuvre, in order to delay the settlement of the University question, is sufficiently plain to the heart discerning individual, but that Mr. Spains Rice or his colleagues will fail into any one of the many snares which are set for him and them, by the wily enemies of a liberal system of medical education and national improvement, is a minfortune which, we believe, cannot occur. It may be well, however, to tell the CHANCELLOR of the Excureves, that no two corporations in the United Kingdom of Great Britain, are so thoroughly, so heartily, detested by, probibly, at least, fifteen thousand medical practitioners, as are the London College of Phynicians and the London College of Surgeons. If, therefore, any liberal-minded legislator turn his attention towards these established ments, it must be in the hope of avoiding every thing that is sanctioned or practised therein to imitate, nothing.

WE have observed with much satisfaction. that the new Town Councils have in several instances been addressed by medical genflemen, who have been solicitize the appointment of Coroner for the borough. If this office is to be snything but a nullity, it must be alled by a gentleman who has been particularly for a per made signal to the discharge of its duties by for so long a. a medical education. It is worse than dolenge,

upon to discharge.

THE concours for the chair of clinical surgery, now vacant in the Faculty of Medicine of Paris, commenced on the 2nd of this month. The candidates were, MM. SAN-SON, GUERDON, BERARD jun., LEPELLE-TIER, and BLANDIN, who all competed last year in the concours, which we reported so fully at the time. In addition to these gentlemen, we find only three new candidates, MM. JOHERT DE LAMBALLE, SEDILLOT, and LAUGIER. M. LISTRANC, convinced of the impossibility of being received amongst a body to which he has always been hostile, has retired from the field; although, curiously enough, he has since been sent as one of the four judges, by the Academy of Medicine.

THE concours, in Paris, for the anatomical chair, will not open before the 14th of April next.

Some months ago, Moses-Monte-Sanc-To was elected a corresponding member of the Royal Academy of Medicina, Paris. At the last sitting of the Academy, M. GUENEAU announced that M. Monte-Sancro was unable to avail himself of the honour conferred upon him, as the Austrian Government refused their authorization to accept Prench degrees.

INTERCEPTED LETTER

"DEAR DR. MACHICHARL,-You must spologize to my numerous friends who have been making anxious inquiries about me and all my concerns, and you must explain to all of them how impossible it is for me to resume at once my many arduous functions diately on my arrival in this labyris can scarcely imagine the effect a change of subjects for con of objects around me, and I to get into habits

life. Businarastu, ithose gigantic intellect of two to be the whole business of she affabled him to combinate mankind in all its relations, made in observation, when on his flight from litude, which has been often brought to my recallection, and which is particularly applicable to myielf at the present moment. Narouzou, on his strival at Wilns, had taken up his residence for the night at the house of the mayor of that city, and taken up his residence for the night at the house of the mayor of that city, and which I his while a line which I him the sine which I had the s and whilst walking about the room, in sullen meditation, began talking to himself, -for the Emperor was accustomed to put questions to himself and then reply to them. the midst of the soliloguy he was heard to exclaim, "Good Heaven! how strange! There is but one step from the sublime to the ridiculous!" Now, far be it from me to compare myself, in many respects, with the great Navolzon, but I cannot help per-ceiving the accuracy of his observation to be applicable to myself, under present circumutances. To tell you the truth, my good friend, my position as a country squire, living richly in my own domains, never being visible beyond my own territory, unless in a splendid carriage, with four prancing horses, -this sublime state, contrasted with my avocations here, makes me feel that I am, at this moment, assuredly in a ridiculous plight, being every instant liable to be called to Kensington, or some other such place, to fect the pulse of a princess, and to look at her tongue, and then, perhaps, directly after, being obliged to address myself to her French maid, Mademoiselle Numertle, eyes is bonte, ma chere amie, de montrer le pot de chambre." This, however, as you know, is only one of the many disagreeable things that the pure physician must submit to, in order to impress on his patient a sense of the superior knowledge which he possesses of all internal diseases.

"While alluding to NAPOLEON, there is a point to which I cannot but refer on this occasion, as one wherein I possess an acknowledged superiority over the late Emperor; I mean in my classical learning. His biographers tell us, that he was extremely ignorant of the dead languages, and that when he was at Brienne, receiving his proliminary education, such was his backwardness in acquiring a knowledge of Greek and Latin, that he procured with difficulty admission into the Roble Politecksigns. In future life he often alluded to this, and used to quote a passage from Locas on Education, wherein that profound philosopher has, incautiously for the inte-rustrum our Universities, used these words. I gonsider (says Locks) what ado is a little Greek and Latin, how

FORESCHOOL SON STREET, STREET,

tion. How size is it possible that a cl

"You must not suppose, my dear friend, that the time which I have spent in the country has been altogether lost, or that it has been uselessly employed. It is under circumstances of rural retirement, that I have experienced the extended hencilta of that strict moral and virtuous course of education which I received at Oxford, and that I have been able also to reflect on the immoral and licentious habits so emerally practised in my time by the studiests of the University of Edinbergh. The idea thank felicity, observes an enlightened with a so congenial with the human mind, that cannot wonder to find it cherished at all the hurry and dissipation of public life, especially if we consider that such a life is often attended with labour and sorrow, with often attended with labour and manage weariness and disappointment. When we weariness and disappointment. look abroad into the world, we see fixed down to his desk, or stationed behind his counter, and from morning to night busily engaged in arranging his accounts, or dealing out his commodities, with scarcely sufficient intervals for the refreshment or support of nature. We see another, sepiring after some place of honour or of profit, wrapt with suspense in the pursuit, frequently baffled in his object, and if at length successful, dissatisfied with the acquirsition. While a third, whose situation may appear more enviable, who,-alike exempt from the toils of the city and the ambilion of the court, has no other concern than, to enjoy the amusements and pleasures of li -is often found a miserable prey to chagrin, from the caprices and jealousies which are sure to infect the brightest circles of gayety and fashion. In all these cases the mind naturally looks forward to the country, to the independence of some rural retreat, the peaceful labours of husbandry, the diver-sions of the field, or the scenery of nature, for purer sources of anjoyment. How true is the language of Thouson :-

Rottrement, reral quiet, trionitable, books, Ease and atternate labous, useful life, Progressive virtue, and approving Meaven!

" Besides participating in the amusements and recreations of a country squire, I ha occasionally employed myself in readi those classic authors from whom I deriv such delight when at college, - a source of the spent in it, and what a noise incidentual pleasure which is one our approximation that the parents of the shooting with the only indiced, except he who has partaken of it. I have not troubled my head much, as you may have not the partaken of it. I have not work on the only indiced, excepting Mr. Wanner's work on blood-letting, I have not obtained much pleasure from anglother Riemary-gardension, that we shall share the property of the property o much more comprehensive manner than he could have done had he not possessed a thorough knowledge of physic. It is there where general practitioners have advantages over the perer grades. Indeed, I am free to confees, and it matters not for me, at my time of life, to let it be generally known, hilation would be disastrous to him, had be that Limes often had eccasion deeply to is not something else to look to. I rejoice to entany ignorance of surgery, and I shall take near favourable opportunity of pointing out to the sounger fellows how seriously their worldly interests are affected by their ignorance of that art, and the bad habit most of them have of affecting to sneer at everything like a knowledge of those dis-cases which require surgical aid.

"New that I am once more amongst my professional brethren, it behoves me to derote all the energies of my mind to promote the good of our great cause, and as I can report but few patients at this season of he year, I shall not fail to pender well on College matters. The granting of licenses will have no effect. CHAMBERS is too lofty must not be delayed a day, and you may and rough, and wants that susviler in mode order Dr. Asuwall to come first before us, on trial. The very idea of these German tors makes me smile. But we must treat the matter gravely. So long accustomed as we had been to license the Scotch no one but Madame V,, whose case, I am dubs, I never thought anything about them, and certainly we had some first-rate men amongst them, but to have to do with a squad of Dutchmen is really quite ridicues; and if it were anyhow possible to keep the machine in Pall-Mall going without granting their admission, we should not run the risk of placing within our enemy's reach so powerful an engine of satire. I always remember, with regret, the laugh against us for inducing the good ARCHRISHOP to give CHARLES CLARER & degree. But as things are, we must fearlessly adopt extreme mea-

"Next to the 'ways and means,' as my dear friend Sir ROBERT PREL calls them, comes the Metropolitan University. Here we must strain every nerve. As I told you higher. I have never been committed by any manufact of the Government, directly or indirectly, as which, however, I am not sured, considering that I think and act so specially as they must know how cleverly generally as they must know how cleverly generated the Peel-Wellington Adminitration from making any changes in Pali-with vention, with true facilities of the many changes in Pali-with vention, with the limit arold being awareped, and I do anger Walker, in the limit arold being awareped, and I do anger with the limit arold being awareped, and I do anger with the limit arold being awareped, and I do anger with the limit arold being awareped, and I do anger with the limit arold being awareped.

will throw his friends at Lincoln's-Inn overboard, and accept office. He must be watched closely. Neither would I trust Sir ASTLEY, notwithstanding all he says, if the cortificate-system he wholly exploded. He flourished and lived under it, and its annilearn from Lady BRODIE, that Sir Aurt.EY has taken a serious furn latterly. It is such a revelution, that I can only hope it is true. ado not expect that we shall get much good from the negotiations of HOLLAND and CHAMBERS. HOLLAND having endeavoured, after being a Whig all his life, to cut a favour with the Tories, when every rational man must have believed that they would hold office for ever, and having, now that the Whigs are in power once more, again become a Whig, I have no faith in him. His opinions will not be hearkened to; even the sweetness and simplicity of his manners which gives me so much influence over the human mind. Let Turren, Nussey, Tra-GART, PULLER, and all the top men in that line, know of my arrival. I have yet seen happy to say, I have hit exactly. I discovered that she has an affection of the heart, and I told her that the system of treatment which I would adopt was mild, and unattended with pain or danger, and that a ---- might also be required to perform a redical cure. Write a paragraph for the Sunday Times, announcing my having been consulted on this interesting case, and believe me always yours,

"Curson-street, Dec. 1835,"

ADMINISTRATION OF CREOSOTE.

AND SOME OTHER MEDICINES, NOT ALWAYS REMEDIALLY EUCCHONUL

To the Editor of THE L.

lately-sublished clinique lacture delivered by DR Effiction. The dishe recorded by Dr. Effictions are dive, in Dr. Walker admits, and the case now inshed by Dr. W. is but one case; I think, therefore, that he could to have carried his observations fact By reference to ether clinical lactures of Dr. Ellictson, Dr. Walker would have discovered that Dr. E. has had cases in which crecopate has failed to relieve gastrodynia and vomiting, as well as Dr. Walker, and that Dr. Elliotson, therefore, does not anticipate invariable success in the use of that medicine. There are many circumstances which materially modify the action of medicines, which must be taken into account. Thus, there was a case in our hospital last week, in which prussic acid was given to allay gastrodynia and vomiting; but each dose of the medicine increased the vomiting; but, on looking to the mode of exhibition, there was discovered the cause. The patient was taking the hydrocyanic acid in peppermint water, and that made him vomit. Peppermint is known to have this effect with many people. On substituting cinnamon water for aq. menth, pip., the medicine immediately had the desired effect, and she was discharged cured in a few days. Now Dr. Walker administered the creesote in his case in mucilage, and how do we know but that it was the mucilage, and not the creosote, that caused the vomiting? Nay, there is now a patient in our hospital who could not retain on his stomach a dose of a mucilaginous mixture which she was taking for a cough, although she did not vomit on taking other things. Again, ascribe the effects produced to the creosote, and even idiosyncrasy might play its part. There are those on whom medicines of various sorts have very unusual effects. Thus, a patient in our hospital last month, had her gume become tender whenever she left off morcury, and they got well again as soon as the resumed it.

We can only account for such anomalous cases by regarding them as the result of idiosyncrasy, so that by that same cause it will and does happen, that with one patient creosots will answer best, with another opium, with a third prussic acid, and so on. Accordingly Dr. Elliotson does not employ creosote riminately, as might be inferred from Dr. W.'s letter, or from the parusal probably of one clinical lecture, but at this moment he is giving to one patient prussic acid, to another cruosote, and to another stramonium, to allay pain in the stomach and vomiting. In the case in which he is giving stramonium; are the succeeded for a while, and afterpnaveiling, and now stramorelief. In another case prussic gether to rollers vomiting, Anti-Ame of crecente

creaming and appropriate many cases it has proved beneficial after the fallaxe of everything else; but then it sums be administrated in different ways, according to circumstances; and as to Dr. Elifesten's "plan" being "two deeps in muclings and water every six hours," that is not at all the enio, for he mould given it in plain water, and sometimes is obliged to impresse the deep do twenty drops, "or more, said that not only every six, but every four, or every those hours.

I would not have written in angu-Dr. Walker's letter had he not com an error which is likely to do mad chief, and is too often repeated, -via of drawing general conclusions from it facts. In another medical period week ago, Dr. Ellistson is censured. indiscriminate use of iodine, as the employed it as a paracen—as an unityer remedy for all diseases, which no unit w knows anything of that gentleman's prec-tice can for a moment assert. It may not be amiss to state here, what is not generally known; viz., that if cressete be not carefully parified, it contains on to substance, which passes over with it in the distillation. This fact was unknown to the chemist who first prepared creases; and, consequently, much of the creases which he at first sent into the market, actually contained a most powerfully ematic substance. Hence, perhaps, in part, have arisen the discrepancies with regard to its virtues as an anti-emetic. I am, Sir, yours pespectfully,

A STUDENT AT THE NORTH-

Dec. 22, 1835,

e.º We object to opening our columns to the controversy which would arise from the publication of some passages and remarks which we have omitted—but without at all interfering with his legitimate object.—from the letter of our correspondent. We have endeavoured to limit his statements to facts which may here usefully obtain insertion.

MEDICAL MAGNETISM.

To the Editor of Tun LANCOT.

Stn.—The candid importality with which you listen to noth sides of any question that may be brought before you, assures in that you will give a place in your journal to the lellowing shuple maximum of faction.

Mr. Davidson says, in his latter immetal in has work's Larcar, that he regress having been mentioned in consistints with the subject of induced magnetism. How this can be a cause of regres with Mr. D. Lain at a less to consistery he was not facused have

To make the strong, Mr. D. brings forward formalesses manner. He says, Drs. Peraday and Ritchie dony any curative pro-perty in the magnet! However valuable he authority of those names is every other papers may be, it is inadmissible in this, as respect may be, 13 19 Institute pure in this, as based upon theory only. One figt certainly is worth all the shearies in the world. Notther of these gentlemen will hold a thing impossible because he does not see how it is effected. This would be unphilosophical indeed! Mr. D. further states, that there is rathing new in my method. Now Mr. D. ought to have stated at the same time, that he is incompetent to give an opinion, bething of the magnet. The gentlemen on whose authority Mr. D. seems to make this statement, are neither of them fully sequainted with my views, and they certainly would not wish to condemn any one's opi-nions before hearing them. And though it is with the utmost reluctance that I make use expressed by the parties themselves. Dr. Ritchie said, before the Westminster Medical As to myself, I do swert, that in magnetiz-ing, the poles produce their like and not their opposites; all magnetizing is but a continuation of the like pole, and quite the same whether by contact or induction. I finally maintain; that like, and not opposite, poles assist each other. By simply following out these views, I have succeeded to obtain results, both in the construction and application of the magnet, not achieved before. My magnets are more powerful than others, because they are constructed on what I conceive the right principles.
It will be fresh in the recollection of every

member of the Westminster Medical Society then present, that it was with considerable reluctance I accepted Mr. Hale Thomson's kind offer to experiment on amaurotic pa-tions in the Westminster Ophthalmic Hospilal. Lany with reluctance, because I foresaw the objections that could be raised against experiments on the eye. It is morewell known that many cases of amau-

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the subject, but came forward of his own companied by glancaging the other became free will, to make some statements to defend amaurotic after un distinguis for and the amazrotic after an manufacture and the third had been operated again startioning for cataract, when a piece of the capsule remained in the posterior chamber.

Mr. Gutterle, moreover, has kindly expressed himself several times, that none of the cases could be considered appropriate. Now in the one case I excepted, the patient professes to have received considerable benefit; the same, though in a less degree, was the case with two of the others. In most cases where the magnet is used, it is applied over the clothing and does not come in contact with the body, when, of course, no objections as to effects produced by the metal only can exist. And now a few words with regard to what Mr. D. calls an inquiry after truth. In the first place, I think it would have been fair to have stated that I at once admitted that cold would produce lachrymation, and that I applied the cold iron, fally expecting it would do so. But I say that iron will not produce that great mobility of the iris, which follows the application of the magnet. There can be little doubt but a piece of cold iron will produce of names, I believe that I owe it to myself doubt but a piece of cold iron will produce to state, that Mr. Faraday pronounced my similar effects on the eyes of four or five views, as far as he was aware of them, to be healthy individuals, but not precisely the new on some points, and worthy of investi- same, as Mr. D. says, for on some it would gation. Singular it seems to hear opinions | not produce any perceivable effect whatever; quoted, which differ essentially from those; others would feel heat, and some both cold and heat. But what has this do with the magnet? Mr. Thomson not remembering Society, that in magnetizing, both poles were that cold iron produces lachrymation, very produced simultaneously. Now this is cernaturally considered it as one of the effects
tainly different from what is said by Mr. D. of the magnet, and he certainly would have taken an opportunity to correct his mistake, had such occurred. To me Mr. D.'s inquiry after truth, seems a wish to tell the public what great authorities are opposed to the magnet being used as a remedy, and to make them aware that he is of the same opinion. I remain, Sir, your very obedient servant,

CHARLES SCHMIDT. 137, Regent-street, Jan. 5, 1836.

TWO CARES OF

GLANDERS IN THE HUMAN BRING. CURED BY CREOSOTE.

Related by Mr. J. P. CHERTHAM, London, in. the Veterinarian, Jan. 1885.

The susceptibility of the human frame contract those dire maladies deliber we well known that many cases of mass contract those dire mainting descriptions of the large partitions are made and the large partitions and the large partitions of the larg

A summary detail mentaining to the appropriate of the affected horse there was in increased scoretion of will exhibit the materix of the disease.

In the months of April last, I was requested to examine a bay horse declared to have a common cold, with secretion of pas from the mostrils, but which had continued during as inordinate time. A person who shall be nameless, forwarded some halls that were said to be infallible. The owner, in order to be assured that they were administered, gave them himself; but not being very expert in this occupation, he lost a part of the cuticle from the kauckle of the fore-finger.

The symptoms presented by the horse were, the glanderous discharge with the fettid effluvium; extensive ulceration of the pituitary membrane covering the masal septum; enlarged and indurated lymphatic glands, occupying nearly the whole space between the posterior maxillary bones, projecting beyond their margins, and displaying themselves even to the sight; and the cough short and difficult, indicating the thercular condition of the respiratory organs. His coat and outward appearance, however, presented an apparently healthy aspect.

My advice was to destroy him, being certain of his death, and likewise knowing the danger of propagating the disease to other horses, and to the persons who were in attendance. The owner was unwilling to sacrifice his favourite, and pressed me to give medicine, valuing neither time nor latour. In order to satisfy his mind, I ordered the blue draught (sulph. cupri) to be administered twice x-day.

In the course of a week after this, the owner informed me that the horse had amended. Considering this rather a strange anomaly, I forthwith visited the patient, and satisfied myself that, instead of amending, he was quite the reverse, for blood was interwoven with the discharge; the breathing was laborious and difficult, and, especially, it was accompanied by a very peculiar sound in the nasal passages. In a few weeks the proprietor told me that the horse had been sent to the knackers' yard, and at the same time I heard that he and his man were similarly diseased.

The smell and the discharge were of an identical character with those smitted by the horse; and on examination my opinion fully coincided with his. From the resemblance of the characteristic symptoms in both, a general description will andice. The coarse conjugatory to have notered the through an abrasion of the through the modium of a sore on the land, and in the coarse of the modium of a sore on the

Me Appen of time print to the appearance of the Money is an Eventy of the Appendix of the State of the State

when their presents from glandsmust seatter there was his hierapsed scentiline of mesons from the noise, which was attributed to mile catarrh, spill the character of the discharge, the blood intermingled with \$2, pain in the frontal sinuses and the cavities of the meson and short and interrupted along, roused them to a state of anxiety.

The pus with its gluey, slimy, glanderous appearance, itsisfied me as to their real state. I could discern no distinct alcers on the pituitary membrane; but from the statements given by the patients, I should incline to decide that they existed in the remote parts of the nose. The threat, on pressure, was rather painful, and the lymphatic glands were enlarged.

These patients having come so much mader my own observation, I shall give home account of the treatment of their respicative cases by Dr. Elliotson. The servants was admitted into the North-London Housial, and the master attended by Dr. Elliotson.

By injecting a solution of creecete in water up the nostrils thrice a day—by this simple means, and this alone—the servant was brought to a state of convalences in ten days, and the master in a little longer time. If the local application of the cree-sote had proved insufficient, it would have been administered internally. The strength of the injection was changed according to the stimulating effect produced. At first the cases admitted of two minims to the ounce of water, until the parts began to alter their morbid state.

These facts will add to the triumph of those speculative theorists who consider that glanders is a mere local affection. My purpose here is not to open the way for controversy on a disease that every pretander assures himself he possesses a specific for. The cases, however, are worthy of record: Perhaps they may lead to a course of experiments on the power of the especial control of the contro

[In a paper in the last volume of "The Transactions of the Royal Medical and Chirurgical Society," Dr. Elliotson refers to the above two cases. "I am anxious," says be, "to mention its effect (the effect of createte) in two cases of chreating plandarity affecting one coastel and the frontal ellions with pain, and a copions and tetid discharge, The disease in the two persons was clearly purpose doing myself the honour of laying the facts before the Society early near fluid, in the control of the control of the control of the control of the second of or meta-rith on instance like these in the human indicate, former cases having been acute glandaries in checonic fator. The seculous injection of a

200

weak solution of creceote up the nostrillyears, abandoned a practice which he had seasoned the whole of the symplicies after a very few weeks, and I hear the distincts are still well. I need not say that the discome has always hitherto proved fatal in the

With some exceptions, Jew and for I tween, and some of them of a very doubtful character, glanders "has always, hitherto, proved fatal to the horse." Should we at length and a care for this cyclecte, although only in its chromic form, the faterinary proion will be under deep obligation to Dr. Ellioteon. We shall wait with some impatience for this valuable document, and in the meantime, some zealous veterinarian will, we trust, put the power of creosote to the test in the cases of chronic glanders, and favour his brethren with the result. - Ed. V.

GUY'S MOSPITAL BEPORTS.

THE example set by Mr. F. South, an " interne" of St. Thomas's Hospital, Southwark, has found speedy imitators in two "externes" of Guy's Hospital, its neighbour; and we have before us, consequently, a thick pamphlet under the above name. The circumstances under which this production has originated, the anticipations of its projectors, and the prospects of the contemplated series, must form subjects for our pen on another occasion. At present we shall simply way, that so low is the ebb of literature at " Guy's," that the medical officers have actually been to Bath for an introduction to their work!

Dr. Bright "opens the ball." We have denced through one fandango with the old "lady, and below present our readers with a condensed account of her conversation while performing the labour. "If a man," said the dowager, " have, through ignorance, in early youth, or at any other time, whispered noft falsities in the ear of the public whom he hath courted, he should certainly repeal and amend his tale when he gets older and wiser. I once committed errors of this kind, and deluded those whose favour I sought. In a few years more I saw that I was wrong. I cught to have "confessed" at once; yet something held me back; bot now after the revolution of many more years, I am going to tell you my faults." tripping on, with tongue and feet, we obtained from our partner the astounding morning, by a dose of castor oil, a

previously recommended for its excellence to the profession, without ever hinting to them until this very day, that that practice war materially calculated to keep up the disease which he originally designed it to lessen. We condense the details, which are distributed through half-a-dozen pages of the "Reports"-into the following passages. The original article, with a case of "Simple fever, protracted by Irritation or the Bowels, and attended by Relapse," appears in the form of "Observations" or

TREATMENT OF FEVER.

THE physician should review from time to time his published opinions, that he may see how far experience bears out his former impressions. With this feeling I detail s case of simple fever protracted by irritation of the bowels. Eight years ago I stated my thoughts on the treatment of fever. Additional experience has induced me to make some important modifications, adopted from the practice of others.

In a great majority of the cases of fever treated, more particularly of those which are admitted into an hospisal, the period has passed when the febrile action could be cut short. It is established, and, as it must run its course, it is our task to conduct it through as safely as possible. No danger, then, so frequently presents, as that which results from irritation in the lining membrane of the alimentary canal, more particularly in portions of the ilium, the execum, and in the colon, generally with great derangement in the digestive functions. To obviate this state, I formerly said that the combination of the hydrargyrum c. creta the ipecacuanha, and the compound chalk powder, in different proportions, with the mildest nourishment, caused the symptoms regularly to retire. This practice has been followed by others with great satisfaction, but I now conceive that even this mild combination has, in many cases, kept up the irritation longer than would have been the case, had a more soothing practice been adopted: in point of fact I have not, for many years, had recourse to this combination, except for temporary purposes, scarcely ever now continuing its use in the way I once recommended.

As regarde purgatives in the stages of fever, I almost communication myself to small doses of the small doses of the small doses of the small doses. creft, varying from two grains to distand followed, in about four hours, or the most confession that Dr. Bright had, for many limited to two dradiess, seldom incress wordstaying in 1993 gir stoff butter than worth or since our tout that will in

half an orace, and hever exceeding six tonic: when where is administered, it should drachms, to which wary often add from be only by the ounce.

two to six drops of sections of opium.

I further observed, eight years ago, that as a part of the disphoretic plan in fever, the ipecacuanha wine assisted a free discharge by the skin: but, that in mining cases, harm rather than good is done by the use of saline remedies and disphoretics in any form, as they irritate the bowels. Forcibly impressed with the injurious effects of most of our disphoretic remedies, I have of late, in a very great degree, relinquished them; and have substituted a remedy, which I was first induced to try, from seeing its very favourable action in the hands of Dr. Addison; that is, the carbonate of sods, in doses of from ten to twelve or fifteen grains, three times s-day, in some mild aromatic infusion, as the infusion of mint; and this now generally supplies the place of all other saline combinations. It certainly irritates the bowels less than most other remedies given in fever, though it is occasionally necessary to guard even this with a drop or two of the tincture of opium. How the soda acts I am unable to say: but somemes, in spite of all our care, diarrhoea ureatens, and the stools assume the peculiar unhealthy appearance which belongs to this character of fever. To check them too suddenly would be wrong. In these cases, I find most excellent assistance in a clyster of a few ounces of grucl or starch, with a small quantity of the sirup of poppies, varying, according to circumstances, from a drachm to three drachins; and this repeated once or twice, or oftener, in the day, according to the urgency of the symptoms. For this remedy I am indebted to Dr. Robert Williams. I have, in most instances, found it decidedly preferable to the ordinary opiate clysters which I was accustomed sometimes to employ, and which will still be occasionally found indispensable. The advantage of the sirup of poppies over the tincture of opium seems to be, the greater mildness of its action. In that class and stage of fevers to which the present obser-vations refer, I should say - Keep the patient tranquil, shave the head, and apply a cooling embrocation. Let the only food be fresh barley-water, or toast-water; or if, occasionally, a little more support is required, arrow-root and mild animal broth. Give the soda regularly: regulate the evacuations with the hydrargyrum c. creti and the castor oil: if the bowels need restraint, use inpoppy sirup and starch: if the starch is the starch is the ten-

The case to which these observations refer was an instance of febrile irritation, kept up to a great length of time, and, when co valencence had apparently beauestablish a little neglect of diet, with animal food-to a relapse, which threatened in fatal res In the cases of the disease, a few grain calomel, well guarded in their operati-will occasionally be found most decides useful, but I am quite convinced that gra-mischlef results, in all stages of the d ease, from the incantions use of this reme

NORTH-LONDON HOSPITAL

REMOVAL OF CALCULY FROM THE URRTHRA.—Mr. Liston, on the 1st instant, removed three small calculi from the urethra of a little boy, aged four years and a half. The patient had suffered for some time with symptoms of stone in the bladder, and he had been sounded at one of the London hospitals, but no calculus was detected. On his admission here, the sound being introduced, it was found that the wrethra was partially obstructed by calculi, about half an inch from the orifice. The grating of the instrument over these bodies rendered the diagnosis, as to the presence of any stones in the bladder, very obscure. Mr. L. removed three small stones of a sub-triangular shape, and of about the size of half a common nut, in the following manner. He introduced a sharp-pointed curved bistoury through the meatus, and widened the passage on each side. The stones were then easily accoped out. Mr. Liston preferred this mode of procedure in this case, to making an incision from beneath the urethra. Had the stones been situated further down the pas-sage, he would, he said, have pushed them behind the scrotum, and cut down upon them through the perineum.

THE TAXIS IN HERNIA. - In a clinical lecture the other day, Mr. Liston remarked that he believed that operations for strangulated hernia were resorted to far more frequently than was really necessary. He believed that almost all cases might be relieved by the steady and persevering application of the taxis, particularly if resorted to within twelve hours in inguinal hernia, and six or eight hours in crural, after the strangulation has occurred. The warmbath and bleeding might be advantageously evaployed in many cases. Of course in of the hladder fragmently by placing the use of the taxis, it required in the operation hand over the layer, part of the abdoman.

If the strongth fall, the influence expensions with a few grains of the subcarbonate past with a few grains of the subcarbonate past and a few grains o

with much loss danger to the re was loss fear of acute peri-mention coming on, and, of hance of recovery. It must retood, however, when recommendthe steady and persevering employment the taxis, that he did not sanction any eart or violence, nor the carrying the appli-cation beyond reasonable limits. The first indication in this operation was the reduction of the bulk of the tumour, which was cted by squeezing the air contained in the extruded bowels into that within the challen. The pressure was to be kept steadily up for fifteen or twenty minutes, and the contents, if possible, gradually pushed back late the abdomen.

LOCK HOSPITAL

A 26 3 . C. 5 . 5 . 5

CARE OF GONORNEGAL DISCHARGE, ACCOM-PARIED WITH CONDYLONA AND CONDY-LOMATOUS TECHNATION.

LUCY CARYER, meat. 17, was admitted on the 13th of March, 1835, under Mr. WALKER's care. Her complaints, which she has had for more than two months, commenced with severe ardor uring two or three days after connection, and a discharge occurred during the ensuing week. She has had a bulo in the lest groin for two months, which gives her but little pain; there is an ulceration in the mior commimure of the vagina, which she has had for three weeks, and three or four amall condylomata at the edge of either lablum, which have been there for the same period. She has taken no medicine. Her mt symptoms are, a profuse thick yels discharge from the vagiou, scalding in terition, &c. Her general health is not very good; there is much shortness of breath; general uneasiness about the chest; with plearitic pain over the right side. The bowsis are very much confined. The catasenia have been absent for one month.

the was put upon a purgative plan of plied to the bubo and condylomata.

19. The scalding has nearly gone; the ers in the inferior labial comminure pro-ishin a turned edge; a small bulg is pre-senting itself in the right groin.

26. The bowels are very costive, and she is been ebliged to take large doses of aprient medicines (Computed Decariton of nes and Rhyberd) to keep them open. She has also suffered much from weight and

pain across the forehead.
Ageil 3. The bowels have been better rigidated lately; the genorrhead discharge is self sentimes talek, yellow, and profise, is

t, in fact, its recognited are greenally re- quentity, and there is slight scalding in cold as much credit on the surginu, and michaelides. There is sinch excernation attended with much less danger to the from the plorestion excepted the critice of the training of the critical state.

12. The properties gian of treatment has see contlined with much relief to all the rapping phasest, both internal and external. The std pain over the forchead and cyce sometimes returns, resembling in the severity of its attacks the low agree.

17. She has had no return of pain in the head since the last report; the discharge is the discharge in the control of the co old pain over the forehead and

accely gone; the sociding has subsided, and the ulceration and excertation are healed.

She was discharged this day.

In the work LANCET of last week, RODERICK MACLEON, the amiable editor, compiler, or fabricator, of that weekly bundle of stundity the "Medical Gazette," "confirms" all that we have said respecting the application which was made to Mr. Lieron, respecting the Chair of Surgery in the University of Edinburgh, and concludes his notice by observing, "With respect to "the gentleman by whom the invitation " was sent to Mr. Liston, it now appears "that a Mr. Drox was the individual;" and then, echolog THE LANCET, RODERICK myr. -"This is the whole of the matter." Here, however, the amiable mind of Hournick will be gratified on discovering that be has committed another mistake, as it is not the whole of the matter. The gentleman whom he designates "a Mr. Dick." and who wrote to Mr. Liston, is the Convenie of the Town Council of Edinburgh. Further. we may state that it is known in Edinburgh. that the Lord Provest applied personally to Mr. Lauron, when that gentleman was intely in Edinburgh, to ascertain if Mr. Learon would take the Chair of Surgery; and the magistrate who takes charge of the Collège affairs, and who is CHAIRMAN of the College Committee, addressed a letter to Me. LIBTON, in which was contained a sign inquiry. Nothing, therefore, than the following facts, vist ron having been consulted. clined the appointment, for Crastus Bress was then "electricity" and the distinguished lanicht, 'see'lle proof a favourable entities personnel dis Collegation the Council,

To the Editor.—Siz.—On Wedn Dec. 23), at the Bellin of an Hospital, a known to the modical profession are great integrity that distinguishes his seedings of all its members, the first contest for professions place. A young law some knotty points at the Board, in rundry caustic reflections which proved to he very unpaintable to a physician of some notoriety, who replied in his customary manner, and, on resuming his seat, declared that every word spoken by the lawyer was altogether false. The lawyer did not approve of this mode of arguing the case, and on rising, declared the fluent doctor, with three emphatic iterations, to be neither more nor less-I blush to say it - than "a liar." Little mure beyond a few apologies to the Board was said, and the doctor retired-to look it was whispered-for "a friend;" but the surnise was wrong, for next day the follow ing pithy dialogue was heard. Doctor, I suppose you have been to Chalk "What!" replied Dr. Farm this morning." S, with most feculent look, " to fight with a t-d? No damme." High moral contempt no farther could go, - nor better could character be illustrated. I am, Sir, your edient servant,

Dec. 29, 1835.

MERSES. WATKING AND HILL. -- In & mote sent to us by these gentlemen (the whole of which we need not insert), the following statement occurs. The note from Mr. Wilkinson, referred to below, justifies the statement of Mossrs. W. and H .: - If Dr. Schmidt or Dr. Epps had been contented with simply stating that a bet of fifty, or a hundred pounds, was offered by a gentleman (relative to the construction of a magnet), we should have had no reason to complain, but when they gratuitously add that we accepted the bet and failed, it is really too bad. The truth is, that the moment the bet was offered by Mr. Wilkinson we instantly declined it, and never thought more of Dr. Schmidt or of his magnets, until we w our names in THE LANCET. ged note from Mr. Wilkinson (to one of our firm) will prose the correctness of our statement. We have been very unkindly and unfairly dealt with in this business by the two learned Doctors.—5, Charing Cross, Dec. 36, 1835."

D. FRANCIS, Surgeon, of Ipswich, the himself as a candidate for the transe in that borough in a copy to be a copy to be a copy to be a copy to be a candidate for the categories of Coroles for the borough, and to be a copy to be borough, and to be a copy to be borough, and to be the categories of coroles for the borough, and to be the copy to be borough.

of Coroner has hitherto been generally performed by Message 1 the leaf and the second state of the leaf and the second second may be more adventigated in the medical science may be more adventigated which content within the province of this officer. Should be honoured with the appointment, no effort on my part shall be wanted to discharge the trust reposed in me.—I am, &c.

Mr. Wm. Cooke has in the Press And Memoir of the late Sir William Bitzard, read before the Hunterian Society, with additions

A Popular Mannal of the Art of preserving Health, enbracing the Subjects of Diet, Air, Exercise, Education, Bathing, &c. By Mr. J. R. Davis, Surgeon. London. Whittaker, 1836. pp 564.

A Treatise on the Distinct of the Eye and its Appendages. By Richerd Riddlemore, M.R.C.S., &c. In 2 vols. Longman, 1835. Svo. pp. 800 and 858. On Perforation and Division of Regus-

On Perforation and Division of Personnent Stricture of the Urethra by the Lancetted Stiletten. With Observations on Spanniodic and Inflammatory Stricture, and other Urethral Affections. By A. 28-66-ford, M.R.C.S., &c. 3rd Edit. London Longuan, 1896. 8vo. pp. 522. With Edgravings.

gravings.

Davis's Obstetric Medichie, so Fart 43.
London, Taylon. "a" This excellence with
is now near its conclusion. The places
present some of the best specimens of lithographic drawing which we have even
seen appended to a medical work.

Remarks on the Unity of the Bully, a illustrated by some of the more articles. Phenomena of Sympathy, both Mental and Corporeal, with a view of "analytis; the Grounds, and improving the Application of the Constitutional Treatment of Local Brecases. By George Macilwain, M.R.C.S. for. London. Highley, 1836. 8vo. pp. 334

A Practical Treatise on Midwifery, containing the Result of 16,634 Births, scenarring in the Dublin Lysis-in Respital Suring Seven Years. By Robert Collins. M.D. late Master of the Institution. London Longman. 1835. Sec. pp. 836.

Practical Observations on Homospethy with a variety of Cases touting to prove in decided superiority over the ordinary System of Medicine: By W. Stouting, M. R. C.S. London. E. Wilson. 1836, 8vo. pp. 1831.

"." We doem it right to say, in copying according to our custom, the title of the foregoing book, that notwithstanding the unqualified statement which is presented it the latter half of the title, the related he not contain one particle of erifaced in any port of the declaration which it contained. The name of not one of the medicine

which are alleged to have been administered in the "cases," is given; nor is the name land "Kalydor." A notice respecting the or the place of address of any one of the assumption of the "R.S. may stop at least this new frand. I am, Sir, your obedient of the "cases." Indeed, the volume does not afford the slightest ground for believing.

We have received a great many letters in the "cases," is given; nor is the name or the place of address of any one of the alleged "patients" appended to any one not afford the slightest ground for believing that the "cases" are any other than fabrications, from the first to the last. Considering the circumstances, in fact, under which the book is put forth, we cannot regard it as any thing else than a mere puff, which is calculated to throw no kind of credit on the professional character of the advertiser.

CORRESPONDENTS.

The late paper on the Sounds of the Heart, by Mr. E. L. Bryan, should have been dated from Stowmarket.

To the Editor .- Sir .- The person who has so long called himself Professor Dewnunst, and who has already added to his name so shareholder in, if not the sole proprietor of, many doubtful titles, has now the impudence the building. With regard to "free admisto sign himself "Fellow of the Royal So- sions" to the school, God forbid that we should "Educational Magazine," though his name sect at any school for nothing. Sir BENis not, of course, on the list of Fellows. I JAMIN, after the thousands of pounds which should not have troubled you on this subject, he has already drawn from the pockets of had not I and many of my friends been fre- students under the certificate system, can quently applied to by letter, by this "Pro-quently applied to by letter, by this "Pro-afford to let a dozen or two of pupils teach fessor," for subscriptions to a work, the pro-ceeds of which he wants, as he says, to rescue him from pecuniary distress, of which he may expect subsequently to share in so he gives a terrible account. Yet, though he alleges himself to be in the most abject for the piece of worthless parchment which

respecting the attendance of students at the Kinnerton-street School. No one appears to deny that the class amounts to the numher stated by Mr. Evett, who we understand fills some office in that establishment, but all of our correspondents challenge the allegation that the entries are those of students who have actually paid for tickets of admission to the lectures and the dissectingroom. It is also as generally declared by our correspondents, that a use has been made of the name of Sir BENJAMIN BRODIE, in persuading pupils to attend the school, which it does not become an examiner in the College of Surgeons to allow, much less to encourage. However, if true, little wonder can be felt at the fact, when it is notorious that Sir B. BRODIE is the largest I have an instance before me in the complain that students are allowed to disaneges names to be in the most adject for the piece of worthless parchinent which poverty, he figures away as "President" of a is handed to "passed" capdidace for the pompously named "Philosophical Society," diploma of the College in Lincoln's-Innwhich he announces as having many noblemen amongst its members, while in his camen amongst its members, while in his capacity of surgeon he recommends, in "cer-

METEOROLOGICAL REPORT.

(Batract from a Meteorological Journal kept at High Wycombe.)

Days.	Thermometer.		Barometer.		Rain.	Wind.	Weather.
	Highest.	Lowest.	Highest.	Lowest.	ins. Dels.		X
Dec. 28 29 30 31 Jan. 1 2 3	44.50 49.25 40.75 34. 29.75 27.50 43.	34.50 37. 29.50 29.75 13.75 23.50 34.50	29.90 30.06 30.05 30.08 30.24 30.37 30.24	29.84 29.99 29.96 30.04 30.05 39.33 30.08	0.0125 0.0125 0.15 0.0125	S.W. S.E.	Much severe weather the week. Rain and with sleet and shown let and 2nd. — The commenced on the 3rd, with rain.

Jan. 5th, 1836.

THE LANCET.

entropy, come, produces to some state of the som

Vol. 1.1 LONDON, SATURDAY, JANUARY 16, 1836. F1835-36.

LECTURES

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL.

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculte de Médecine of Paris.

LECTURE VIII.

HEMORRHAGE OF THE CEREBELLUM. LESIONS OF SENSIBILITY IN HEMOR-RHAGE OF THE BRAIN.

In our last lecture, gentlemen, we also touched upon hemorrhage into the various points of the cerebral hemispheres, and having discussed the functional disorders accompanying each lesion, we passed to the cerebellum. We now propose to continue the history of sanguineous effusions in this latter portion of the cerebro-spinal axis, and in so doing we would demand not only your into several details on this subject, that may about to investigate has not been studied by many writers, it therefore requires a minute thalysis of the cases which we have been able to collect in the records of the science; these are not numerous, our task will not therefore be very long. We are acquainted with only thirty-two published cases of hemorrhage into the cerebellum. Let us see what we can learn from a careful analy-sis of those cases. In layertigating the subthe case; experience demonstrates, that in the case of creeked homorrhage? 2nd, is crossed. The lesion of motility occupies supposing the existence of paralysis with the side opposite the effusion. This ayou see, is the same effect produced by effusion the context of the case of the c

itself; have we paralysis on the same, or on the opposite side?

As to our first question, if we would decide it simply by à-priori reasoning, it is a much more difficult one than you might at first imagine. We are not sufficiently acquainted with the physiology of the cerebellum; experiments have not determined, in any thing like a satisfactory manner, the functions which belong to this portion of the brain; we are, therefore, compelled to rely almost exclusively upon pathological observations. and we shall presently see in what manner they resolve our question. As to our second question, whether paralysis takes place on the same side as the effusion, or at the one opposite to it, if we would determine this point also by à priori reasoning, we must examine anatomical facts; and what do they lead to? To the conclusion that paralysis should manifest itself on the same side as the lesion, in cases of hemorrhage into the cerebellum, because its fibres pass to a part of the spinal marrow where there is no intersection as in the pyramids. If, then, we adopt the conclusions to which anatomy seems to lead, we should say that the loss of motion is collateral for cases of apoplexy of the cerebellum, because here we have no intercrossing of fibres; it is opposite in cases of cerebral apoplexy, because the attention, but something of indulgence and fibres passing from the hemispheres interpatience; we shall be compelled to enter cross at the superior part of the spinal marrow, in its anterior pillars; however, we appear tedious. The question which we are beg you to remember what was said upon about to investigate has not been studied by this latter point in our last lecture, when we endeavoured to overthrow the anatomical explanation hitherto received, and to show that if hemorrhage of the cerebral hemispheres does produce loss of motion in the opposite side of the body, the reason of the phenomenon escapes our knowledge.

I have just told you that anatomical facts would lead us to conclude, that in cases of effusion into the cerebellum, the paralysis should manifest itself on the same side of the should manifest itself on the same side of the body; this, however, is far from being

solve the questions we laid down a little while ago. Let us assemble our facts together, examine and analyze them, and endeavour to ascertain some general principles, by carefully comparing what has cases just alluded to, we find only three in been observed by others with the facts of our which no paralysis existed. The first of own experience.

a basis for our conclusions, are published in Midicale for 1824, page 70. Here the lesion the fifth volume of the Clinique Medicale: existed in the middle lobe of the cerebeilum. however, many more have come to my The patient tell down suddenly, without conmass of thirty-two cases, all, observe, relat- the patient was pinched, he withdrew his ing exclusively to

Hemorrhage into the substance of the Cerebellum.

only twelve which do not serve to answer some stiffness about the region of the neck, the questions we have put; they are not The second case of apoplexy of the cereaccompanied by sufficient details, although bellum without paralysis, is contained in the interesting on many other accounts; thus thesis of M. MICHELET, on "colorations of their authors generally content themselves the cerebral substance" sustained before with mentioning "a strong attack of apo-plexy," &c., but neglect to say by what no-plexy," &c., but neglect to say by what no-plexy, where the neglect to say by what no-text to say by white the diffication of invenions in the cases, and take no notice whatever of the years before her death. She had amaurosis, nature of such modification; of these twelve but no paralysis; an ancient cell was found cases, seven refer to hemorrhage into the in the right lobe of the cerebellum; howlobes, one of these belongs to SELLIOT, the panied by any lesion of motility. other to myself; however, I only saw the The third observation has been published patient after death; the third you will find by M. DROULLAIN, in his inaugural disseralso the effusion took place into the right lateral labes of the cerebellom. The patient lobe of the cerebellom, but the author died, exhibiting nearly the same symptoms merely says, "the patient lay in a comatose as those mentioned in the case of M. Bayle, state for forty hours, and then died. He does not refer in a distinct manner to loss lesion of motility is described with accuracy, deductions. Hence we have only twenty into the cerebellum, giving rise to parelysis. cases in which sufficient details are given to allow of our comparing the lesion with its effects. They are more or less perfectly described, and we shall now examine them in succession. And, first, to determine our lateral lobe, or best age that? Does it confirst question:—

le Apoplery of the Corebellum accompanie by Paralysis!

What do the facts say? In the twenty these three cases was published by M. Several of the facts which shall serve as . BAYLE, in the second volume of the Renus knowledge since the publication of that sciousness, but the power of motion re-work, and we can now lay before you a mained. M. Bayls assures us, that when limbs with a certain degree of flexibility. Pavalysis was absent, then, in this case. The individual died on the fifth day, and on the third before his death, was seized with con-Amongst these thirty-two cases, there are vulsive movements of the lower limbs, and

median lobe of the cerebellum; six of these ever, it is right to observe, that this case is are related by M. SERRES in the eleventh not sufficiently exact to be conclusive. The volume of his anatomy of the brain; the author does not say whether he had examined other is by DANCE, in his memoir on acute the patient from the commencement, at the hydrocephalus, printed in the Archives de date of her first attack. She might have Médecine, January 1830. In none is any been paralytic then, and have recovered the particular mention made of the state of mo-motion of her limbs. This case, then, mere-tion in the limbs. Three other cases refer ly shows, that at a certain period of time to hemorrhage in one or other of the lateral effusion into the cerebellum was not accom-

briefly noticed in Dr. ABERCROMBIE's work tation. Here no paralysis existed, although on diseases of the brain, page 238; here an effusion of blood was found in one of the

Thus, out of twenty cases in which the of motion. There remain now two cases, we find only three where motion remained, of motion. There remain now two cases, we find only three where notion remained and in those the effusion was double, occupying both hemispheres of the cerebellum at the same time; one has been published in the existence of paralysis express! at the same time; one has been published in the existence of paralysis express! is answered, "Does paralysis accompany given without any details whatever. The last case is related by Morgagin in his work "De sedibus et causisque morborum." the seat of the paralysis? The answer; He found the individual dead, and the upper limbs strongly contracted. This is too imperfect an account to afford ground for any deductions. Hence we have only twenty lint the cerebellum nearly as the find only three where notion remained intact; in all the rest, viz. seventeen, we find only three where notion remained intact; in all the rest, viz. seventeen, we find the existence of paralysis expression, then, is answered, "Does paralysis accompany effusion of blood into the cerebellum?" Yee, last case is related by Morgagin in his very contracted. This is too imperfect an account to afford ground for any defluctions. Hence we have only twenty lint the crebellum existence of paralysis expression in the existence of paralysis expression.

What was the particular seas of the Hemorrhage ?

with another? Let us again examine our and the cerebellum. Let us take the first facts. Of the seventeen cases accompanied division and ask, by hemiplegia, one only acknowledged for its cause an effusion into the median lobe. This case is reported by M. Gujor in the journal which preceded the Lancate Froncaise, in, I think, the old Clinique des Hopitaux, t. 1, no. 70, page 110. In the sixteen remaining cases, the effusion was situale in one or other of the lateral lobes. Thus we have determined two points; first, that paralysis exists; second, that it exists in the form of hemiplegia; and, finally, that TAVERNIER, in his thesis on loss of memory, in seventeen cases of hemiplegia determined sustained in July 1825. We must examine by effusion of blood into the substance of the this fact with some care, as it is unique—the cerebellum, one only occurred with hemorrhage of the median lobe, eleven of the good many facts of an opposite kind.

The individual who forms the subject of

which we have already resolved with respect time, in the year 1812, with an access of if this hemiplegia, existing, as we have tion in the limbs on the left side of the just shown, in sixteen cases, manifests itself body. Eight years passed over without the on the same side as the lesion, or opposite recurrence of any accident. In the year to it; in other words,

Is the Paralysis of Cerebellar Apoplexy direct or crossed !

Let us have recourse to our facts as usual. lesion was discovered in the left side of the body eleven times; eleven out of sixteen, this latter evidently corresponded with the crossed paralysis; two of these eleven cases, late attack, and was the cause of death, belong to M. Serres. One has been published by M. Cazes in his thesis on paralysis, plexy, shown by the reinnant of a cyst, in 1824. Another was observed by Dr. which gave rise during life to direct paraand published under his authority in the tailed, but if we study it, we find a great French Laucet for 1829, October 17th, objection, which in our eyes considerably Another, and one of the earliest cases, was diminishes its value. Thus M. TAVERNIER given to the public by Dr. HURTOR, in his did not attend the patient during the first thesis. Finally, you will find five others attack in 1812; the bistory of the case was in our fifth vol. of the Chaique Medicale, given him by the patient's wife: it is there-we should, however, remark to you, that in fore only hearsay testimony. The woman those which we have published, hemor- mistaken one side of the body for the other, rhage into the substance of the cerebrum as people often do: in a word, her evidence trially speaking, therefore, we have only must regard this case as only half a fact, ine instead of cleven cases, of sixteen We therefore conclude, that when the effu-The questions we had proposed, could only direct manner than that of M. TAVERNIER. beganswered by an appeal to facts. We Now for our second division: sampelled to assemble these from diflay before you the results.

Before proceeding any further, we have to
establish a desiran which is not without importance in the study of orrebral apoptacy.

We have lately seen an example of
this event in disease: three others are rethis event in the case of the brain.

The study have a lately seen an example of
the brain are rethis into the substance of the cerebrum | You will also find a case in the Journal
time into the substance of the cerebrum | Hebdomadaire, t. i. page 41, and two or

Some in

When the Cerebellum alone is compromised, can we have direct Paralysis?

a circumstance which, as you know, sometimes occurs with hemorrhage of the cerebrum. The records of medicine furnish us with only a single case of paralysis occupying the same side as the hemorrhage, in cases where the lesion is strictly confined to the cerebellum. It is published by M. only exception to a rule which embraces a

Again, we have here to ask a question this observation was attacked for the first to the cerebrum. Thus we may inquire apoplexy, marked by a complete loss of mo. 1820, the patient suddenly lost the power of motion in the right side of the body, and this time the access terminated fatally. On examining the body after death, the ancient What do we find? Of the sixteen cases, the cerebellim. A recent clot was found occu-CHAMBEYRON at Salpetriere. A fourth case lysis; that is, to loss of motion on the same was observed in the service of M. Piorry, side as the lesion. The case seems well de-Dr. CHAMBETRON's case and in one of may have observed badly, she may have which show that paralysis may occur at the sion of blood engages the cerebellum alone, side opposite the lesion in the cerebellum, the paralysis is invariably situate in the op-We have been compelled to enter into de- posite side of the body; at least we are talls that may appear long and tedious, but compelled to draw this conclusion, until y were necessary, absolutely unavoidable. new observations come to shake it in a more

> in the Cerebellum and in the Cerebrum, what do we observe?

three in the work of M. ROSTAN on tions, depending upon muscular action, are summer "Ramollissement." You saw that when deranged by hemorrhage into any part of hemorrhage exists in the cerebellum alone, the norvous centres. However, we shall the paralysis is opposite; but let us suppose another case. Imagine a patient with a with hemorrhage of the brain, for the interest double hemorrhage, one in the left lobe of ence exercised by effusion of blood into double hemorrhage, one in the left lobe of ence exercised by effusion of blood into other parts of the nervous centres, upon the other parts of the nervous centres, upon the right hemisphere of the brain; what should muscles we now allude to, is not well underwe observe here? Paralysis of the four limbs? Double hemiplegia corresponding to the double hemorrhage? No such thing; although the cerebellum may be full of blood, no effect is produced by it on the motions of the body. It is the brain alone which infinences motion, masking, or rather altogether absorbing, the faculty of the inferior organ; assuming to itself the whole direction of voluntary movement, and thus giving rise to a phenomenon, which, though inexplica-ble, is worthy of the most attentive consideration. The cases published by ROSTAN and others prove this fact beyond doubt, although their authors never thought of the application when they published them. And hemorrhage. The eyelids may also be deexisted alone would certainly modify the faculty of movement, loses this power as soon as it becomes associated with atrophy of the cerebrum, and paralysis is observed only on the side opposite the injured hemisphere of the brain.

We have now passed in review hemorrhage of the cerebrum and cerebellum, together with the lesions of motility that accompany it. Let us pass to effusion of blood into the substance of the spinal marrow, or,

rather, to the

Paralysis occasioned by the effusion of Blood into the Spinal Marrow.

Here the phenomenou is a simple one and easily understood, for the cause acts in the immediate vicinity of the nerves that supply the voluntary muscles. In most cases the paralysis is double, the limbs on both sides of the body are deprived of motion, and the seat of this double paralysis will naturally depend on the seat of the effusion, as the latter occupies a more or less elevated point of the chord. In some cases, however, hemorrhage of the spinal marrow is followed by hemiplegia; this is of rare occurrence; but you will find an example well detailed in the work of M. OLLIVIER on diseases of the chord. Finally, we may remark that the paralysis is never crossed, as we see is almost universally the case in ridiculous grimaces we sometimes observe hemorrhage of the cerebrum or cerebellum.

Hitherto we have confined ourselves to loss of motion as it may exist in the voluntary muscles of the limbs. It is time to consider paralysis of other parts of the consider paralysis of other parts of the we have seen one constant the body; to examine how far the other functions existed on one side of the body, and the

stood. Let us examine each of these muscular parts according to the different regions in which they are situate, and first for

Paralusis of the Muscles of the Eve.

Paralysis of the muscles, which direct the movement of the globe of the eye, has sometimes been observed; it is, however, a circumstance of rather rare occurrence; the loss of motion does not strike all the muscles to an equal degree; hence their antagonism is lost, and the phenomenon so well known under the name of strabismus, takes place; but this symptom, we again repeat, is seldom seen in cases of cerebral remark, that in several cases where we prived of motion, and particularly the levahave a different kind of lesion in the brain tor palpebra superioris. In some cases it and cerebellum, as atrophy for example, the precedes the loss of consciousness, and the same thing takes place. Thus a diminution general paralysis, for a very considerable of one lobe of the cerebellum, which if it time. We call to mind one, especially, in which the patient was anable to keep his upper eyelid from constantly falling down, for three weeks before the attack.

Paralysis of the Cheeks.

Those different parts of the face, the muscles constituting the cheeks, may also be engaged, and, indeed, this happens more frequently than for any other of the parts comprised in the present series. It is worthy of remark, that the facial paralysis always occurs on the same side as the hemiplegia, a fact which we cannot explain by the decussation of the anterior fibres of the brain in the pyramids. When once established, it produces certain phenomena that are worthy of being noticed. The paralysis is most appreciable in the buccinator muscle; hence, when the patient eats, the paralysed cheek is distended passively, until the alimentary mass is removed by a purely mechanical action, and, in severe cases, at each expiration the check becomes in like manner park sively distended, the buccinator swells wi a air, and when the latter is pressed through the mouth, it gives rise to the phenomen in popularly known under the phrase," funger la pipe," smoking a pipe. The want of chtagonism in the muscles of the face is als the reason why the patient, when he laure or talks with vehemence, &c., me

We have said that the face is constantly paralysed on the same side of the limbs. We must correct this asserting for excep-tions, though exceptions, still cales. We have seen one case of the hemistage.

100

lysis of the face at the other. This is the When the muscles of this region are paraonly case we have witnessed, and here pro- lyzed, the head inclines towards the injured hably the nervous centres were affected side, while the face is drawn to the oppowith a double lesion.

The Movements of the Tongue

are very variously modified in persons affected with cerebral hemorrhage. In the first place we observe a certain number of cases where the movements of the tongue remain intact-where it conserves a perfeet integrity of motion, while the other parts are more or less profoundly injured. In other cases the motions of the tongue are imperfect; the organ at first remains immoveable for a short time, and is then suddenly thrust out, after extraordinary efforts on the patient's part. Finally, in other cases, the tongue is completely paralyzed; the patient is unable to put it out; the slightest motion is imperceptible, and the organ remains lifeless in the bottom of the mouth, in spite of the most violent efforts to advance it. In this latter case language is lost, not from any injury which has been done to the organs of voice, but from want of the mechanical means necessary to distinct articulation. Sometimes the tongue is affected with only a partial kind of para-'ysis; the patient is able to thrust it out, but the tip deviates sensibly to one or other. side. We may ask then, To which side? Answer: The deviation of the tongue is not constant; however, we may lay it down as a very general rule, that the point turns to-wards the paralyzed side of the body; thus, if the hemiplegia exists on the left side, the tongue deviates to the left &c. The other case is infinitely more rare; examples however exist (and we have seen more than one), where the tongue was directed towards one side of the body, while paralysis occupied the opposite membranes. The motion of the tongue is generally recovered long before the limbs begin to enjoy the faculty of locomotion; thus, it is not rare to find a patient speaking without hesitation, and complete master of his tongue, in ten. welve, or fourteen days after the occurence of cerebral hemorrhage, while the lever or upper extremity is still weak and mationless. In most cases, then, the lesion motility, as regards the tongue, is much of motility, as regards the tongue, is much less considerable than in the limbs; there are however, some exceptional cases; thus we have examples on record of individuals who have fallen down in a state of apoplexy. Or recovering, the members remain weak, more; but the voice is gone, the

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site. Paralysis of the muscles of the larynx is also extremely rare; however, you will find a very curious example of complete aphony accompanying cerebral hemorrhage, in the work of M. MOULIN.

Respiration and Deglutition.

The respiratory muscles are not affected, except in cases of a most dangerous nature, where the attack has been sudden, and the coma supervenes with intensity, in a rapid manner. The muscular tissue composing the pharynx and the larynx is sometimes struck with paralysis, but this also is very rare. We never observed it except in severe cases, and it is generally a mortal symptom; the result of this paralysis is a difficulty, or, in some cases, a complete impossibility, of deglutition, and the prognosis, as we said, then becomes very unfavourable. In certain other cases, this difficulty of deglutition forms the prominent symptom; for a considerable time before the actual effusion into the brain, we observe no other premonitory phenomenon. Dr. FLANDIN has published a case of this kind relative to a young man twenty-eight years of age, who, in consequence of violent mental emotions, was suddenly seized with malaise, and impossibility of swallowing; there was no other symptom worthy of notice until the following night, when the limbs on the left side of the body were suddenly deprived of sensation and motion : the difficulty of deglutition, with the paralysis, continued unabated for thirteen days. when the former gradually abated; the hemiplegia however continued unchanged. This is a rare and curious case; it shows in how many bizarre forms nature seems to present the same injury of the nervous centres.

Paralysis of the Rectum and Bladder

has also been observed in cases of cerebral hemorrhage; however, we believe these latter accidents occur much less frequently than has been imagined; nevertheless, it is always good to be on your guard, for the urine may be retained, especially in recent cases. When therefore you have a patient affected with apoplexy, you must be careful to examine from time to time the region of the bladder, and as the patient does not enjoy sensibility, you must not only touch this region, but ascertain the actual state of the bladder by percussion. The muscular fibres of the stomach have thing more; but the voice is gone, the paralysis of the tongue is complete, and the paralysis of the tongue is complete, and the pathot it insights a attitudate a single word. Now for constitution of the Neck in accessively read to personal hemorrhage.

Duration and Termination of Paralysis.

Once produced, the paralysis which is really the effect of cerebral hemorrhage, presents been said to partake sometimes in the gene-

itself with the essential character of persistence: it may last with unabated intensity to the patient's death, or it may diminish without completely disappearing, or it may at length disappear in a per-fect manner. When the paralysis subsides, it generally does so in a slow and gradual manner, and this is an important fact to observe, for it shows that the lesion of the nervous centres consists in effusion of blood, and not in simple congestion, when the patient continues to live for any considerable length of time. The paralysis may persist for twenty years, or even longer, and then the limb either conserves its original form, or the nutrition of the extremity becomes diminished, and it wastes away in a sensible manner. In other cases the diminution of the paralyzed member is much more rapid. We remember one example in particular, where the limb was evidently much smaller than natural within eleven hours after the date of the effusion. The paralysis, as we have said, may gradually diminish, but still at the end of many years some modification of the motility yet remains. The limbs are not active in their movements; they feel heavy, or the fingers remain habitually flexed, &c. These permanent accidents often coincide with little or no lesion in the brain. We had occasion to examine the body of a patient affected with paralysis twenty-seven years; the loss of motion, however, had gradually diminished, and at the second attack, which proved fatal, nothing remained but a simple weakness of the limbs on the left side of the body. After death we found, in the substance of the right thalamus, a hard line, of a dull whitish colonr, not more than six lines in length. This was all that remained of the ancient coagulum; a recent one existed in a different point of the brain. Another division, which we established a while ago, is that in which the paralysis disappears completely at a greater or less period after the occurrence of hemorrhage. Such a case has been seen, and thence we are induced to conclude that the coagulum has been completely absorbed, and that the nervous influence is transmitted with its original force through the cicatrix, the last vestige of an ancient hemorrhage. In some cases of the kind now alluded to, even this cicatrix is removed. In others, however, we discover more or less trace of lesion, such as cysts of various sizes, &c.; and yet, long before death, all paralysis has vanished. then, you see one and the same condition of the brain, in which paralysis may be absent or exist, according to individuals, - a new proof, in addition to those so often insisted upon in the commencement of our present course, that hesides the morbid conditions appreciable to our senses in the dead body, there are others, equally important, which escape our anatomical investigations; but office the process it is other cases it.

which add their all-powerful influence so the former, in favouring or preventing the development of functional disorders.

The Disappearance of the Paralysis, in general follows a sentain order.

What is that order? In most cases the tongue. the face, the lips, first recover their movements; the tongue ceases to deviate, the mouth recovers its natural form, and is no longer awry. After that the limbs regain the power of motion, and almost always the paralysis disappears more slowly in the upper limbs than in the lower. We have already noticed how members which have remained a long time paralytic lose their volume, or become stiff or contracted; but this is not all: in many other cases, shortly after the apoplectic attack, the side of the face and the naralyzed limbs are from time to time agitated by convulsive movements; one would think that the blood at once stimulates and deadens the nervous influence. In cases of this kind we have sometimes found the nervous pulp surrounding the coagulum perfectly free from any lesion that could explain the symptoms of irritation; in others we have seen the coagulum surrounded by injection of the cerebral substance, or by more or less softening, accompanied with coloration of the nervous pulp. Thus we have endeavoured to complete the history of paralysis depending upon effusion of blood into any portion of the nervous centres: it now remains to consider lesions of sensibility, and lesions of intellect, in connection with the same subject.

LESIONS OF SENSIBILITY OBSERVED IN HEMORRUAGE OF THE BRAIN.

During the course of this and the last lectures, we passed in review the various accidents of motility that present themselves, either in connection with hemorrhage of the brain, of the cerebellum, or, finally, of the spinal marrow; having disposed of this, the most important and interesting part of our subject, we shall now take up the lesions of sensibility which accompany effusion of blood into the cerebro-spinal axis.

These lesions are much less constant i cases of cerebral hemorrhage than those M motility, and much more difficult to tribe to any determinate alteration of the brein. However, we must follow nature as the presents herself, although we may be able to explain her actions: we shall the fore consider lesions of sensibility in brain itself; in the cusaneous ful in the organs of sense; and, fourt different mucous membranes susceptibl being submitted to experiment. It us examine

been preceded, for a greater or less period, rare, and that you cannot expect to meet sensibility. Thus the patient is subject to a weight in the head, to cephalalgia more or or less violent; he is giddy, troubled with vertigo, &c., and these symptoms frequently prelude an effusion of blood into the substance of the brain. They are, in fact, phenomena of congestion, alternating in degree, and at length terminating in hemorrhage.

Mudifications of Sensibility of the Skin

we have to distinguish under two classes. We must study them, first, as they present themselves before hemorrhage has taken place; secondly, as they are seen after the occurrence of that accident. Before the modified in consequence of cerebral hemorinstant of being struck with apoplexy, many rhage, what do we observe? In proportion individuals do not experience any modifica- as we become removed from the instant of tion of the cutaneous sensibility. This is a hemorrhage, the sensibility of the skin regeneral rule, but admits of many exceptions, turns, and is almost universally restored, Thus some patients experience a curious long before the limbs have recovered the sensation in the limbs: they feel a peculiar power of motion. Thus, in the first few days kind of coldness, as if the hands were sud- after an attack of apoplexy, if you pinch the dealy planged into cold water. complain of a pricking pain, of numbness toms of feeling; in a few days more, sensaare, in the fingers or toes, or even in the tion, though dall, exists; and, still later, the whole of the limb. The different perversions power of feeling has returned in the limbs, whole of the limb. The different perversions power of feeling has returned in the limbs, of sensibility which we have now pointed out though still incapable of executing the slightas preceding the effusion of blood, may ex- est motion. The sensibility of the various ist always in the same point of the skin, or affect in turns different points of the cutaneous periphery; they may manifest them may also be modified in a greater or less selves on both sides of the body at the same degree; the conjunctiva covering the globe time, or be confined, as was said, to a of the eye is sometimes so insensible that it single member, which is commonly the one admits the approach and even the contact of which will subsequently be attacked with the finger, without giving risc to any uneasy

times they precede the latter by a few days measure connected with a lesion of the fifth only; in other cases the numbness, prick-pair of nerves. The face and lips also suffer ing pain, creeping sensation, &c., have ex-in some cases of the above kind; in one isted many years before the occurrence of case I have seen a remarkable diminution age of fifty-two, had been struck with an sensible. ttack of apoplexy; from the age of sevenen this female experienced a sensation of ceping in one of the hands; at first interttent, the sensations at length became usion, and shortly before the period of usion, were joined by a similar feeling in e lower extremity, together with some prodromes of this kind may be prowar a very great period indeed, and perceptal hemorrhago the attack is ed by various disorders of sensibility;

hy a few accidents connected with modified them frequently as the precursors of apoplexy.

We now arrive at those lesions of sensibility which are observed after the effusion of blood has actually taken place. In many cases the loss of voluntary motion is not accompanied by a destruction of sensibility; the patient is unable to move, but he feels at other times that sensibility is either completely abolished, or merely modified, and in this case the modification of feeling usually takes place in the same side as the paralysis; in a few rare examples, however, the feeling becomes abolished at one side, and motion at the other. The sensibility once Others patient's skin, he does not evince any symp-

Mucous Membranes accessible to the Touch

paralysis.

[feeling; in some cases the membranes at the Nothing is more variable than the period entrance of the nares, mouth, &c., seem of time separating the first appearance of much less insensible at one side than the these lesions of the cutaneous sensibility other, and all these modifications, very from the moment of hemorrhage; some- various in degree and seat, seem in some hemorrhage. We have seen a remarkable of sensibility of one side of the mouth and example of the latter circumstance in the nostril, in an individual in whom the whole case of a woman at La Pitie, who, at the corresponding side of the face was also in-

The Organs of Seuse

may partake in their turn of the general disturbance; the sense of vision remains intact in a great number of cases; however, when the attack of apoplexy is very violent, the power of seeing is frequently completely Thus you see that lost. When vision is troubled, the accidents may appear, either before the hemorrhage has taken place, or after its occurrence, or at the same instant that the patient is attacked. Before the effusion, some individuals exconscious these latter are so well marked that we can also perience various disorders of the sense of that we can which are latter are the constant the constant that the cons

have a veil or fine membrane like a spider's | various modifications of this sense be in some web drawn before their eyes, covering every measure explained. The observations we thing with a species of cloud, as when the liave just made, refer principally to loss of crystalline lens begins to alter; others con- vision at one side of the body rather than stantly see a coloured object in everything at the other; but a more general question they regard; all hodies to them are painted presents itself, vite with little red or black points. Diplopia or double vision has been sometimes observed as a precursory symptom of cerebral hemorrhage, and in some few cases this pheno-menon has been intermittent; other individuals are struck with complete blindness, and this presents the most striking premonitory sign, existing nearly alone until effusion takes place; or the loss of vision may disappear and return again at uncertain intervals. Some authors affirm that in certain cases the sense of vision acquires an unaccustomed degree of sharpness before the attack of hemorrhage; we have never seen an example of this latter phenomenon. Thus you see that several functional troubles are connected with a disturbance of the brain for a greater or less period before the occurrence of hemorrhage: they show that some change, which we are unable to appreciate, but whose nature it would be of the utmost importance to determine, takes place in the the optic ganglia, on a level with their comcerebral pulp, or in its manner of acting, long before the lesion which characterizes apoplexy.

place, vision may remain intact: it may be certain that blindness may coincide with a destroyed or weakened on one side or both. lesion, not of the brain, but of the cerebel-When the hemorrhage is very violent, vision | hum; we have before drawn your attention of both eyes is generally abolished. In cases to this interesting point of pathology: we of less gravity, the power of sight may be shall not, therefore, recur to it again. that the modification of sight is observed.

amination of cases, to determine whether modifications of vision. these different troubles depend on a differhave just described, are connected with the of smell and taste, we have nothing particu seat of the effusion, and the influence it lar to remark, except that they also me exercises on the various roots of the optic present different modifications of sensibility nerves. You know how these nerves are in cases where the tifth pair of nerves derived, by numerous filaments, from dif- implicated in the lesion of the brain, ferent parts of the brain, and, moreover, how the intersection of the two chords is incom- sions of motility and sensibility that plete; hence some fibres pass directly from in consequence of hemorrhage; the brain to the organ of vision; others, on nervous centres. We have also, an the organ to the organ or the fibres of the remember, examined how far the other nerve, and pass obliquely to the visual modifications of the power. organ of the opposite side; hence we can conceive, that as the hemorrhage may implicate one or more of these different fibres, the loss of vision may take place at one tion. The sensibility side of the body or at the other, and the and surfaces is thousand

When the power of Scaing is completely abolished, can we affirm that a particular portion of the Brain is injured?

that the lesion, that is, occupies the thalami, the corpora quadrigemina, &c.? No. certainly not; if the hemorrhage be violent and extensive, we have complete abolition of the sight, no matter what region of the brain be attacked, because in these grave and dangerous cases, the whole organ is equally compressed; however, we have cases on record which show the existence of a similar phenomenon with a small coagulum, situate now in one part of the brain, now in another. M. SERRES, to whom we owe many researches upon this point of the physiology of the brain, affirms that blindness does not occur when the lesion is situate above the level of the thalami nervorum opticorum; the effusion must take place in missure; but this and several other opinions of the same kind require further examination and more imposing proofs before we At the instant the offusion of blood takes can admit them without reservation. It is simply weakened, or lost at one side of the must not neglect to mention a phenomenon body only; and in this latter case what do of the visual organs often connected with we observe? In some individuals the loss of cerebral hemorrhage, viz., dilatation of the vision occurs at the paralyzed side of the pupil; but as this symptom is merely the body; in another class it is at the opposite consequence of loss of sensibility to the retina, it comes under the same head as We have endeavoured, by a careful ex- blindness, and may be classed under the

The other senses follow the same rules as ence in the seat of the lesion, and although vision. The hearing may be modified either we have not been able to establish this in a before, during, or after the effusion of blood. satisfactory manner, it still remains proba- Many patients complain of ringing in the ble that the diverse modifications of vision cars, strange noises, and various other halluin the cases of cerebral hemorrhage we cinations of a similar kind. As to the senses

We have thus discussed the various

ble slifference, whother the lesion be sented in presented as cured, so far as the disease ad-in the brain or carefulling. When hemor-mitted of relief—that is to say, all pain was rhage takes place into the mescephale, the cutancous sensibility is very rapidly abolish-ed, and the same observation may be applied to effusions of blood into the centre of the spinal marrow.

ST. THOMAS'S HOSPITAL.

CLINICAL LECTURE

ON CASES OF

DISEASES OF THE JOINTS.

Delivered in the Session 1835-6.

BY MR. TYRRELL.

LECTURE III .- DISKASES OF THE LIGA-MENTS OF THE KNEW-JOINT, AND DIS-EASE SIMULATING THOSE AFFECTIONS.

Progress of Cases previously described.—Gentlemen, I shall to-day continue the subject which occupied my last clinical lecture, - diseases of the joints. (See LANCET, No. 6.4, page 528;. Respecting the four cases of fibrous capsule of the hip-joint, then described, three are well. The patients were, an elderly man, a boy, a young man, and a woman. The two patients whose cases were left for further consideration were Septimus Carter and Sophia Moath. Septimus Carter, as regards the affection of the hip, seems quite well. He was here yesterday, when I carefully examined him. Pressure over the joint did not cause any suffering. He has some slight pain about the knee, attri-butable to a slight continuance of disease of health was much improved, the pain and the fibrous capsule.

The woman, Sophia Moath, whose local disease I said had been retarded by ill health, is improved as regards the local disease. The secretions are better, but her health is so far from being good, that she wis to leave. The air of the hospital

wising to leave. The air of the hospital does not agree with her. She is to quit to-day, but I have procured her address, and shall accretain the progress of the case for your faure information.

After these cases, I mentioned two cases of inflummation of the specification of the specification of the insertions of the descipation on in which an increased that the description is to a puffluous of the ad given rise to a puffiness of the moretion. The first patient was stioned the case, and the dismissed as cured. comitue, on moving

pase of the

with tolerable freedom, the motion being a little interfered with, in consequence of the alteration of the articular surfaces.

The other case was of a rather aggravated kind, in a woman named Sullivan. The condyles of the femur were enormously enlarged, without giving way. I have seldom seen so great an enlargement without there being abscess, or more severe disease than existed in this instance. At the last report I made, she was directed to apply to and keep on the surface of the joint, the blue ointment, with soap cerate, in equal parts, adding a little opium. The subsequent report says, "the condyles are much reduced in size. There is some pain and tenderness over the lateral ligament, which pain is increased at night, but not so greatly as materially to disturb rest. The health is a little impaired. She complains of pain in the head, which might be attributable to irritation of the mucous surface of the bowels, she having slight diarrhoa, for which she was directed to take the compound chalk mixture, and a small quantity of port wine was given to her." Two days afterwards, the report says, "the bowels continued a little relaxed, but the headache is relieved; the local affection, however, appears rather aggravated," in consequence perhaps of the debility ensuing from the affection of the bowels. The pain was rather more at night, disturbing her rest, and she complained of some tenderness on the surface of the condyles, particularly in the situation of the external and internal lateral ligaments. In the space of the next four days, a considerable amendment took place. The general tenderness of the joint were less, she rested well at night, the bowels were regular, and the appetite was improved. Yesterday, the day after, I inspected the part, and was rather surprised to see the diminution that had taken place in the condyles, which is very unusual to any great extent. Perhaps the thin shell of bone had shrunk after the absorption of the internal deposit. The diminution, also, of the periosteum, which had been thickened, may have tended to account for the diminution in the size of the part.

There is mentioned in the report, " pain in the situation of the lateral ligaments."
These ligaments, in such a case, are naturally put on the stretch; for the distance of the points of attachment above and below is necessarily increased, and slow inflammatory action is thus produced. Since the condyles have diminished, the pain has altogether ceased. I expect at our next meeting to report this case as cared, so far as it to the head of is curable; that is to say, that all inflamma-ticked. The patient had been story notion has been subducd.

CARE 1.—Disease of the Internal Lateral little tendercies, and what romains is just Ligament.—I shall to-day direct your attention to one case of disease of the ligament, otherwise, also is well. Yesterday. ment of the knee, and to another which has the semblance of that disease. The first is the case of Anne Fitts in Queen's Ward, aged 36, of regular habits, an inhabitant of Bethnal-green, admitted October 29th. She said that about two months ago, after exposure to cold and damp, she experienced a dull aching pain in the right knee, increased on motion of the joint, and particularly severe at night. Leeches were applied without benefit, and on her admission, she complained of much pain on the inside of the right knee, particularly in the situation of the internal lateral ligament, more severe at night and disturbing her rest. There was some pain over the whole joint, but more upon the inner side. The leg was flexed upon the thigh to a great extent, and any effort to extend it produced great pain. The muscles which flexed the leg appeared to have got into a contracted condition. I ordered her half a grain of acetate of morphia at night, and, to relieve the local affection, a moza was applied over the lower part of the vastus internus muscle. Here you may remark, that there was a deviation from the principle which I inculcated in a former lecture. I said it was hest to apply the mora near the part which was the seat of the disease; and so it is where there is sufficient substance to admit of the exchar. The coverings, however, over the knec-joint are so thin, particularly over the internal condyle, that there would be a risk, on the separation of the slough, of the ligament being exposed, and producing a more severe a little above it.

November 7th, the report says, her pain greatly relieved; sleeps well at night; pressure over any part of the joint is not productive of much pain; the general health remains good; the moxa discharging very little. From this time to the 20th, she made very little progress; there was rather more pain in the knee, and she was unable to extend the leg. However, she slept well, the appetite was good, and the secretions were in order.

December 2. Rather more pain in the knee, which she attributes to efforts to extend the leg. Had little rest last night in consequence of this. I desired that the mora should be repeated, as the former had mearly closed, and, forther, that instead of the passive motion from day to day, the knee should be placed on a splint, with a hinge, which, by means of a screw, could be gradually extended, and that it should as they are about the be screwed out daily, but not to such an extent as to produce suffering. The application of the splint produced some pain,
which lasted a very short time however,
and she now suffere but little. There is bet

also, I had the importantly of seeing her, and I was plaused in find that the leg. instead of heing closely flaxed on the thigh, had now got nearly to a right angle with it, and, no doubt, by the continuance of the same means, we shall eventually render this part perfectly free, that is to say, the limb entirely extended.

Remarks. - This is a common case of

affection of the knee, particularly in women. The internal lateral ligament is, for an obvious reason, more liable to diseases in the female than any other ligament in the kneejoint. We find, on looking at the skeleton, deprived of the soft parts, that even in the well formed male the femur has a little inclination inwards, towards the median line, as you trace it from above to below, and that from the difference in the length of the two condyles the tibia is put nearly in a straight line, so that every person who is well formed, is slightly in-kneed. But where the pelvis is broad, as in women, and the upper part of the thigh-hones is separated to a great extent, the inclination inwards, towards the median line, the obliquity, is greater; consequently, all females who are well formed, have that particular inclination of the limb which is termed in-knee conspicuous. Sometimes this occurs to a very considerable extent. You may observe in a woman who is walking, when the pelvis is very broad, that she has a slight waddle, inasmuch as she is obliged to throw the inner condyle of one femur over the other, as she brings it forward in form of disease. So the moxa was applied progressive motion, otherwise she would strike one knee against the other. gives a rolling walk to women who have a wide pelvis, and on every occasion of forcible extension of the leg, as in running, jumping, and so forth (and it occurs also in falling), the internal lateral ligament receives the greatest stress, and is, therefore, more frequently injured, and more subject to disease, than any other ligament of the joint. Next to this the posterior ligament oftenest becomes affected, because if the extension of the leg beyond a certail degree, that ligament is put most () the stretch. There was no other evide see of affection of the knee, in the preser case, further than some general pain, whic , ho ever, was trifling in comparison w which existed just over the is not uncommon. The would placed so immediately about

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being discused, the moment the leg is extended the former is stretched and the pain more severe. From constantly maintaining a flexed position for many days together, therefore, the contraction becomes almost permanent, and considerable force is required to effect the extension when it has existed for many weeks or months. The points in this case, therefore, are, that the part diseased was indicated by the seat of the pain, -and the character of the disease by the pain being worse at night,—thus affecting the fibrous tissue. The motion of the joint without crepitus, showed the evnovial membrane to be free from any participation in the injury. She has been cured under the simple application of small moxe, and attention to the general health.

CARE 2.—Affection simulating Disease of a Ligament of the Knee-Joint.—Harriet Winch, aged 29, a cook, residing "th a family in Thames-street, was admatted into Lydia's Ward on the 4th of September. She states that about two months ago, after much exercise, she experienced pain at the posterior part of the left knee, which in a short time became so severe as to oblige her to discontinue work. She then went into the country, where, from rest and quiet, the pain left her. She re-turned to her situation, and in the course of two or three days the pain again attacked the knee with increased violence, and was particularly severe at night, disturbing her rest. Leeches were applied to the knee, but with little or no benefit. On her admission, she complained of a dull aching pain at the posterior and inner part of the knee, particularly towards evening and during the night. The posterior part of the joint was apparently a little swollen, and extensely tender. I found after her admission that I had been led into an error, probably from not quite understanding her description of her case. I understood that she had had an affection of the knee, applications and administration of the knee, applications are administration of the knee, and the content plied Joons counter-irritant and lecches, some its the country, and there recovered, the local affection is the recovery of the local affection in the second in the spelication of lecches that it appears that in stating the techniques of the terrestreet on the red to the treatment on the sen she was an out-paes the was addisordered

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muscles as to the position which the patient which was thus relieved for a short time, maintains to enjoy rest, or freedom from pain. The patient, thangaire, lying on the back, fixes the leg on the ball, and suffers lief. She was now ordered an additional less in that position, particularly when the internal ligament is affected. The ligament of extreme heat in the knee, a cooling spiralized the recent that legs in the left in was anythed to it as the rituous lotion was applied to it, as she thought it would be grateful to her.

On the 16th (nearly a fortnight after) the pain and tenderness were somewhat less ; the rest at night was much less disturbed, the condition of the bowels and secretions was good; the uterine functions were regular. The onium was still continued, and a blister was now ordered to the knee.

23. Rest rather better at night; in other respects much the same. The former blister having healed, place another over the joint.

Oct. 6. Complains of much pain in the posterior and inner part of the joint. Omit the opium, as it produces headache and constipation. Blister repeated for the third time.

14. The pain and tenderness less; rest at night less disturbed, but she still complains of pain in the head, which is referable to the forehead.

23. The pain in the knee greatly relieved; pressure produces but trifling suffering, but the pain in the head is still very distressing. The opiate was again tried, with a stimulant, the liquor opii, with the camphor mixture. Apply the strong blue cintment, with lint, to the knee, not to be rubbed in, but merely laid on the surface.

30. Pain in the head less, but still distress-In other respects much the same.

Now from my inquiries. and seing the little benefit derived from the local remedies, I began to suspect that there was an hysterical diathesis, and the local disease was continued principally from this. I now ordered her to take the compound galbanum pill, and, with this, a small quantity of hyosciamus every night.

Nov. 4. Not quite so well; the inner part of the knee continued rather tender; rests better at night, but is occasionally disturbed with pain. She was now ordered to take the pill twice a day, and upon the affected part was to be placed the soap cerate, simply with a small quantity of opium, the blue cintment having produced some degree of superficial irritation.

11. Less pain in the knee than since her admission, but pressure over the inner part of the joint gives pain; rest at night not disturbed, and general health improved.

18. Pain in the knee again severe, and the joint tender. I now increased the power of the anti-hysterical medicine, giving the ammonia of the tincture of valerian twice or three times a day, in drachm doses.

25. Much the same. Complains of paining the knee, and rest disturbed at night. I Frequent tremore of the limb, which last about ten minutes, after which the pain is affection is not one of actual inflammation very much increased. Tenderness over the of the ligaments, actual inflammation very much increased. Tenderness over the of the ligaments, actual inflammation of the ligaments, actual inflammation of actual inflammation of the appealing tender of the internal, late her the subcarbonate of iron, still, however, ral, and posterior includes the internal, late her the subcarbonate of iron, still, however, ral, and posterior includes the pain would holding the opinion, that the affection depended a good deal on hysteria.

Dec. 2. Pain and tenderness the same; complains of throbbing at the joint; says she has occasionally extreme heat at the of an hour, followed by a corresponding degree of coldness; trembling of the limb occurs more frequently; pain is increased for a short time after the cessation of the tremors; sppetite more impaired; the secretions from the bowels are extremely offensive, of a dark colour; the bowels are torpid, but the uterine functions are natural. I directed that she should have the asafertida injection, about half a drachm of the common asafætida dissolved in half a pint of topid water, and injected every evening. On the 8th, after she had had one or two injections, she complained of some tightness across the chest; rest much disturbed; headuche remained; altogether much in the same state. Appetite a little improved. This patient, also, for the present, will quit my care, as she is desirous of leaving the hospifirst attack, did all that was necessary.

Remarks.-This has been an interesting case, inasmuch as in the first instance there was every evidence of affection of the joint of a serious kind, that is to say, acute inflammation of the internal lateral and the posterior ligaments. Perhaps the situation in which the affection was described by her to exist, prevented me from inquiring so far into the history of the case as I should have done; and this combined with a belief that she had been relieved, as I said, by counterirritation and leeches, induced me to believe that it was a case of disease of those ligaments, from inflammation, which would be relieved again by rest, and the treatment which had before been adopted. I therefore | tient's address, and she has promised to treated the case at first as declared in the report which I have read to you, and until I found that she had the nervous tremulous pulse belonging to hysterical patients, that she was frequently the subject of headache, soldom without it over the forchead, and that she had a pallid look. This, however, was a little puzzling, when we came to find that the uterine secretions were in a proper condition; but as I have seen frequently exceedingly well-marked hysteria, even in a violent degree, while the uterine functions have apparently been in a good condition, I was not so much surprised as I otherwise might have been.

Now there are further symptoms here views I had taken with regard to the knee, which it may be as first of all, the peculiar wall to moint out, that convince me the nated " hysteria" pute of

larly when the limb was at rest, and she would have complained of pain therepespe-cially on pressure; but when you come to examine the surface of the joint, it matters inner part, which continues about a quarter little where you press. If you press on the patella, on the ligamentum patellæ, between the patella and the internal lateral ligament, there, or even on the vastus externus, or internus, or on the insertion of the internal muscles, or higher up, or lower down, it is all the same; she still complains of pain. It is true she complains of pain more if you press on the posterior or lateral ligaments, or on the anterior part of the joint; but supposing that had been fibrous disease, what would be likely to occur under the unimproved condition of general health? I know that the fibrous disease would have gone on. Besides thickening, we should have had ulceration taking place, and further tumefaction, an increuse of pain, with general rigors, indicating the commencement of suppuration, instead of which you find that in one day's report the knee is detal to obtain country air, which, after the scribed as being rather better, the pain less severe, and the rest better; then a day or two afterwards, without any obvious reason, the pain is aggravated, and the local disease rather increased, and the patient thus going backwards and forwards. This is not the character of actual disease of the ligaments, unless there be some peculiarity of the constitution, some apparent change, from time to time, which will enable you to account for the local alterations that take place. This case has been one of considerable interest, and it has assumed so closely the character of ligamentous disease, that I shall take care to investigate it further. I have therefore desired Mr. WHITE, who kindly assists as my clinical clerk, to take the pame know from time to time how she on. She has gone to reside in a farer atmosphere with her parents. I have di-rected that she should take occasions by an aloetic purge, composed of aloes, hi beciamus, and colocynth. I have given her also the compound steel mixture, with a quantity of castor. This showing regularly, and I have direct to an intelligent medical ma bourhood, who will modify from time to time, acc toms. I trust and able in a short time ably of this case and views I had taken

local disease, and, again, how much the was very trifling on pressure upon the thigh-general health has to downth the continue hone. Complains of some soreness about ance of local affection, whether sympathetic the condyles, much increased at night. or real.

CASE 3.—Complicated Distance of the Knee-Joint.—There are two other cases in the house at present, which afford proof of further extension of disease of the knee. One is a man named Richard Gifford, a sailor, who has partial anchylosis of the knee-joint, a man of intemperate habits, aged 47. He was admitted into Abraham's Ward, on the 19th of November. He states that at about the year 1819, sixteen years since, while at sea, he received a severe blow on the outer side of the knee-joint, from the fall of a block. Much pain and swelling followed the injury. He was obliged to discontinue work, and then he obtained admission into the Bermuda Hospital. Bilsters were frequently applied, and blue ointment was rubbed upon the surface of the joint, and under this treatment the swelling gradually disappeared. He left the hospital as cured, but there remained stiffness of the joint. From that time till about two years ago he suffered but little, except from stiffness, when the joint, without any apparent cause, began again to swell, and was very painful, particularly at its outer part. He got admission into the hospital ship, the Dreadnought, lying in the river, and in about three months he was discharged as well. The stiffness of the joint, however, increased, and in about two months after this the affection again came on, and then he was admitted, complaining of a dult aching pain in the left knee, not referable to any particular spot. It was much in-creased during the night, and on pressing the head of the tibia against the condyles of the femor, an acute darting pain was expericaced, particularly at the auterior and inner part of the joint. The condyles of the femur were somewhat enlarged, and the motions of the joint very limited. There was slight power of flexion and extension. He cannot bring the limb perfectly straight, nor can you carry it far back. The pain was not particularly severe during the day; it seemed to extend up as far as the great was not particularly severe during the day; it seemed to extend up as far as the great trochs her, and slong this course there was some light tenderness. The limb was a little was do. The secretions were natural, and the general health good. Upon examining a cioint, I should say that there was a fifther and there baying hear destruction. of there having been destruction head of the tibia was raapproaching to the posterior

29. Much the same; can bear pressure on any part of the joint, except on some

part of the inner condyle.

December 2. More pain in the joints and at the inner part of the condyle; rest at night much disturbed; the appetite remains good; howels slightly constipated, but regulated by the house medicines. Repeat the blisters. Not much alteration since the last report; if anything, tenderness rather diminished.

Remarks .- I believe that in the first instance, that, from the description given (which, however, will hardly enable us to decide accurately), he had probably had inflammation affecting the ligament and the synovial membrane. He describes the pain to have been very great, and the swelling very considerable, so that he could not continue his work. In the Bermuda Hospital, probably from the active treatment that was then adopted, the disease was checked before proceeding to the extent of suppuration, so as to form an aperture by ulceration. in consequence of the destruction of ligament, of the synovial membrane, and of the cartilage, the articular surfaces became united by granulations, and then again the granulations were prevented from becoming essific by submitting the part to slight motion. This is not an uncommon termination of diseases of the joints; rarely, however, does it reach, in the knee-joint, this termination, because when suppuration occurs, the constitution suffers so much that the patient sinks under it.

We have, however, specimens here to show to what extent the disease may go. Here is one in which you will see the joint nearly obliterated, and the condyles of the femur united to the head of the tibia by ossific matter. Here is another preparation, in which you will see the head of the tibia resting on the anterior part of the condyles of the femur. In this instance dislocation had taken place, in consequence of ulceration of the ligament, the synovial membrane and cartilages, and the man's foot had come forward, so that the anterior part of the tibia was at right angles with the anterior part of the thigh-hone. In that position union took place, even to the extent of ossification, as you will see by the preparation. Now in the case of which I have just read the particufrom the deposition in those lars to you, there has been very slight alteration from ulceration, and why I say there has been ulceration is, because the head of the tibia has separated a little from the conblace without there dyles of the femur. The patient lay in bed, with the limb supported on a pillow, which allowed the tibia to pass backwards. This is, however, better eeen with reference to a

CARR 4.— Inflammation, alcoration, and dis healthy pra-raction of ligements of the knee-joint.— condyles of the struction of ligoments of the knee-joint.— Samuel Buffler, aged 24, residing at Blackheath, a porter by occupation, of regular habits, was admitted into Abraham's ward on the 1st of October, 1835. He states that joint discharged when about seven years of age he had some alight affection of the knee-joint, arising from a blow he received at play. About Christmas, 1834, he fell with some violence on this knee, and the accident was followed by considerable pain and swelling, so as to oblige him to discontinue his work. Leeches were applied to the part, and he remained pretty well, occasionally suffering pain in the joint. At last the pain became so severe, and the joint so much swelled, that he could no longer use the limb. After some time an opening formed of its own accord by an ulcerative process of the inner side of the leg. about two inches above the joint, which gave exit to a large quantity of pus, together with synovial fluid. Upon his admission he complained of severe pain in the knee on pressure, particularly at night; the tibia was partially dislocated backwards, and the head of the tibia was also somewhat enlarged. The wound discharged a healthy pus, the limb was much wasted, the rest at night disturbed, but the general health, considering all things, pretty fair. He was desired to take the compound rhubarb powder, consisting of rhubarb, soda, and calumba, and three grains of the sulphate of quinine in infusion of roses, and he was to take half a grain of muriate of morphia, to procure rest at night, and half a pint of porter a day, and he was placed on the house diet. A moxa was applied to the outer side of the joint, the knee was to be slightly flexed, and supported on a pillow to allow the condyles of the femur to sink backwards.

Oct. 8. The moxa discharges freely; pain

oint produces great uncasiness.

14. The condyles of the femur appear to have recovered much of their natural condition, but still, at the joint, there is a darting times you will have the destruction of carpain occasionally. On the whole, the gene-

ral health is improved. 21. Complained of no pain except on mothe inner side of the thigh produced a dis-suppuration to any extent, and no external charge of healthy pus. The size of the knee aperture was formed, and he got right is is diminished; rest good. I desired now is severe state of the distribution of the that the leg should be placed on a swing box, which would give him more facility to will find the formation of master move in bed, and at the same time allow the condyles to sink backwards.

26. Has had much pain since the leg was cavity of the joint, and then d placed in the cradle, and but little rest in itself through an opening forms consequence. A slight swelling is traced on At this time the constitution

healthy pue. This mileved the paine the condyler of the diffic still alightly project forwards, her put me miles has been placed a in the crud

11. The world in the bater side of the joint discharged white so main in the knee, pressure over the later lives not produce pain, aloops well at significant general health

18. Discharge from the wound fles, in

other respects much the same.

24. Is still doing well. December 1. Is free from pain, the wound on the outer side of the joint is healed, that on the inner part discharging pretty freely; the general health remains good. A small sore is formed on the heel from pressure. On the 7th, three days ago, he was improving and gaining health and strength.

Remarks.- In this instance the case is rather more clear, showing injury at an early period of life, producing chronic in-flammation of the ligament. He recovers from the first attack, and then, by further violence, gets a more severe form of it, quickly running from the adhesive stage to the ulcerative. Great swelling immediately takes place, great disfigurement ensues, the ligaments are soon destroyed by the ulcerative process, and unless care he taken, they quickly separate from their attachment, and the articular surfaces become dislocated. That has been the case in the preparation on the table, and to such an extent as to produce a deformity that would be hardly credible. I have seen several instances of this kind in which the tibia has been dislocated backwards in this way upon the femur. That could not place without destruction of the lateral ligaments, the posferior ligaments, and the crucial ligaments. At this time the disease has extended also to the synovial less; sleeps better, but slight motion of the membrane, and the cartilages, which have been destroyed in the process of ulceration. The extent to which suppuration takes place in these instances is very various. Sometilage, of the synovial membrane, and of the ligaments, with but little apparent formation of matter, as in the case of Gifford counter-irritation. But at other times you tensive, as in the instance of Ruffles, where the matter for the inner side of the knee.

30. Suffers very considerable pain; the swelling was increased.

Nov: 2. There being fluctuation, an opening was made to give exit to a quantity of we get of this kind in the large transfer.

hospitals, more frequently require to be re-muved to get rid of the source of irritation to save life, than to stronge the reure them otherwise, as in this pathon. When I ad-mitted this man harden has the house, there being an opening security live house, there being an opening security lives disaboration, and itrength below page 1 was doubtful whether I should not have to remove the leg, but he has some on we will, under good diet and has gone on so well, under good diet and careful attention, that I have no doubt now of the ultimate favourable termination, unless the healing process is disturbed by some accident; we shall get the granulations perhaps to inosculate, and then he able to use passive motion. This will depend, however, on the closure of the wound into the joint, for so long as that wound exists, it cannot oe right to use passive motion, because we may increase the injury by it. But as soon as the external wound is closed, passive moion may be resorted to, and he will then get ome use of the joint, perhaps to the extent hat the man Gifford has, and perhaps a ittle more. These cases will then show the prentest extent of disease compatible with he safety of the limb.

We have thus seen the knee-joint affected, and the synovial membrane liable to be disased, as well as the articular extremities in ir cancellated structure, and the liganeuts, but more particularly the internal and the posterior, in which case the disease if the ligamentous structure extends to the guovial membrane, and the cartilages beicath become destroyed. The articular suraces are removed, a new deposit takes dace, which unites the osseous extremities if the bones, sometimes by fibrous matter und sometimes by osseons matter. These ases, which proceed to an extreme degree, arely do well, in consequence of the difficulty of maintaining sufficient power in an timosphere like this, but the cases I have ited are exceptions to the general rule. ave not at present any other case of inte-est of this kind in the house, and as we save now followed this subject up in three ectures, I shall go to another subject when lexitive meet.

A rolle, published in Dr. Lombard's work a the influence of professions on sulmon ry consumption, shows that, of all its circle in the large is the inhalation of regetable emanations, which is in a large in the large is the inhalation of localities. Next, but at a large in the large is the large is dealing in the Next, which is a large is active causes in the large in the large is active causes in the large in the large is active causes in the large is active causes in the large in the large in the large in the large is active causes in the large in the larg

ST. THOMAS'S HOSPITAL

CLINICAL LECTURE

ON A CASE OF

SIMPLE FRACTURE OF THE LEG; FOLLOWED BY GANGRENE.

Delivered in the Session 1835-36.

BY MR. GREEN.

Ters morning I shall address to you; gentlemen, some observations on a case of simple fracture of the bones of the leg; which was followed by gangrene, in a case that was admitted on the 6th of October last. The patient was Charles Hayling, aged 47; a flour porter, of good stature, and inuscular, though not bulky. He had been a gin and porter drinker; latterly, however, only taking porter on account of a cough. I do not know, however, whether, to care the cough; he took the porter, or left off the gin, but he had had a cough for some time. In other respects he said he was temperate in habits, and not accustomed to intoxication. While standing on the step of a door, a brewer's dray was suddenly pushed back, and jammed his right leg between the wheel and the step. He was immediately brought to the hospital; where it was found that the tibis and fibula were fractured, with comminution, at about the middle of the leg. There was considerable effusion around the seat of the fracture; and a small wound on the outer side of the leg, not however communicating with the fractured portion of bone, so that the injury came within the description of what is termed a simple fracture. There was also some grazing of the skin; and a remarkable fact is stated by Mr. Taxw, under whose care the case came. No pulsation could be felt in either of the tibial arteries at the ankle. Now this, in connection with the subsequent circumstances, is a fact worth notice. The knee was half bent, and placed on the side, and, though there was not much bruising, on account of the swelling and tension, the leg was wrapped by Mr. TREW in flannels steeped in hot fomentations. The bruising I was informed was not very considerable, though there was so much swelling and tension as to render it advisable, in Mr. TREW's opinion, to apply fomentation by warm flannels.

of localities. Next but at a location by warm names.

In the evening of the next day, the 7th of October, he complained of great pain in the limb, and appeared rather delirious, wishing the place comes in the place comes and the limb, and appeared rather delirious, wishing the place comes are location to the same of the limb and he answered questions with a location of the arms. I sauch more swellen, and the discolaration

was increased, both above and below the fraction of the man justified the remark. His counture. There is also some swelling about the castille than natural. Fifty drops of the tinctura opil than natural. Fifty drops of the tinctura opil he was very containing to that I apprehence given to him in the evening. Thus the same have have stood by we already see that on the very day after the accident, a change had taken place, which was very unfavourable. You will observe that the sensibility of the foot had become diminished, and the power of such become diminished, and the power of sustaining its natural temperature was much lessened, and that this was accompanied with constitutional irritation; at any rate some disturbance of the nervous system had occurred, which was to be regarded as an unfavourable sign.

The circumstances bring to my mind the case of a man, which indeed has been published, with a compound fracture, in which at the end of about ten days, when the patient seemed to be going on favourably, violent hemorrhage took place, and it be came necessary to amputate the limb, though the condition of the patient was very unfavourable. Indeed, stimulants were essential to bring him to bear the operation, and yet its necessity was absolute, for the loss of a very small quantity more of blood would have destroyed the patient, as we could not get at the artery. The patient being of a healthy and robust frame, and the loss of blood apparently the only cause of the depression, I injected several ounces of blood into a vein at the bend of the arm, and the man, in consequence, revived uncommonly, took nourishment, and seemed to be going on well; but ou the next day he altered and was sinking. I repeated the transfusion, but without any effect. The first untoward symptoms were, restlessness, and a desire to get up, but he was easily wandered. What change could have induced the latter symptoms which he exhi-bited? It turned out afterwards, that morthat it was this which caused the first symptoms, and also prevented the second transfusion from producing good effect. The mortification may have been partly the effect of the great loss of blood reducing the powers of the system below the requisite condition to sustain vitality, followed by the infliction of such an injury as amputation. Mortification of the stump took place, which we failed to overcome.

To return to the case before us. The foot was observed to be cold. Opium was given in the evening, and it was thought well to envelop the whole limb in a poultice.

Oct. 8. The patient is much easier. The opium had produced him a quiet night. Bowels regular, his general health maf-Bowels regular, his general manus.

Bowels regular, his general manus.

Bowels regular, his control port for the control too strong an expression after, hearing that dent. Here was the pulse was 110; however, the appearance needed what a control was

The report goes on to state that his pulse was 110, rather full, and not wanting in power; tongue clean; skin warm and moist; perfectly sensible. The peculiar wandering has gone off; it was a very remarkable symptom. The leg is now more discoloured, as if it had been severely braised. The foot exhibits many large patches, and a bluish red colour on a perfectly white ground. There is cedema about the ankle, and much tumefaction about the lower third of the thigh. The skin of the thigh is very hot, but not discoloured. The superficial veins of the thigh are remarkably charged. There is still the same want of sensibility in the foot, and an absence of pulsation in the tibial arteries. It short it became perfectly distinct that gangrene was taking place to a considerable extent; but it was remarkable that the system generally bore the injury so well. It seemed at that time scarcely to have taken the alarm. It is remarkable, I mean, as an unfavourable symptom, for very commonly you will find that where the system does not take the alarm, when there is sufficient cause for alarm, there exists some cause which is likely to interfere materially with the patient's recovery. It has been noticed, - and I think there is some ground for the observation, though it is difficult to come to any very decided conclusion upon a point where quieted; still when left to himself his mind the instances must take place under such varied circumstances that one cannot feel justified in generalizing with great confidence, -but it has been observed that pertification had occurred on the face of the sons who do not complain much at the time stump, and I do not in the least doubt but of undergoing an operation, but bear it apparently perfectly well, often do very ill after-wards. This fact seems in some degree to bear upon the case now before us. Hare was a patient in whom, although there was juite sufficient cause, from incipient gangrane, for violent irritation of the system, yet the sysviolent irritation of the system, yet the system seemed to be unaffected. I saw aim on the 8th, which was the third day, and I well remember, as mentioned in the rap it, that while the appearance of the Mante

grenous, his general health was a Well, I had to make up take the treatment. Although, in some of a favourable constitution, y had, beyond coubt, been to the use of spirituated

sider two things; the help the state of the state at this periods in the proper to appear a ferrors where rangene did not supervene, tate at this periods in the proper to appear a ferrors where rangene did not supervene, tate at this periods in the proper to appear a ferror where the periods are the supply of considering that is the property of the supply of considering that is the property of the supply of considering that is the property of the supply of considering that is the property of the supply of considering that is the property of the supply of considering that is the property of the supply of the sup tional effects which were likely to arise without that operation? I might say that a third point presented itself to my mind, which, though it did not bear very importantly on the treatment in connection with the other two questions, yet is worthy of notice, and that related to the cause of the gangrene. The limb was so jammed by a cart-wheel as to produce a severe contusion; and there was a good deal of swelling after the accident, but still, according to the report of the appearance of the leg immediately after the accident, it did not appear even probable, still less certain, that the gangrene was entirely produced by the local injury. There was no appearance, on admission, of the parts being so crushed as certainly to evidence the cessation of their vitality. Therefore, the question might very well be asked. What was the cause of the gangrene? Doubtless, the bruising was one cause; but it seemed probable that there was something more. One naturally asked then, Is any main artery so ruptured as to cut off the supply of blood? I called your attention to the fact, that there was no pulsation in either the anterior or the posterior tibial arteries; but if, for instance, there had been rupture of the popliteal artery, that might have explained the want of pulsation in the arteries at the ankle, but not, with certainty, the occurrence of mortification.

I recollect the case of a young gentleman, who, in riding a race, struck his knee against a tree, and fractured both hones of the leg. The limb immediately began to swell, and so continued until it was swollen to a prodijous size. The surgeon in attendance was orly at a loss to account for this extraor linary swelling. The patient was treated in he usual way, and after the usual lapse of me at which a fracture might be suppos d to be united, it was found that the uni n had not taken place. He was placed dridatesavay's fracture apparatus, but hatter success, the swelling did not the districture did not unite; inflam-suppuration, and abscess, supera came on a bleeding, and then it amputate the limb. And

preparation on the table, taken from the Museum, in which you will observe a clot in the brachial artery; and I recollect having heard Sir Astley Cooper speak of this case as one in which the mortification of the limb (for the arm mortified in this instance) was supposed to be dependent upon the formation of that clot; but I do not know any further particulars of the case than those which I have detailed to you. We may readily suppose that where an obstruc-tion to the circulation takes place by means of a cospulum, an insufficient supply of blood will be distributed to the parts below, and that obstruction may be the cause of the mortification.

But no such circumstances were found to exist in this case; there was no rupture of the artery, no congulum, no little specks of coagula here and there, as you might have expected. The vessels were empty; nothing obstructed the circulation, nor was there any thing in the history of the case, or in the after examination of the limb, sufficient to explain the very interesting and important fact, supposing it to have been accurately ascertained,-and I do not doubt (considering what Mr. Taxw has stated) that it was thoroughly ascertained, -that there was no pulsation in the tibial arteries. Whether that was connected with the gangrene, in the relation of cause or effect, I am unable to

Let us return then to the questions; First, Would it have been proper to amputate under any circumstances? Secondly, Whether in this particular instance it was proper to amputate at that time.

With respect to the first of these questions, surgeons, I think, are still in some doubt whether amputation should be performed (gangrene having taken place): before a line of demarcation occurs. Most of them have agreed to wait for that line of demarcation, in opposition to the opinion of the older surgeons, that amputation is a remedy against the spreading of mortifica-tion. Indeed, I think ample experience has shown that if you amputate during spreading gangrene, under ordinary circumstances, mortification of the stump generally the man appearance is a construction of the sump general part of the part of t in a man who was admitted under the care of Sir ASTLEY COOPER, mortification had taken place from anenrysm in a vessel of the arm, and Sir ASTLEY amputated without there being anything like a line of demarcation. There was a case of simple fracture in this hospital, in a maniac, who, heing troublesome here, was sent to the parish house, but with the arm properly handaged. But he succeeded in removing the splints, and mortification took place. Amputation was there had recourse to while the gangrene was still extending; and it did not reappear in the stump, but the man did perfectly well. Taking all things into consideration, we may perhaps say, as a general rule, that it is proper to wait until the line of demarcation has shown itself; while, at the same time, there are certain cases where you may amputate previously, supposing the mortification to arise from a cause which is entirely within the part and only relating to that part. Have a care, however, that the exception which you make to the general rule shall be perfectly in point.

And now, to come to the next question, whether, in the particular case before us, amputation should have been performed, although the system was not affected, and although the mortification might have been referred to the precise spot implicated. But I was very much in doubt whether the mortification could be referred solely to the local injury, and I am inclined still to think, though the issue of the case is before us, that such was not the case. The man was a great drinker, and perhaps, though I have no means of exactly determining the point, some alteration had occurred in the state of the large vessels. He certainly did not appear to have any disease of the heart, yet there might have been such an alteration there or in some of the large vessels as would produce a change in the circulation. therefore appeared to me exceedingly doubtful, to say the least of it, that the mortification depended solely on the local injury. However, his appearance on admission being good, and not such as indicated that mortification was pending, I considered that we should give him a better chance of recovery by waiting until the parts should be in such a state as would allow the amputation to be thought that advantage might be safely performed, so far as regarded the prospects of healing, and until such symptoms appeared as would render the opera- the tinctura opti, and then tion imperative, but which did not exist at | tinctura hyes the time I was considering these matters.

On the 9th of October I found that he TRAVERS. was not so well, and had lost his appetite. 13. He slegs

tification arises purely from local causes, and He had slept tolerably well during the past is dependent upon circumstances entirely night, except when disturbed by shooting within the part, you may amputate before pages in the leg; the limb was more gene-the line of demarcation has occurred. In-trally bluish, and a part of the skin above stances might be adduced where this plan the interpretable of the skin above has been successfully resorted to. Thus the fit there was some token of segaration. the injury presents to the part of the part of the limb On the outer and back part of the limb there were several small restantions containing serum. The bluish appearance gradually subsided into the natural appearance, upon the thigh. The tumefaction had not increased, but the swelling extended to the upper third of the thigh, and there was a curious sensation in the femoral arter if air had been diffused through the cellular tissue. The other parts of the thigh had a doughy feel, but did not pit on pressure. Pulse 108, rather jerking, but not capable of sustaining pressure. The tongue was slightly coated; the howels were regular. I omitted to say before, that as his habits had led me to infer that his strength could not be supported without his accustomed stimulant, I ordered him four ounces of gin daily, and full diet, directing the dresser to watch for any febrile symptoms, and then diminish the quantity of both, in order that the actions of the system should not be roused into tumult.

On the next day the quantity of gin was ordered to be increased to six ounces, with a little port-wine mixed in sago or gruel. think it makes a great difference, whether stimulants are mixed with food or not. In food they do not seem to exert the same influence in rousing the action of the heart; they do not have the immediate effect of diffusive stimulants, for they are not then so concentrated.

On the 11th it appears that he had slept well during the former night. He was without any appetite. The state of the limb was not much varied. The foot was more bluish, but had some little warmth and sensibility remaining. The leg was dark blue. The thigh was emphysematous, and rather bluish; pulse 104; tongue whitish; bowels relieved last evening.

12. The report states that he did not sleep last night, in consequence of muq sharp pain extending down to the for There is considerable vesication on the on the outer side especially; but little sation below the ankle; the swelling o thigh has increased since yesterday now extends to the groin; the wi pulse 100; tongue clean; borskin comfortable; appetite using some other stimulant, and of the carbonate of ammonia, and

14: I made to day three incisions, each about two inches in length; one on the front, one on the outside of the leg (both through the living and the dead skin), and n the outer side of the thigh, in consequence of his having experienced a good deal of pain, which seemed to me to originate very much in the tension of the parts. I also thought it probable that there might be some matter or sloughs under the skin.

15. Much relieved from pain by the incisions, and feels better. The line of separation has commenced on the outside of the

16. Had no sleep last night, from great pain in the middle of the leg. There is a slight sensation of fluctuation just behind the middle of the leg. I passed a lancet deeply into it, but no pus escaped. The discoloration of the leg had not extended; pulse 108.

17. Passed a good night, but his constitution is now beginning to suffer. The cheeks have a patch of pink on them; skin hot and dry; tongue dry in the middle, with moist edges; pulse 116, full, and irritable; bowels He has become thinner, but is in open. less pain. The separating line is still pro-ceeding. The leg, just below the knee, is extremely sensible when pressed upon, and the emphysems now spreads over the whole front of the thigh, which is more swollen.

18. Much the same; pulso 118, jerking. The lower part of the leg is now quite black. An irregular line marks the boundary

of the gangrene.

19. Slept tolerably well last night, and is in less pain, but his features are beginning to shrink, and there is more hectic flush upon his face; pulse 120; pain diminished; and the line separating the living from the dead parts has slightly commenced. There is a plentiful but thin discharge from the thigh.

20. The separating line is now quite disthat; he slept very well last night, but his ters are beginning to flag; pulse 120, erling, and very easily compressed; bowels

ar; appetite impaired.

He wandered much during the night, lowards morning became sensible, i his manner is rather hurried; be is determined to amputate, as the only chance of saving his life. I now found the appearance of sepa-ment rease marked, though not even the state of eration was not

move diffused, but no distinct line of departy vious that they were smalls to carry him cation; the crepitation has increased; guies; through the process of separation of the 108, full, and telerably firm; tongue whitish; limb. Accordingly the ampustion was per-Ordered a mutton-thoughtful the same of the and cellular tissue at the back of the thigh were full of adhesive matter, and glued firmly to the fascis. Fur excepted on cutting through the muscles. There was rather more venous blood than usual lost, and he became rather faint. Brandy was administered, but he appeared sinking. Three ligatures were applied, and a strap of adherive plaster was used, pro tempore. He was taken to bed and a drachm of tincture opii was administered. I remained with him for some time after the operation, for he certainly was in a state of complete depression from the operation. It was evident that the system had received a very severe shock, and though the quantity of blood lost during the operation was not very great, yet I apprehend that it was very sensibly felt. There was one symptom which you will often see in persons who have lost a good deal of blood, an anxiety about the breathing, as if there was a difficulty in filling the lungs, a restlessness, a turning from one side to the other, a gasping with the mouth, and, withal, considerable depression. However, I left him, with directions that he show be supported as far as possible. Diffusive stimulants were given ad libitum, in order to keep the powers of the system going until, if it was possible, a reaction might take place, and some symptoms of restoration should appear. At seven o'clock, having taken brandy twice, he was still very low : the pulse was very quick and weak, but yet he rallied after each administration of the brandy-and-water. The stump had been dressed, and there was but little oozing from it. Still, notwithstanding all these means for rousing the system, he died at half past nine o'clock on the same evening, without having exhibited the slightest appearance of reaction, although by that time he had taken nearly half a pint of brandy. An attempt was made to give him forty drops of the liquor opii in a camphor mixture, a short time before his death, but only a very little of it could be got down.

Then came the examination of the limb. but I am sorry to say that there was no examination beyond that. I wished to look at the heart and great vessels, but the friends would not allow it. It was found that a setangular portion of the tibia had been detached and driven backwards, being in close connection with, though not pressing on, the posterior tibial vessels. Three inches below that, the bone was surrounded by a considerable portion of lymph. The arts. ries on being slit open appeared to be healthy, and contained but listic fibring. The mus-Life limb. As this cles on the other side of the leg size seemed to be healthy. The fibula was fractured thing, and perfectly obleelus, a considerable way below the franchistic in the knowledge of diseases of the ture of the this. On cutting into the tip the have not been tery aucient. Dever knee joint, bloody matter escaped, and the state of approximately with the continuous substance was a little distributed diseases in the fashion of the day. cartileginous substance was a little disorganized.

Could any other plan of treatment have been adopted in this case, with a better chance of saving life? Was any thing omitted which could have contributed to his recovery? Really, on reviewing the circumstances, I am not aware that a different plan could have been adopted. The man was intemperate; he had received a severe contasion on the leg, accompanied by fracture; and, apparently, partly from the contusion, and partly, perhaps, from the state of his circulation, induced by his habits, gangrene occurred. Had amputation been performed when first the operation suggested itself, the probability is that gangrene would have taken place in the stump, or that the patient would have died from the effects of the operation, as he did at a later period. The plan of treatment consisted in supporting, without rousing to turnaltous excitement, the powers and the functions of the system ; and they were tole. rably well sustained until the parts began the line of demarcation from adhesive informed, the actual separation of the dead under an overwhelming injury. Under these unfavourable circumstances amputation was performed, when it could no longer be de-layed, but, unfortunately, the state of the system during the amputation, combined with the shock of the operation, produced the unsuccessful result which we have to

DIAGNOSIS OF DISEASES OF HEART.

regret.

ON PALPITATION,

MERVOUS, PLETHORIC, AND SYMPTOMATIC. By JOHN FOSBROKE, M.D., Physician to the Royal Dispensary.

Ters is so prominent a symptom of affections of the heart, that the physicians of yore lumped together all diseases of that farther in his footsteps, than those emin organ under the term "pelpitation," just egotists in England with the been as I have known some modern professor or pupils, and have the state of the contract of the cont

described diseases in one manner as no uny hair is " at one time, that every being distinct of being langued out of the polypus, mortification of the bowels came in fashion; and, when a particular of the polypus, and when a particular of the polypus, and when a particular of the polypus. tient was dead, the surgeon was prid to make out the disease incurable. Dr. Parry will stand high in the estimation of the profession, so long as that man is considered the greatest physician who collects the most facts, and reasons best on those facts; but he blended together hypertrophies and dilatations under the general term "enlargement," giving here and there some distinctions between the two in the course of description. Mr. Abernethy went nearer to the wind, and knew, in a general manner, the two brief differences of thickening and dilatation, and attempted to distinguish these, and almost all diseases of the heart, by the pulse. I remember him, in his striking and facetious lectures, talking of " aggrandizement of the heart's substance, being attended with aggrandizement of the heart's action, a pulse vibrating like a cartrope, and increase of the heart's bulk by to separate, when the aspect of the case rope, and increase of the heart's bulk hy was not at all favourable; and although dilatation, with diminution of its nction. Where the action is increased, the heart fammation, had never been completely is enlarged in its diameter, the carotida pulsate, and both those arteries are dilated, to from the living parts only took place carry off the quantity of blood forced upon partially, and, in the course perhaps of a them. Ossifications, strictures, and confew hours, the patient began to pass into tractions of the annulus venous are attended that state which Mr. Hunters so expressively ed with an extremely weak and quick pulse. called "symptomatic of dissolution" produced | And for why? the arteries are fully supplied with blood! Because it cannot make its way through the contracted heart. They interfere with muscular power, diminish the heart's contractions, and give rise to a pulse scarcely to be felt, and to pain in the part." (M.S. Notes of Anat. Lect. on the Heart, by J. F.) So talked Mr. Abernethy, and practitioners continued for some time to discriminate diseases of the heart through the pulse, like the Chinese, who pretend to discover all diseases through the same medium. I apprehend it is no better guide in the one case than the other.

Beddocs says, that John Hunter did more for the advancement of malical science, than the whole University of Idinto his day, and, if he had had more than and fewer Oxford prejudices. he will be a large to the second seco said, than all the medical corps schools in Great Britain.

Since Hunter, the French have ad e eminent as I have known some modern protessor or pupils, and have his single Medity on their extres doctor retires himself from all manner lips. It was rectained to the feature of throw a broad first of the feature of throw a broad first of the feature of the hoar, and the first the lipself game before him. Our approaches to prebeautiful precision, between hypertrophy cand dilatation, and the show their various indifferently, the morbid action which accusses, combinations, and distinguishing companies those effects, and arises from the characters. "The French," says Dr distinguishing the circulating and nervous systems, "attend very such to, and on the stems. My object is, therefore, to show how very accurately, the symptoms and pages disordered vascular and nervous action afarrong, "attend very much to, and opinion very accuracity, the symptoms and mana-logy of diseases; and, generally specially, their diseases; and, generally specially, their diseases that the second of the course, but they seem as if their only officet, was an find out the disease, without any reference to its relief or cure, for their treatment of disease is most miserable." Truly enough, their treatment of scute disease has been miserable, comparatively, with our own, but they have had different institutions, and, since the ridicule of Moliere, strong prejudices, to deal with. In this respect they appear to improve every day, and in the treatment of chronic discases, I am disposed to think they are advancing beyond us in the extent, minuteness, and correctness, of their therapeutical experiments. But, whether our inferiors or equals in treatment, they have supplied ourselves and all Europe with that whereof we lacked most grievously. "Among physicians, equal in other respects, those who are brought up to distinguish internal affections with accuracy, must always be superior. There is almost as much difference, in the cultivation of this fundamental talent, between some of our schools and that of Paris, as between the chemistry of Glauber and that of Lavoisier. Such a foundation being once laid, the proper structure may indeed not be raised upon it. But no other foundation is fit to receive the edifice of medical knowledge; without it, the superstructure must be both irregular and misubstantial" Dr. Beildues;

It appears to me, from what I saw when I was studying at Paris, and from the tendency of the clinical observations in their publications, that they so much value the study of "organic medicine," by which they mean diseases arising from changes of structure, that they pass over the more numerous diseased actions which depend merely on changes of function, as almost unworthy of regular application, because they are more uncertain, bewildering, and conjectural. In this country, we are bound to attend to em, because they form the chief part of of practice. Medicine means, in England, the "Sick Trade," and the pride of science othing in comparison to the pride of cy-getting. More physiological dephysicing det theories; and sometimes a spinning a cobweb, containing to make a fortune. I think that the French

feet the heart in both aganic and functions

I observed, in the last communication, that there were three kinds of palpitation, the nervous, the plethoric, and the sympto-

The original cause of servous palpitation is, that the heart is the organ of the most universal sympathy (John Hunter). Irritability is variously bestowed, and variously appointed, in various parts of the body, but in all creatures the heart is the most irritable part (John Bell). It is the first organ that receives morbid impressions from the brain, when that organ and the nervous system are disturbed by the mind, or by phy-tical causes. It is the part most directly connected with mental emotions. (Dry. Haighton and Blundell, Notes of Physiological cal Lect., by J. F.) What is more familiar than the different degrees of irritability and irregularity of the heart's action, which are produced by profound and protracted emotions of anxiety, grief, and despondency, or what more common than the sudden suspension of every commotion of the circulating system, and the return of a calm and placid state of the whole frame, when the influence of the depressing passions is re-

The plethoric kind arises from the influence of the blood. Inasmuch as muscles are irritable in proportion to the supply of blood, and deprived of irritability, and even paralyzed, by the want of it (Drs. Haighton and Blundeli), the heart, as it is supplied with a greater quantity of blood than other muscular structures, is endowed with the principle of irritability in a greater degive. Secondly, as the blood is the proper stimulus of the heart and the heart's action, it may be over-stimulated by the excess of its own blood (Mr. H. Cline). Thirdly, according to some, the exciting power is relatively increased, not only in proportion to quantity, but quality; that is, in proportion as the blood is fibrinous, as the clot is more than the scrum (M. Andral).

The original cause of the third kind, or symptomatic palpitations, is the existence of any disease of the heart itself, or of any organ whatsoever, near or remote, capable of opposing an obstacle to the circulation (Prof. Rostan), or exciting sympathetic irrilynn iota of truth, catches fools enough | tation of the heart. Alterations of the heart will often depend on impressions made by actually to much by the spirit of remote organs; in irritation of the brain, its state that insulties into distinct the basis. They look too exclusions are accelerated (Prof. Macring. Ms. Notro of Pathalogical Lett., by J. S.). remote organs; in irritation of the brain, its MS. Notes of Pathalogical Lect., by J. K.); it is linble indental ha, thickenings, alla- it is more, more most minute structures,

 $\mathcal{H}_{\mathcal{G}^{-1}(\mathcal{G}^{+1})} = \mathcal{F}^{*}$

for its sympathics are most extensive. (Prof. Alison. MS. Notes of Clinical Lect., by J. F.)

How are these three kinds of palpitation to be distinguished from one another? In so far as we are capable of discriminating them, it will generally happen that we shall be able to discern functional derangement from organic disease of the heart. Some may regard palpitation as a matter-of-course symptom; but upon a thorough knowledge of it, upon a comprehensive view of the se-veral kinds, and upon a clear distinction between such as have a nervous, vascular, or symptomatic origin, not only an equal knowledge of heart cases must turn, but the practice also must frequently depend-Common nervous and symptomatic palpitations are of every-day occurrence; but are there not cases of mixed nervous and plathoric palpitation, which assume the characters of hypertrophies and other organic affections of the heart? and is it not a chief point to know all modes of distinguishing them. " for it is a great matter to be able to say whether there is any structural disease or not?" (Dr. Macintosh.)

I. Nervous palpitations have been great (M. Rostan) .- Dunbtful again .- J. F. stumbling-blocks in the way of discriminating organic from functional derangement of disease, more frequently affect the auricles the heart. Pathologists inform us that we than the ventricles, and the right auricle shall know them by the following signs and than the left (Professor Home).

circumstances :-

habit, and therefore in women more than in tutes that kind of palpitation which I have men (Prof. Home); and in young, nervous, termed the "plethorie" in contradistinction and irritable persons of both sexes, in parti- to the "nervous." cular states of the brain and its connections (M. Rostan); in fact, in hysterical females, bypochondriacs, and persons called nervous

2. Under all these circumstances of constitution, sex, and age, the usual exciting causes of the disturbance of the nervous aystem and of the beart, are, moral affections. intellectual labour too long continued, losses of all kinds (M. Restas), the excessive indul-gence of various passions, stimulants, vio-lent exercise, accessive depletion, the par-ticipation of the heart in the general dis-ordered new action of the system in bysteris, chiescasis, and epilepsy (Dr. Mac-jatosh); so that the principal causes are, mental or cerebral excitement, depression, or irritation.

3. They happen to persons who have expertenced other nervous phenomena (M.

4. They are at first slight and transient, and are at last reproduced more frequently the heart is seming more irritable (Dr. civical). When, owing to a particular state of the brain and its dependencies, are only instantaneous, they produce no cavities of the heart and in cases attend

profound exteration of health, and they supervene almost suddenly (M. Rosten).

3. The pulse is quicker than netwest, from

84 to 96 (M. Laennee).

6. They are frequently most distressing when the body is in a state of regular during the first part of the night, with all an prevent sleep for many hours (Same).
7. There is sometimes a semistion of in-

ternal sgitation, particularly in the hear and abdomen; and, as in hysteria, the prine is

copious and limpid (Same).

8. They are less troublesome, when the patient is taking exercise in the open air than at other times (Same).

9. The sound of the heart's contraction, though clear, is not heard loudly over a

great extent of chest (Same).

10. Palpitation is without impulse : that is, "the head of the auscultator is not sensibly elevated, and by this circumstance it is distinguishable from the increased motion and shock of hypertrophy (Same) .- This is a doubtful observation .- J. F.

11. They are known by the absence of the signs that accompany discuses of the heart

12. Palpitations not depending on organic

I shall endeavour to show in what re-1. They are most readily excited in per- spects these phenomena, whether derived sons of a nervous and sanguine tempera- from the history of cases or stethoscopic ment (Dr. Macintosh); in persons subject to signs, are true, or more or less equivocal. extreme mobility, of nervous and debilitated But beforehand, I shall state what consti-

Palpitations, in general, independent of organic disease, have been considered by most pathologists "a purely nervous affec-tion." Dr. Macintosh observes that though he has never been obliged to open a vein or apply leeches, he "can readily imagine a combination of circumstances, which will render the one practice or the other advisable : for instance, in a young plethoric person, who is affected at the same time with some febrile movement." I have before observed that this notion of palpitations being so universally "a purely nerve is affection," has been carried too far. I h ve seen enough to convince me of their con ring frequently from vascular engorgen and of the cavities of the heart. I seen a double cause operating in the s case; a plethoric state of the hear with disordered nervous action. those physicians who have compiled on the practice of physic, have glasse the distinction between the nerveus and the heart landsming more irritable (Dr. plethoric kinds. Dr. Parry, whe was a verseinsted). When, owing to a particular profound and logical languist into the district of the brain and its dependencies, access of the heart and circulation, and the profound and logical lands of the land of the lands of the land of the lands of the land of the lands of the

with pain in the left same, resembling angina | remarks, of a plethoric state, more blood politoris, he conceived that the existence of palutation was a proof of the disease of palpitation was a proof of the not being angina, but one of those anomalous affections which originate from blood bring so accumulated. But he blood being so accumulated. But he considered that the effect of the excess was not always the saids. The first and most obvious consequence was to trimulate the healthy heast to inordinate action, which, after a time, was liable to be followed by a proportionate diminution of action, whence syncope and even death might ensue; on the other hand, another and immediate effect of such accumulations was to induce a more sluggish action of the heart's frequency and force, which has been observed in persons of full habit, and in the subjects of angina pectoris, during the time that the accumulation is produced by muscular exertion. He ascrihed these two opposite effects of the same cause, to the difference of predisposition caused by different local causes, -fatness, extenuation or flaccidity of the muscular substance of the heart, ossification of the coronary arteries, or mechanical pressure on the brain, and certain narcotics, predisposing to torpor and retarded action of the heart, to organic causes, as preternatural enlargement,-to acute causes, as inflammation, vascular fulness of the substance or internal membrane of the heart,-to chronic causes, as the irritability arising from want of bodily exercise, or, as he terms it, "defect of due exertion of the voluntary muscles," predisposing to inordinate action. To this last and most important observation he adds that the predisposition to over-excitability of the heart from fulness of blood, "accompanies that condition of constitution which is usually called 'nervous,' in which the heart is peculiarly disposed to be affected by the whole train of mental emotions."

Several cases which I have seen of late. and more especially the very important circumstances in the two by no means familiar cases of Gwynne and Howls, which will be given, fully bear out these two last important and correct propositions. They shed much light on the origin of palpitations, inmmation, and enlargement of the heart, and they bear out the evidences which I we had of mixed nervous and plethoric pitations existing in the same case. tan observes that where there exists no mile lesion, a plethoric state sometimes the lesions more or less strong. Pro-lesions noticed their concurrence, Sectionic or inflammatory diathesis, comity of treatment by blood-letting w diet. M. Martinet also distinguishes on actions from plettors and con-

being formed in the economy, and, cons quently, a greater quantity being passed through the heart in a given time, an excess of action, and papirations, may results from it, which may either disappear with the plethoric state, or, if they parsist, at hast produce hypertrophy, on the same principle that any muscle whatsoever will include the control of the control crease in thickness under the influence of violent exercise. Adding much more than this, he gives a striking case in a blacksmith. and points out what is exceedingly important, the manner in which vascular engorgement may be confounded, through the identical character of the signs, with enlargement of the heart from thickening, now known by the barbarous term hypertrophy. The forthcoming cases will illustrate these as well as other points. The more I have seen of plethoric palpitation, the more obvious has become its importance in connection with diseases of the heart, for the ultimate effects of such forms of palpitation do not always stop at mere palpitation. Dr. Parry ascribes to undue accumulations of blood, those anomalous affections of the heart which resemble angina pectoris. "Pain in the chest, more especially in the left side, stretching into various parts of the left arm, is common to all diseases in which blood is unduly accumulated in the cavities of the heart; and if, during the peroxyem, this motion of the heart is excessive, bot to force and frequency, producing what is commonly called 'palpitation;' that circumstance shows the disordered state to be of a different kind from that which constitutes angina pectoris.

Pathologists baving seen angina (which above all other affections exhibits the tendency of the heart to spasmodic action) prove fatal without any organic lesion whatso-ever, have decided that these changes are not the real cause. Indeed, we see preparations enough of ossifications and oth structural changes, in museums of morb anatomy, which were not only not fatal, but not indicated by symptoms during life. Professor Macartney thinks that no man has ever died yet of organic disease of the heart alone, but from morals action super-vening on morbid strictions the by ossification does not occur till the heart is excited, and morbid action added. No part he observes, is so liable to be affect through the medium of the nervous syst by the mind, or the stomach, which throws light on the success of Mr. Abernethe practice. (Notes of Pathological Course, by J. F.)

With these impressions, some pathologic with these impressions, some pathologisms and con-trol light hart, and large down a system regard even angina to high frequently the state which belongs to that consum-satisfied the large to that consum-satisfied the large to the consum-satisfied to the consum-batisfied to the consum-tion of blood in the large vessels; " so, in the words of

611 DR. FOSBEORU ON PLETHORIC AND SUMPROMATIC PALITATIONS.

Dr. Forbes, who coincides with Dr. H., "a in the larged the presentation were often congested state of the heart and large questions in interminates in the pulse. By vessels." Even Dr. Parry, in tracing out the Armshing says he had seen several in vessels," Even Dr. Parry, in tracing out the causes and characters of angina pectoris, in a first-gate specimen of strong reasoning and critical powers, did not attribute the disease entirely to the effects of ossification of the coronary arteries, for he distinctly states that the symptoms show that accumulations of blood about the heart and large

vessels, take place (Dr. Macratosh).

11. Plethoric palpitations may be known more or less by these circumstances:—

1. They are excited or increased by every kind of motion or exertion, especially by lifting the arms and exerting the chest, by ascending stairs and acclivities, and doing whatenever hurries the blood through the heart and lungs.

2. They are increased by cold, moist, and foggy weather, or whatever produces chill of the body, and so forces the circulation from the exterior to the interior vesuels of

the body.

3. They are more persistent than nervous palpitations, and occur by day as well as by

night.

4. They are often accompanied by pain and weight of the arms, and particularly of the left arm.

5. They are sometimes attended with throbbing and fulness of the vessels of the head and neck, and pressure about the throat and ears, particularly in going up ascents.

III. The third kind of palpitations, or symptomatic, are said to be of a more temporary nature than the nervous or plethoric (Professor Graham). They originate from the participation of the heart in the affections of every other organ, and exhibit the morbid influences to which it is obedient under undue excitement (Dr. Blundell; They accompany-

1. Pericarditis, in which both the pulpitation and dyspacea merely indicate sympathetic irritation of the heart (M. Andrai .

2. Adhesion of the Pericardium. Mr. Huuter was of opinion, that when adhesions take place between the pericardium and heart, the patient generally recovers, but is troubled with a palpitation, irregular pulse, oppressive breathing, faintings, debility; and the name of angina is generally affixed to these symptoms; but if the inflammation of the pericardium approach to the suppurative rocess, it produces death. (Mr. Hunter, MS. Notes of Lectures, by T. Creaver, M.D.) Mr. Henry Cline, who paid much calm and patient attention to diseases of the heart and circulation, also thought that fluttering, from the frequency of the pulsations or contractions of the heart, with intermission of the heart's action, denoted inflammation of the pericurdium, and adhesion of it to the heart. (MS. Notes of Lectures, by J. F.)

Armshing mys he had seen several is stanced as such adhesions without inter topi and thinks that Dr. Balli mitte mistakesi in Neither at athem specialsometer right or altogether right or altogether misses symptom is equivous, and increase affections of the heads, and increase existence of such a characteristic of such a characteristic statement of such as such the the

tected from the history of the case.

3. Pressure of fluid in the pericerdium.

4. Chronic enlargement of the heart, who ther hypertrophy or dilatation, distinguished by the signs peculiar to those affections.

5. Ossifications. Sometimes, but not in

variably, a cause.

6. Maladies of the sorts.

7. Pneumonia. Known by the symptom: peculiar to that disease.

8. Serous effusion into the pleura. Simi larly detected.

9. Phthisis pulmovalis. I shall refer to cases on this point.

10. Accidental tumours developed in th lungs, or in the course of the great nessels. Also a case in point.

11. Ascites and encysted dropsy of the ovary 13. Hemorrhages or excessive bleeding. The palpitations are excessive, but the beat o

the heart, though precipitate, is not strong 13. Hysteria. On this combination I shall

speak hereafter.

14. Chlorosis. So also on chlorotic palpi tation.

15. Hypochondriasis.

16. Amenorrhea. I shall give cases, illus trating particularly the " turn of life."

17. Lencorrhua.

18. Repressed cutaneous affections. 19. Bitiary enguryement and herer offections A common cause.

20. Enlargement of the thyroid pland, " nock wen. Noticed by Dr. Parry.

21. Affections of the stomach and boreels above all other causes.

22. God. Noticed by Dr. Armstrong. Symptomatic palpitations owing to eacl of these different causes, are known by the signs of those maladies of the heart from which they originate; and, if they do no originate from the heart, by the absenced all the signs of structural disease of feaheart (M. Rostan). It is certainly a von great amistance in diagnosis to bear this in mind; but it is not invariably converted the most comprehensive knowledges in the most comprehensive knowledges to boot, to detect the affection of the second pitation is symptomatic. Each of of causes in connection with palpitation when more than one of these causes is co bined, and when indeed, two, if not three kinds of palpitation, are complic together

gether.
I have prefeced wante cases said the The late Dr. Baillie thought that adhesions of cases, by laying dren general pri

on the foregoing manner, that their applica-tion to those cases, and their treatment may ingly, but on the very day following, having be the better understood. What Fuffin to taken but two doses, the pain in the leg and show is not the structural and medianical thigh returned with increased violence, according of the increased violence, accompanied by considerable fever and generalized the walls, as dilatation of its cavital biliary derangement, which compelled ties, continuous of its orthogonal disease bin to keep his bed, in which state I of its valves, but the influence of morbid found him, action through the nervous and circulating The treats systems, but its organic and functional affections of the heart, which I think is either overlooked, or merely alluded to here and there, by pathologists.

Ross, Jan. 9, 1836.

CASES AND ARGUMENTS

ADDUCED TO PROVE THAT " GONORANCEAL RHEUMATISM" 18

COPAIBAL RHEUMATISM.

To the Editor of THE LANCET.

Sin .- I should feel obliged by the insertion of the enclosed remarks in your excellent Journal. I am, Sir, your obedient servant.

FRANCIS EAGLE.

29, Poultry, Jan. 12, 1836.

CASE I.—May I, 1834. I was sent for to visit Mr. C. H., who was labouring under a severe attack of rheumatism in the left leg. There is tenderness at two points onlynamely, at the anterior superior spinous process of the ilium, and along the dorsum of the foot. He gave the following history of his complaint : -

About two months since, having contracted a generrhora, a friend prescribed for him a mixture of cubebs and copaiba, which he took for rather more than a week, when he experienced a severe attack of pain similar to the present. He discontinued the copaiba, and, with the aid of warm clothing and mild aperient medicine, got rid of the pain in a few days, and again had recourse to his copaiba mixture, when, on the tollowing day, having a return of pain, he suspected that the copaiba had, to use his awn expression, "something to do with it." He now left it off for a week, and the pain subsided as before, but on again taking bubsided as before, but on again taking posiba mixture, the pain for a third of the gamection of the copains with piper remedies for the gonorrhun corted to them with partial benefit bramme weeks. Being bowever, very h annoyed at the long continuance of disease, he consulted an eminent surthe at the same time stating his objection.

The treatment now adopted consisted in the local application of leeches, and the administration of mild aperients to improve the chylopoletic viscers, and although the pain had affected the parts for some weeks, more or less, my patient was perfectly well in sixteen days, and up to the present date has experienced no return.

Case 2.- A young man, aged 27, messenger in a fire-office, whose habits of life were far from absternious, perceived, on the morning following a debauch, a discharge of yellowish matter from the arethra, and immediately applied to a surgeon for advice. A copaiba mixture was prescribed for him, of which he took a dose three times a day. On the second day, however, all discharge having vanished, he discontinued its use, and went to bed rather unwell. During the night he awoke with considerable pain immediately under the left scapula, and on the following morning applied to me, when I at once advised the application of twelve leeches to the part affected, to be followed by a warm bread-and-water poultice, at the same time directing my attention to the state of the stomach and bowels, which were out of order, and in five days he returned to his office.

Kemarks.- The belief that the rhoums. tism arising during a gonorrhora is a spccific disease, requiring a specific remedy, is, if I mistake not, founded upon a very shallow foundation-1st, that because it arises during generahers, it is generahers!; 2ndly,

that it is curable only by mercury.

At page 210 of Dr. Titley's work on "Discases of the Genitals," speaking of this discase, he says, " That this form of disease sometimes, though rarely, occurs during the continuance of a generative. The pain and swelling are more especially confisce to the knees and ankles, though, in some instances, the symptoms are more diffus the pain is more acute, and the general disturbrace of the system more violent. It is usually not until gonorrheen is on the decline that these symptoms supervene, though, accasionally, they have appeared to follow a sudden cessation of the discharge produced by the use of cubels or copalia. There is often much puffiness and tenderness of the ankles, especially towards evening. The skin is not externally red, and the pain is not much increased on pressure; the pulse is quickened, the stomach becomes disorlored, and the appetite declines, or alto-gether falls. Occasionally it happens that Starruled, and a compound considerall these symptoms are suddenly relieved by

an eruption of papulas, in clusters, or, some-times, of puscules, in very minute patches.

When these appear, not only are the pains
When these appear, not only are the pains
Telieved, but the constitutional symptoms
also yield; and the cruption, after some
almost immediately subsides. days, though sometimes not for many weeks, grows paler, and a desquamation anceceds, matter by Hunter or Abstract leaving a slightly discoloured state of the not adopt the copsiba system? skin, which gradually subsides.

It is a fact worthy of considerable attention, that two of the most careful observers of disease, Mr. Hunter and Mr. Abernethy, but especially the former, who devoted much extremely rare. time to the study of the venereal disease, in all its forms, should have made little or no mention of gonorrheal rheumatism. This fact appears in a still more striking point of view, when we consider that they scarcely ever, if ever, adopted the copaibal method of healing the disease; while Sir Astley Cooper, Dr. Titley, and others, stanch advocates of the copaiba system, have devoted considerable space to its nature and treat-

The preceding extract from Dr. Titley's work, is an accurate description of what may fairly be called "copaibal fever," followed, as it so often is, by an eruption peculiar to that medicine, and by no means confined to its administration during a gonorrheea. The circumstance of this form of rheumatism occurring during a gonorrhoen is, it is true, a coincidence, and may that it arises very frequently where no coevidence), it is fair to doubt its existence as gonorrhoal rheumatism.

Copaiba produces derangement of the intestinal canal, fever, and cutaneous eruptions. All this it does commonly, whereas gonorrhea not once in a thousand cases

produces either of those effects.

But even admitting that this form of rheumatism is a consequence of genorrhoa, what explanation can be given of its production? Does it arise from sympathy? Or does it arise from specific venereal irrita-tion, which its curability only by mercary would seem to imply? And if so, why is it not followed by secondary symptoms?

I assume the position, then, that the rheumatism occurring during a gonorrhea, is, in very many instances, a production of the remedy, and not of the disease; that it is "copsibal," and not "gonorrhoal" rheumation, upon the following grounds :-

1. Upon the preceding cases, and their

daily occurrence. Upon the fact that it arises during the

administration of copaiba in other diseases. 3. That while it is proved that copalba produces intertinal derangement, fever, and quences of genorrhess, in the abstract, are extremely rare. cutaneous eruption, commonly, such conse-

· 4. That if the copalba be withdrawn,

6. Upon the absence of my succes of the y, who did

7. Upon my own experience, that while this form of disease frequently armes during the treatment of gonorrhora by copaiba. in cases treated upon the soothing system it is

PREDING, IN A HORSE, AFTER

LOSS OF THE ENTIRE TONGUE.

Related by M. CALLEUX, in the Memoirs of the Veterinory Society of Calvados.

A HORRE, belonging to the 4th regiment of Hussars, was very difficult to groom, so the soldier who had to manage him, fixed in his month a strong chain of iron, deeply serrated. Another man held the ends of the chain, and giving it a terrible jerk whenever the horse was rebellious, sawed off the tongue completely at its base, and it fell to the ground. Much hemorrhage did not follow. The portion of tongue detached was be nothing more; for, unless it he proved four inches and a half in length, and the disunion was effected at the frænum, or pulha is administered (against the opposing precisely at the point which separates the base of the tongue from the free portion of it. My first thought was to destroy the animal; but the interest which every one took in him, on account of his power, and his docility in every respect, except when he was groomed, and the desire to ascertain how he would feed himself when the useful part of the tongue was taken away, couraged me to endeavour to save his life. Having stopped the bleeding, I kept his mouth constantly open with a gag, which I could extend or contract at pleasure; and I frequently injected cold barley-water, sugared and honied, and deprived the animal of every kind of food. On the tyred day I thought the wound sufficiently farburable to allow him a little harley-meal and water. He plunged his head into the ! half way up to the eyes, and then by i of the strongest inspirations, and es up a very little at a time, he country empty the venet. I then made this, fail of paste, of bran and barley-meal? I tacked it with avidity, select a per pit it between his lips, and seemed astoriith that he could do no more with it. I then fore renounced for a while this mode feeding him, and contented myself v rendering his harley-water more nout by increasing the quantity of the me stirring the mass well while he was de

flag it. In this manner he was fed during three or four days; at the depiration of which period the would was bested.

It have presented him afresh with the kind-by fresh which I had before made, and I remarked that he set binnell to work more gently in ander to eat it. He kept his head constantly is the manger, and, having eathered between his lies a wall nortice of gathered between his lips a small portion of the fond, he pressed it against the bottom of the manger to as to force a part of it into his mouth. He then gathered another portion, and, subjecting that to the same kind of pressure, the first pellet was forced somewhat further backwards; and so he continued, until, bit by bit, it was pushed on to the back part of the mouth, and swallowed. This was the work of a long time, and proceeded very slowly, but by degrees he was able to dispose of the whole of his feed. During the time of his repast he was in a profuse perspiration, showing the difficulty which he found in satisfying his appetite.

This continued during three months, when it occurred to me to mingle a few grains of oats with his barley-meal and bran. At first the oats were swallowed without being masticated; but, by degrees, mustication returned. At length he began to eat with less difficulty, and the profuse sweat with which he used to be covered, disappeared.

This kind of food, convenient enough for a horse that does no work, did not accomplish our purpose: we wished to restore him again to the ranks, and to fit him for that, it was necessary that he should have more substantial food. I gave him some hay, at first in small quantities at a time. He took it in the same manner that he had been accustomed to manage his mash; he gathered it together with his lips, and formed it into a kind of pellet with his lips, and then pressing it against the hottom of his manger, he gradually forced it sufficiently far into his mouth to be enabled to seize it with his grinders, a new pellet constantly pushing on those that were before. It was fifteen or twenty days before he could mayage this cleverly; and then, being kept apart from the other horses, he was able to manage the whole of his ration. Oats were, as he ore, mingled with his mash, and their as agore, minged with his mash, and their distinct by was gradually increased, while the lay has proportionably diminished, until he lay has proportionably diminished, until he late the same time, and is the same time, and is the same of the chart, he could not manage to the late the late that he could not manage to the late that he could not manage that the late that he could not manage that the late that he could not manage that the late that th no. it. As to chaff, he could not manage sion returned, he now does his duty as before, and is in perfect health. A similar the so this I do not recollect to have seen. not expect to succeed at all; but its mate result induces me to publish a which. I think, will be interesting to professional brethren. - Veterin Jes.

3

JERVIS-STREET HOSPITAL DUBLIN.

A 1681 . 8 Av. 5

TREATMENT OF PRACTURES OF THE LEG AND THIGH BONES OF CRIEDERY WIFE. OUT SPLINTS.

Tax following remarks were made by Dr. WALLACE, on going through the above hospital, on Thursday, January 7] :-

This case of fractured thigh, gentlemen (in a boy fourteen or fifteen years of age), is worth your attention. The fracture exists where the upper joins the middle third. I shall treat it without splints. It has been my practice to treat fractures in the legs and thighs of children for more than ten years without splints, and I have never had occasion to regret the plan. Deformity never, I may say, occurs, and even when it does, a very few weeks see it removed. When I commenced this plan, some of the routinists cried out, "Oh, what a shame to neglect the patient in such a manner!" They little knew the object in view. I do not believe, however, that I have ever before adopted the practice in so old a person as this. I am induced, on the present occasion to give it a trial, not only from the result of my own practice in younger cases, but from finding in a paper by Mr. RADLEY, published in THE LANCET a short time ago, that this practice has been by some persons lately applied to the fractures of adults. confess that I should be tardy, in general at least, in going so far, because, if any deformity resulted, it would not be so likely to disappear afterwards. This is the source of my opinion as to the propriety of treating fractures in growing persons without splints, while I would not treat those of older sub-jects in the same manner. See! how this boy lies. It is the manner in which children, who have got fractured thighs, always lay themselves. You see he is on the lest or fractured side, the leg bent a little on the thigh, and the thigh on the pelvis; and he lies with his abdomen half turned round to the surface of the bed, his sound lower limb being thrown to the right, and his elbow and fore-arm, of the right side, thrown on and supported by the hed. Now, he will lie in this position until he begins to feel strength in his limb, and then he will in-stinctively begin to move, and exercise is through the bed, in proportion to the strength which be acquires. I have very frequently noticed, in treating the fractures of very young children, that they allow the not hurt them, with great gentleness to their restraint, until the bone has acquired some strength, and then they begin to be weary of restraint, will not allow the handages to remain quiet, will be found constantly to faddle with them, and will thus keep them igose. In fact, if you wanted to keep a child's arm, which had been fractured, longer in thes an unfrequent consequence of diffuse splint than was necessary, you would exercely inflamenation of the forest of the fores succeed in diving so. The child, by its con-stant perseverance to remove restraint, would conquer. In treating fractures of the thighs in children without splints, I have never found that the attendant complained of any difficulty in the removal of the patient discharged.

CURE OF LUPIFORM STPRILIS (A COMPLEX FORM OF THE VENEREAL DISEASE) WITH THE HYDRIODATE OF POTASH.

Here is another case deserving your attention. It is a case of the disease which I call " lupiform syphilis." This name expresses its origin from the venereal poison. and the resemblance which it has to lupus. Its remarkable characters are, its occurring in subjects who have not only had the venercal disease, but who have taken mercury in large quantities for it, and its commencing by tubercles, which pass into ulce-ration, and form groups of holes, which, sooner or later, heal, while others are formed in their neighbourhood, or on other parts of the body. Mercury will generally day them NEW METROPOLITAN UNIVERSITY up, but they soon break out again. For this form of disease there is no medicine which acts with the same certainty as the hydriodate of potash. You have at this copy, has been presented to the Minister moment in the hospital two other cases, by the teachers of the Blenheim-Street School those of Free and Holland, which demon- of Medicine: strate the great value of this medicine in this form of complicated syphilis. I will make these cases the subject of a clinical lecture. The man whom you see before you commenced the hydriodate of potash yesterday morning. Bring me the tests, and let us examine his urine. You see how it is already loaded with the medicine. He institution would be founded upon the browcould have taken only half a drachm of the salt since yesterday. It is remarkable how soon the presence of this medicine can be detected in the urine, and how soon it escapes from the body when its use has been omitted.

CONTRACTION OF THE PINGERS AFTER DIF-PERF TERMANDATION OF THE PORE-ARM.

Look at this case. It is a case of diffused inflammation of the fingers, band, and part of the fore-arm. It has already formed matter and sloughs in the subcutaneous tisme. There were some incisions made in lafter to be established, he placed upon it yesterday, and you see with what great and equal footing under the new university advantage; observe how much better it is to-day. I fear, however, that it will not evinced by the pupils ought to be endend very satisfactorily. The patient is a with equal hosours, no matter when our very old man, and, besides, the sheath of what means acquired, and that no only the flexor muscles appears to be much en- tages ought to accrue to any parties gaged, and even, perhaps, the flexor muscles achouls or classes of teachers, exegthemselves are so; for, you may remark, all reputation derived from the man the fingers are bent towards the palm of which she pupils acquit themselves as the hand, and cannot be straightened. A examinations; unless the competency.

care should be taken to b a state of extension, and e are all healed, but have not unfreque from a neglect of soll to the hospitals and many weeks after th apparently well. You i by remar frequent diffuse inflammation is at present This, you know, is one of its characters Another of its characters consists in it either occurring in a limb without any evi dent cause, or from some very trifling cause You see this illustrated in the present case The patient says that it was caused by hi burning, in a very slight manner, the enof his thumb, by touching some hot body,a degree of injury which, probably, unde other circumstances, would have produce no other effect than a state of painful feeling for a few minutes.

A MEMORIAL, of which the following is:

" The teachers of the School of Medicine in Blenheim Street, founded by the lat-Joshua Brookes, F. R. S., have hitherto ab stained from making any representation to his Majesty's ministers respecting the projected establishment of an university is London, because they believed that the nev basis of the public good, and therefor governed by the strictest rules of justice and impartiality.

" But in consequence of the uncertaint which prevails with regard to the intention of the Government, and considering that this has given rise to rumours of an injuriou tendency, and lest their silence be construe into indifference respecting the high in terests involved in the question, they den it to be their daty most respectfully bu earnestly to request that all the schools c medicine at present recognized, and here

"They submit that equal knowled permanent state of flexion of the flingers is teachers is to be fairly tried in a

company, at which all their titles to disting stitution, the following deserve to be men-tionizing be impartially investigated; and tioned. It enables the industrious man, by by signs of these tasks or modes of compe- a very small weekly payment, not only to

tion may be impartially investigated; and by sitting the teachers of the Blenheim-street strings the teachers of the Blenheim-street School syn contest to be judged.

**Treet in course, of the medical profession, there is a fifther of obtaining evidence the street of the street of these the comparative ability and merits of those engaged in it, and the consequent difference of opinion necessarily entertained respect, respect, thus surpassing all Institutions ing their qualifications, perhaps the only purely electnosynary, which, from the nature mode of appointing the Examiners and of their constitution, can never effect this Professors of the Faculty of Medicine at all most desirable result. natisfactory, and calculated to prevent all. Should any of the numerous readers of invidious feeling, is by concour, a mode The Lancar be desirous of establishing a attributable.

"The advantages and details of this plan. tution, which would prove a source of pros- dient servant, perity and happiness to the country-a real and lasting blessing to mankind."

LYNN SELF-SUPPORTING INSTITUTION

FOR THE SICK AND HURT.

To the Editor of THE LANCET.

Sin,-In consequence of the prompt and handsome manner in which you noticed a former communication on the subject of our Institution, I am requested by the Members of the Board of Management, to transmit

the following statement of facts.

The Lyun Self-supporting Institution has now been established two years, and I am happy to add, has fully answered our most NONPAYMENT OF MEDICAL WITNESSES AT sanguine expectatious. The industrious wo king classes are delighted with it; and although it does not, perhaps, sufficiently rememerate the practitioner, vet it pays him better than parish practice. It must also be meeren that through this plan, many mpthing before. But putting aside all the toration of advantage to the profession, and to the effect spon those planes for whose benefit is was justifuted, have much reason to congratulate our-Thises on the great improvement that this I subjoins.

Method to gradually working, both in this Surely, Sir, this injustice to our profession special and physical conditions of the labour cannot longer exist. I carnotily trust that

a year small weekly payment, not only to ensure prempt and efficient aid for bimself and family, in case of sickness, or accibut it gives him the privilege of choosing his own medical attendant! It has also the happy tendency of raising the working man from a state of dependence and degra-dation, to one of independence and self-

adopted with so much benefit to the public similar Institution, I can only say that a in France, and to which the advancement of copy of our Rules and Regulations shall be medical science in that country is mainly at their service; and I confidently depend upon your powerful ald in disseminating any information which has a tendency to comthe teachers of the Blenheim-street School teract the baneful effect of the old dispenof Medicine solicit the opportunity of lay-sary system, which I verily believe has been ing before his Majesty's Ministers, in any the means of degrading, and of ultimately way that may be deemed expedient. Con- rending to the workhouse, many individuals, fulent that were it adopted in the new Uni- who, without such temptation, would have versity, they would have to congratulate the remained industrious and useful members Government on the formation of an Insti- of society. I remain, Sir, your very obe-

JOHN TWEEDALE, M.D., President of the Board of Management. Lynn, Norfolk, Jan. 9, 1836.

P.S. Permit me to avail myself of this opportunity to express my admiration of the cordial and disinterested co-operation of those general practitioners of this town, who so willingly have lent their aid in this novel undertaking, which, in the outset, presented many difficulties without any certainty of adequate remuncration.

J. T.

. Dr. Tweedale will confer a favour on the Editor by forwarding to THE LANCET OFFICE, at an early period, a copy of the rules and regulations to which Dr. T. has referred .- Ep. L.

CORONERS' INQUESTS.

To the Editor of THE LANCET.

Reading, Jan. 9, 1836.

Sir,-A short time since I attended a corouer's inquest on a poor man, to whose assistance I had been summoned as the nearest practitioner. His friends being unable to defray the charge, I applied for payment to the Board of Guardians, a copy of which application, together with their reply.

Mr. Warburton will succeed in obtaining an Among the many advantages of this In Act of Parliament in the curving session,

. . . .

securing to we a fair compensation for ettendance in similar cases. Should you sens with me in the expediency of calling the attention of the profession to this subject without delay, an early insertion will obliga Your obedient servant,

GROSSE MAY.

" To the Board of Guardiene of the Reading Union.

" Reading. Jan. 5, 1836.

"Gentlemen,-I take the liberty to remind you that some time since I made a demand of one guines for attendance on the inquest of --- Taylor, and at a subsequent personal interview was favoured with your sesurance, that the case should be reported to the Poor-law Commissioners, and that your decision would be guided by their opinion.

" I take leave to recall your attention to the subject, and should you determine to refuse my claim I hope I shall not be deemed presuspituous in requesting a statement of the Casmissioners' opinion, as you will perceive that not merely this particular claim, but the interests of the medical profession in similar cases, are involved in their decision. I have the honour to be, Gentlemen, your obedient humble servant.

"GROBGE MAY."

" To George May, Esq.

"Reading Union, Jan. 7, 1836. " Dear Sir,-I have to inform you that the Board of Guardians, in conformity with the promise they gave you, made application to the Poor-law Commissioners for instructions for their guidance in respect of the charges of medical men for attendance upon coroners' inquests, and I am directed by the Guardians to transcribe for your information the reply of the Poor-law Commissioners to that application:-

" 'The Poor-law Commissioners for England and Wales have to acknowledge the receipt of your letter of the 19th met. (December), and with reference to your inquiry upon whom it devolves to defray the demand of medical men for attendance upon coroners' inquests upon the bodies of paupers, the Commissioners desire to state that they are wholly unacquainted with any authority under which the payment of witnesses at coroners' inquests, or indeed of any other expenses attending inquests, can be charged upon the poor-rates.' I remain, dear Sir, your obedient humble servant.

"THOM G. CURTIES. "Clerk to the Board."

The members of the profession will do will to remember that their speedy perso-nal applications to Members of both Houses, of Parliament, will have a material effect, in nal applications to Members of both Houses, east apon my character. I will only beg to of Parliament, will have a material effect, in said, with respect to the other statements the approaching session, on the decisions of in that gentleman's letter, that considering the Legislature, with regard to the subjects myself merely as the medies through which discussed in the foregoing letters.—Es. L. The communications from our Association

TUNERIDGE-WELLS CONTRACT.

To the Editor of Tax Labour.

Stn. will you oblige me with an oppor-tunity of correcting a missistement in last week's Lawcaz, in which I am personally concerned, under a promise that I will not

again so trespass on year indulgence.

Mr. Sopwith in his communication to you has stated, that I called upon him (being one of the Committee) for the purpose of pressing him to attach his signature to the Resolutions of our Association, and on his refusal so to do that, I told him that the consequences would be, exclusion from medical societies, and objection on the part of medical men to render him assistance in cases of emergency.

I regret that Mr. Sopwith should have made these observations, as he was putting a false and unfair colouring upon the whole

transaction.

It is true that I called upon him with the view of obtaining his signature, from a desire that, in a matter alike interesting to all, there should be unanimity in the expression of our sentiments. It is also true, that I did represent to him (but upon his repeated request as a friend so to do) the possible consequences of his refusal to act in concert with us. But, Sir, Mr. Sopwith has omitted to tell you that in this interview I did most distinctly disclaim any authority as a member of the Committee, to communicate with him, and gave him as my motive for so doing (and for its sincerity at the time I can most truly vouch) a desire that he should avoid the unpleasant position in which, as a young man, just entering on his professional career, he must be placed by such refusal. With my conduct at the time, he appeared satisfied, and actually thanked me for the trouble I had taken. This explanation was again rendered to Mr. Sopwith at a second meeting of our Association, upon his referring (much to my surprise) to the sphiect, before the whole of my professional brethren present, to all of whom it seemed satisfactory. As to a refusal to afford him assistance in cases of emergency, th Mr. Sopwith would imply much more at that was intended to be conveyed by the was, that he could not expect, in his as from home, that courtery which is of given and received by medical men.

Having entered into this explaintion solely to remove the stigms which was so evidently intended by Mr. Sopwith to be

were made to you, I do not feel called upon the state of time and attention, equally capable of being antisfectority explained. I am, Sir, your very obedient servant.

Tunbridge Wells, Jan. 11, 1836.

DUTIES OF MASTERS AND APPRENTICES.

To the Editor .- Sir .- The letter from a " Licentiate of the Apothecaries' Company, published in the number of your interesting and valuable journal for December 12, bears on a subject of no minor importance to the many individuals who make choice of the medical profession, and it struck me on its permeal as demanding reply. I do not for one moment desire to advocate the repetition of changes in the regulations of the Apothecaries' Company, or the unnecessary length of time originally required for the actual servitude of an apprentice. The tedious routine of studies to which students are subjected also, I consider to be exceedingly unwise and harasting, and highly discreditable to the Court of Examiners, a fact which is rendered remarkably evident after reading the letter of "A Medical Pupil" in THE LANCET of December 12th. Nevertheless, whilst such a Company is upheld by Act of Parliament, it is necessary to comply with its regulations, though I trust that a day of change is not far distant. My intention now is to dissent from the opinion of your correspondent in imagining that a practitioner has any right to expect benefit from the assistance of an apprentice who has placed at the command of his instructor 200/.; and I contend that it would be contributing greatly to the good of all, if practitioners thought less of the services to be rendered by their apprentices, and attended more to furnishing them with the medical knowledge which young men are placed with them expressly to learn. The gene-rality of apprentices are compelled to undergo, in the strictest sense of the term, actual servitude, during their whole apprenactual servitude, during their whole apprenticest ip, being constantly employed at the counter, dispensing medicines for patients, whose cases they sever have an opportunity of intestigating, and the effects of many of the intestigating, and the effects of many of the medicines they never have time to taking although to learn them they have the life although to learn them they have the life and their pressures; and I cannot be approached the propriety of the counterful from them that "assistance" which should be obtained through the medicine of carolifed assistance. Having thus arisressed qualified assistants. Having thus expressed my thoughts on a very important subject, T remain, Sir, your obedient servant,

A GENERAL PRACTITIONER. Disimber, 1835.

Transm.

To the Bill'to Min.—At a time so from which departance to the profession as a process, when a new, and, let us hope, improved system, is to be introduc stay be desirable to state even individual instances of grievances which have been inflicted under the old system. I mention one which is mine, and probably is that of many other students also. When I first entered the profession, being totally ignorant of its regulations, and thinking that a know-ledge of medicine was the only real object to be sought, I was apprenticed to a practipolis, who, at the expiration of the first four years, I had the mortification to find, had not obtained the license of Apothe-caries' Hall. I was then rearticled to a licentiate, but owing to this delay I had not commenced my hospital studies previous to the late regulations coming into effect, and (having but limited means) am materially obecked in my advancement in the profe sion, the arrangements of the apprentice and certificate system have placed a veto of many years on my position as a candidate for professional honours and emoluments: 1 am, Sir, your obedient servant,

J. V. S.

HONESTY TO PURCHABERS OF FIRST Epitions .- To the Editor .- Sir, - When first I saw Dr. Mackenzie's work on the diseases of the eye I was induced to pur-chase it, and I look upon it as an excellent and elaborate treatise; but I see a second edition announced, with plates, &c. New. Sir, those plates must be a valuable acquisition to the new volume. I trust, therefore, that in common honesty to the purchasers of the first edition, the plates will be enabled to be procured by them, in the form of an appendix. Waiting to know whether we shall have to thank Dr. Mackenzie for this measure of liberality, so rare amongst authors -certainly never observed by bookmakers - 1 am. Sir, your obedient servant, A Poor Madical Bookworm.

Dorset, Dec. 1835.

Ma. DEWHUBST .- To the Editor of THE LANCET.-SIR,-I perceive another attack made upon me in your journal of this day, and shall feel obliged by your inserting this reply as early as convenient, particularly as it has been done by a malevelent individual it has been done by a measurement the fittle of to injure me. I never assumed the fittle of Fellow of the Royal Society; I know my-self better than to assume honours never a single conferred on me. I never wrote a single article in the Admentional Magazina, but the the Education Japane I added to my name

error was immediately corrected in the se sequent numbers by me; and I need not form you that typographical errors for quently occur in the most eminent print offices. I am not aware, Sir, that it is crime to ask a noblemen or gentlemen to urchase my work, for the benefit of my infant family; although I am well acqueinted with the individual who, under the assumed signature of M.R.C.S., has imposed upon you to insert the letter in question, as by an interview I could easily demonstrate. Had not misfortunes from a severe illness of two ears from a dissection wound plunged me into difficulties, I should not have had to solicit subscribers. Had I been able to pay the fees, I long ago should most probably have been elected F.R.S.; and in consequence of my inability, Earl Stanbope three years ago generously presented me with a ticket, conferring on me all the privileges of a member of the Medico-Botanical Society; and similar bonours have been conferred on me by many London, Dublin, and provincial learned societies. That I have founded a philosophical society I admit, and I can see no reason why my poverty should destroy my claims to the office of president, which I am proud to say I have held for two years with the approbation of the members (now about 320 in London and the country), and any time you choose to attend yourself, I shall be happy to transmit the necessary ticket of admission for that purpose. As to the latter part of the "M.R.C.S.'s" letter, I have already alluded to it in my letters inserted last summer in THE LANCEY, so I shall not again refer to it. I remain, yours respectfully,

H. W. DEWHURST.

January 11, 1836.

WESTMINSTER MEDICAL SOCIETY. Saturday, Jan. 9, 1836.

Mr. RICHARD QUAIN in the Chair.

Dr. Approon, in the absence of more important medical news, related the case of a child, aged 11 years, in whose case he had committed an error of diagnosis (at Guy's?) The disease, as he had been informed by the surgeen who had sent the case, was one of amourosis, dependent on a hydrocephalic affection. He was proceeding to prescribe secordingly, when one of his pupils put his er to the chest, and detected mischief re patient was " pigeon-breasted"), and left side of the chest progoneran was sected, accompanied by a missions rattle, matter was to be facual in any work a of a very peculiar kind, indicative of sellen- aulifect, prior to the appearance

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for of whereles, and he (Dr. A.) concluded, the content of the con faith or sixth rib, which added to the Her-plexity and interest of the case, and not feeling satisfied, by (Dr. A.) visited the boy at Rackney. If the treatment pursued, in spite, as he dought, of the disorganized condition of the lungs, the patient improved, but in an after examination he detected the source of fallacy. The boy was labouring under emphyseins of the lungs, and when the pneumonia no longer existed the humidity disappeared, which had led him into error. He related the case, because we were bound in duty to narrate the truth in all instances This would have been a very admirable case to have fallen into the hands of an empiric, who, if it had got well, would not have failed to blazon it abroad as the cure of a confirmed case of phthisis, so pronounced by the faculty. The case also showed the necessity of being exceedingly cautious in forming a diagnosis in diseases of the chest. The treatment consisted of moderate depletion, a mild course of mercury, paying attention to the howels, and employing blisters, which occupied about a month. For the affection of the head he had been cupped. Mercury was still employed mildly, and the sight was fast improving.

Dr. LEONARD STEWART believed that if permanent benefit were derived in the short space of a month, whatever treatment was employed, we were justified in considering it not to be a case of phthisis.

Dr. Appraon said that had the sound existed at the apex, instead of at the base of the lung, he would have pronounced it. without hesitation, the result of disorganization. Dr. A. then briefly detailed two other cases, occupants of the same bed, one the subject of paeumonia, and the other presenting pacumonia coupled with severe bronchitis, which bore on the question that was argued here some evenings back, when he (Dr. A.) maintained that in genuine pneumonia, little or no cough, and no oxpecteration, except it were blood, was pre-sent, and if a slight glairy mucus were secreted, it was from the misuse extremetion of the bronchial tubes, and it was from these symptoms being considered es to pneumonia, that the disease w quently passed by unobserved.

Dr. CHOWNE said that so long as inflammation of the parenchyma of 4 no expectoration was poured out, the disease extended to the bronchial a then there was expectoration. Ha (Dr. A) contrary, a very ancient one. Dr. Appenon mid that no correct is

hec's and Cullen, shound ors prior to Lacennec, his writing a mass of confusion of But Lacender the district of the state did us to detect the di emob certainty as our h we mig t meet a emplications which we ne limble to puzzle us.

Mr. Franching related these wherein a physician, of no mean reputation, committed the following mistake. A steet man, of full Mr. PERNANDER related limbit, from early life and suffered from enlargement of the heart: for three months he was troubled with a constant cough, with slight expectoration. About a month back, as the respiration became very difficult and frequent, the physician was consulted and used the stethoscope, but he found some difficulty in explaining the nature of the malady. No respiration was to be heard over any point of the chest, nor any pecu-liar sound in the region of the heart; the expectoration was of a thick mucous character; the blood drawn was buffy. The diagnosis given by the physician was, that the patient suffered from acute bronchitis, and an effusion of fluid within the chest. Shortly after this examination a faintness came on, which was relieved by brandy, but at the expiration of a week a second returned and the man died. On inspection of the body after death, no fluid was found on either side of the chest, and the lungs looked perfectly natural, but on compressing them the contained air could not be forced out, the air-tubes being blocked up by the swelling of the lining membrane. The pericardium was highly florid and inflamed.

Some discussion ensued between Drs. Addison and Chowne, with regard to the writings of Culien, the former deprecating them, from the confusion prevailing in the parts relating to the diseases of the chest; and the latter advocating them. The subject was then dropped to make room for that of magnetism, which occupied attention for an hour beyond the usual time of adjournment; but nothing was elicited worthy of being reported, and in order to produce from the diversity of opinions something more satisfactory, it was moved by Mr. CHINNOCK and carried, that Dr. Ritchie, who was prehe requested to enter fa'ly upon the at at the next meeting, when the meetadjourned.

resident of the Royal College of ad an interview with the Chanthe Exchequer yesterday, in Downt. A deputation of short-stageproprietors had an interview a

MEDICO-BOTANICAL SOCIETY

.. CREEKVATIONS ON THE

PERUVIAN BARK.

By GRONGE G. SIGMOND, M.D.

Read at the Meeting of the Medico-Botanical Society, Jan. 12, 1836.

It appears that at about the year 1639, the attention of the ecclesiastics in Spain was drawn to the bark of certain trees. which had about seven years before been imported into that country from Peru, their newly-acquired conquest in South America. It possessed a febrifuge power, which had been successfully exhibited upon a member of their own body residing at Alcala. It had likewise acquired some degree of reputation. amongst their own countrymen in the new world. The Jesuits, a powerful, active, and highly-intelligent order, who aimed to be the depositaries of the knowledge of the ag in which they flourished, exerted all the influence over the Christian world, to diffus under difficulties of no ordinary kind, this important drug. Many failures, however, from an ignorance of the proper mode in which it was to be employed, and from the importation of varieties possessing little or no power, awoke feelings of the stronger prejudice against it. Several years classes during which a severe war of words we waged, before it was universally acknow ledged to be what Dr. Robertson, the historian of South America, has justly de-scribed it, " the most salutary, simple, and perhaps the most restorative virtue, that Providence, in compassion to human infirmitie has made known unto man." A beautiful tract, in our own language, from the classic pen of Sir George Baker, gives us a most interesting history of the first introduction of the Peruvian or Jesuit's bark into civilized Europe, and more especially into this country, and the numberiess works that have been published on that subject are founded upon this every. But many other points of very great importance have be discussed, and still remain for elucidati for, although many inquiries have been stituted, and individuals of high sole attainments have been engaged in vario researches, who have, with dilig discrimination, employed thems citing facts, we have yet much to lear much that is unknown, to disc years since, Heisrich von Bere work in Gorman, "An Att a Monograph of the Barks," in wh proprinters had an interview little are a list of no less than 6.72 annihous une right hom, greatenan immediately had written upon the subject, and of 300 hooks and pumphlets that had been and hooks, and this did not contain some of the

immediately within the scope of the inquiries of this institution, and which demand our attention. The first question to be discussed is, What are the trees which furnish the genuine cinchona, and how are they to be distinguished? The second is, In what way are the medicinal virtues which reside in these trees to be best obtained, for its administration in the great variety of discases in which it has been successfully

employed?
The first or botanical question, although it has been so much sgittled, still remains in some degree of uncertainty; we appear now to be much nearer its solution than we yet have been. Amongst those from whose labours we have benefited, are some of the nost distinguished men, De la Condamine, Joseph Jussieu, Mutis, De Candolle, Richard, Zes, Rues, Lambert, Laubert, Humboldt, Bonpland, Viry, Pèe, and "though last not least," Don. The second or the pharmacontical question has also a long train of illustrious men to boast of. Pelletier, Caventon, Batka of Prague, Brera, Martius, Pfaff, Brandes, and I have on this occasion to point out the labours of our own chemist, Battley, which may be fairly considered as mong the most important that have yet been undertaken.

It was in the year 1738 that the celebrated French mathematician De la Condamine, who, was then resident in Peru, gave the first botanical description of the Peruvian Bark; but his wish to import it into Europe, either by seeds, or by cutting, was unsuc-cessful. The high estimation in which his efforts were held, is marked by the name which was by the universal consent of the he described, and the Cinchons Condamines was admitted in the Pharmacoporis. In Germany it was called "Der Offizinelle Fieberrindenbaum; in France, LeQuinquina; in Italy, China Chinachina; in Spain, Corteza de Loja; in Portugal, Quina; in Holland, Kineboom; in England, the Peruvian Barktree; in Denmark, the Quinatree; in Sweden, the Quinatred; and all the varieties of the bank found in commerce were imlicitly believed to be the products of the tree thus described; different engravings of it have been given by Flenk, by Humboldt, a translation of the papers of Has bille. (and Hospiand; the one which is now before I flat interesting work,—accompanies cyclic you, is from Ness Von Essenbach. Joseph collection which, through the liberality of sinasieu, who was in South America from the life. Lambert, and his well-known love of year 1739 multi 1771, gave much attention selvinos, is knowledge to the barks, but seems not much to have tused history—may be said to huse leviled fathers have been at all handled. This paper remarkable (as Noctor Manuel de country yet been at all handled. This pavels

most distinguished authors of Spain—viz. Steeperis, the biographer of Mutis, observes)
Masdevälls, Franseri, Lopez, Banares, and the the commencement of a botanic da. since that time the discoveries which che Mutis, disembarked at Carthagens, and mistry has made must have swollen the catalogue to an immense extent.

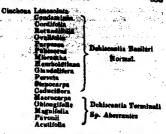
Of the subjects which have been treated, there are two questions which come more which has heatowed upon the rate of the man. innumerable sources of comfort, an pects of future benefits.

Although Penelle, Plumier, and Lossing, had made some slight botanical researches, they had done nothing for the science, which they only occasionally cultivated it remained for Jose Celestino, first to unfold the beau-tiful volume of the torks of nature which lay before him, to these the richest page for his sxamination, and to give to mankind the valuable result of his studies. He may be said to have laid the foundation for a superstructure which has now arisen, and which remains to be improved by an ardent host of labourers anxious to follow footsteps, so clearly, so usefully, so justly defined. He quickly transmitted to Europe whatever information he could glean, collections, drawings, specimens, were forwarded by him to Linnseus, and to all the scientific institutions of Europe; and the epithets which were bestowed upon him, and the testimonies of approbation and of admiration which blowed him to the grave, are proofs that talents were appreciated, and that his claims were universally recognised. He first described the four species of bark, and gave a classification in concordance with the views of botany then entertained, and the boundaries of that science are now much enlarged, and therefore more accurate knowledge of the objects of nature has been attained. Still his name is venerated as the first correct observer and the best describer of what he saw. His pupil Zea followed in the path in which his preceptor had gone, and has also a claim to our respect and gratitude, as have also Ruez and Pavon, whose rich and valuable collection of dried botanists of Europe given to the tree which specimens of the genus cinchons is now in the possession of that ardent and zealous lover of science Mr. Lambert, one of the vice-presidents of the Linnman Society; to this collection has also been added that of Dr. Thomson, which was obtained by the capture of a Spanish privateer, which was carrying home specimens collected mean Loza and Santa Fe. Mr. Lambers published "A Description of the Genta Cincolona," together with a plate, while with a plate, while when the colonary together with a plate, while when the colonary to the colo matter it contained, as from its giving to us

of Humboldt and Bestpland are next to be abled to their inquiries, and their finestictions of different species of this finestictions of different species of this finestical all bestplates as the foundation of the different, olampications which have been attentional paid more regular and more namreal fire-gramma have been followed, than the artificial ones which were so long ad-

The example of inquiry set by these botanists has been followed by other naturailists, but as the opportunities for conducting any inquiries are the very frequent, we must not expect the we are yet fully must not expect the are yet fully acquainted with the trees of the family einchona, particularly as many trees possess in various degrees the power of depositing in their bark, secretions which possess the medicinal virtues which so remarkably reside in that which is called, as superior to all others, the bark. The modern genus cinchona is limited to about sixteen species; some which were formerly included are found very different in structure, and also in their properties. Amongst these are the different species of the exostema, the losmibuena, &c.; these various families belong to a very extensive natural order, the rubracere, which possess families of great diversity of form and structure, as well as others which do not offer such striking marks by wi they may be distinguished one from the other. In the last volume of the Linnean Transactions, is a paper, very short, but most valuable, which has thrown a new light upon the subject, and has furnished us with a key, whose application has unlocked an unexpected store, from which a guide through our difficulties is obtained. It is to Mr. Don we are indebted for a discovery of no small importance to us, and which adds a further claim to the consideration he already enjoys amongst naturalists. I am happy to learn that such a successor is appointed to our late lamented friend Gilbert Burnett, in the King's College ; such a selection will be a source of gratification to every lover of that science which he has cultivated and adorned.

Mr. Dos has taken the variations of the estivation, or the measurer in which the seal smeslopes are arranged before they as the character by which the state of the groupe may be distinguished; and as these variations of estivation are found consisted with other differences in structure, is affird a very valuable distinction. The has phearwed, that in the true cinchones, of make he gives by species, the antivation is well to



In commerce four important varieties of bark are found, which are again subdivided. as I shall hereafter have occasion to show you. 1. The Quina Naranjada, or orangeyellow back, of which there seem to be two sorts; the calasays, and the royal yellow quinquina; the first title, however, appears to be given by the native Peruvines to the superior bark, which they believe the yellow to be. 2. The quinz ross, or red bark. 3. The quina amarilla, or pale yellow bark, of which there are different sorts, named from the appearance of the epidermis. 4. The quina blancs, or white bark. The opinion has been adopted by various medical authorities, and the Pharmacopœias have also canotioned it, that these different sorts of bark are the products of trees easily to be distinguished one from the other, and the Royal College of Physicians, taking Zea as their guide, have admitted three species—the cordifolio cortex, the lancifolize cortex, the oblongicolize cortex. Whilst Dr. Thomson in the London Pharmacopenia, following the authority of Mutis and Zea, considers the cortex cordifolia to be the pale bark, in Ediaburgh College, "Dr. Dubcan, and Dr. Powel, regard this as the species yielding yellow bark." Whilst the lancifolise cortex is considered by the former authorities to be the yellow bark, those whose opinion I have just alluded to regard it as that which furnishes the pale. The cinchons oblingifolia cartes, and the magnifolia, seem to be acknowledged as those from which the red is obtained. Drawings from these trees are placed before you. A list of the best engravings you will find in the work of Nees Von Essenbach. These discrepancies of opinion were unavoidable, from limited knowledge we posses innited knowledge we possessed of trees; but we have now ascertained that: shape of the leaves cannot serve as gre to the peeler, and his practical experi must remain as his only as science has made some farther at at present he depends upon his e the taste of the bark. Humbole must be allowed to be quite declare says, " I hardly know any one the va more in the shape of its leaves then clin Whoever determines single speci

dried collections, and has no opportunity to of information has been sought, and some examine or observe think, in their pative expectations raised, which I think council forests, will be led as discover different be borne out, namely, that by the lichens, species, by leaves which are of one told the or mosses, we can distinguish the tree, same branch. The yellow large, we have they have been studied with a preison orthy found at one and as the same little with a redour by botanists. Fee, more particularly. foliis ovato-oblongis, ovato-lanceolatis, and ovato-cordatis; Mutis calls it cordifolis, because it is the only kind on which cordate leaves are sometimes found. Even the laurel-leaved cinchons condamines, the finest bark, from Uritusings, has very diwhich it grows, and which equals that of St. Gothard or Mount Ætna." Humboldt very properly points out the form of the flower as the diagnostic mark, but this of course is only useful at one particular season. Humboldt also took with printer's ink, impressions of the leaves, at Gonzanoma near Loxa, which still further corroborated his opinion that the distinction made from ape of the leaves is unsafe.

I do not think that enough of facts have yet been accumulated, to enable us to judge of the value of the lichens, as a diagmostic mark of the species, but certainly their presence or absence may be considered as most useful indicators of the state of the bark. We know that the several species of the family rhizomorphs, are very active agents in decorticating dead trees; and, as has been observed, "they assist in the disintegration of lifeless organic bodies, which would otherwise encumber the surface of the earth, and be exceeding tedious in their

remo "al." Thus the rhizomorpha cinchonarum is a rare species, but whenever it exists upon the epidermis, it indicates that the bark is in a state of decay, and that it has lost its febri-fuge power. Fèe states, that the presence of himantia cinchonarum is a certain proof that putrefaction has very far advanced. The hypochnis rubro-cinesus and nigrocinctus rarely grow in great quantities on healthy trees; and the opegraphs rizicols, and fissurina, likewise may be considered as indicators of the advanced age and impoverished state of the tree on which they are found.

When I have, at our next meeting, an opportunity of resuming this subject, I shall take up the pharmaceutical inquiries, more particularly those to which I have referred as entered upon by Mr. Battley, as he has with great labour, gone through a series of most interesting experiments in his labora-

that we cannot, then, look to the varia-tion of the shape of the leaf, which must be on of the tree, whether sarrounded be exhere or standing alone, by many circ the examinations at a shink must be edmitted. Another source ments are conducted a

ardour by botanists. Fee, more particularly, has devoted great attention to this subject; in has devoted great attention to sum suppose; in his memoir on the cryptoguistic epithytes of the officinal bark, he has suppose; some singular observations. He states like the gasticurate is found, exclusively, as the yel-low bark; that she graphic inturrupts is versified leaves, according to the altitude at found only on the bark of the lancifolia; these are the lichens which you find upon the specimens before you; and, after very careful examination of a vast variety of the different specimens of barks imported into this country, they are the only ones which I have been enabled clearly to distinguish. The ascidium cinchonarum, which is said to be found indiscriminately on them all, I have never observed, at least, taking the engraving given by our late professor, Gilbert Burnett, as my guide. Upon the red bark I have never observed the slightest appearance of adhering lichen; but this study is pursued under great disadvantages, from the want of a sufficient number of engravings to consult.

THE LANCET.

London, Saturday, January 16, 1836.

THE rejection, on Thursday sennight. at Apothecarics' Hall, of a student, who was a member of the Medical School in Aldersgate-street, has created a very strong sensation in several of the "recognised" establishments; because it was well known, not only to the lecturer, but also to the Aldersonte-street class generally, that he was fully capable of executing the duties of a medical practitioner in every department of his profession. The conduct of the examiner on the occasion in question was, we understand, that of a valgar, rade, and unfeeling man, and the extent ignorance was fully proved by the s committed in his insolent attempts by altitude, by age, by climate, by rect the individual who was subjected course and heartless sp

gively the same length of time will they this foul attempt has been made to injure. continue to be made the instruments of oppression and injustice. The rejected candideta had been the apprentice of a gentleman whe was not " in favour" at the Hall, and the aswardly expedient was resorted to of making an unoffending person suffer for the supposed misdeeds of another. On very many occasions similar brutality of conduct has been shown towards the students at the College of Surgeons; and the public may be assured, that whenever so much grossness of behaviour is manifested by men who are called upon to execute public luties, there must exist in those men a narked deficiency of the very qualifications which would best fit them for executing the luties of their office. The ignorant examiner, n fact, often subdues his victim by his insoence and his memacing bearing. Not five mestions are asked before the student feels hat he is to be disgraced. This distressing ppreheusion disturbs the operations of his nemory, distracts his mind, and altogether enders the judgment incompetent for the erformance of the task which he is require d to undergo, and the unleeling wretches the thus trifle with the feelings of the capidate, behold in the mischief they create he chief source of their own enjoyment, as hey refer to the incompetency of the staent, as furnishing the best proof of their wn tact, skill, and dexterity, in conducting se examination. Most sincerely do we hope nat another session of Parliament will not e allowed to transpire without bringing into ristence a statute which shall have for its biect the institution of a PACULTY or ME-ICINE in this metropolis, wherein all the caminations shall be conducted in public, the system of concours, or professional The tyranny of "Rhubert ally anuscaches the hour of its ter-

The HAGS of the HARL will, on reading it. be ready, we subject, to plunge headlong into one of their own caldrons. The original of this letter has, we are informed. been transmitted to the examiners at t Hall.

" To the Court or Examiners of Apothecarics' Hall, London.

"GENTLEMEN,-Having applied to you last night for the license of your Company, and having been examined by one of the members of the Court, and "rejected." I must attribute such "rejection" to the operation of some private feeling, which I have good grounds for supposing existed in the mind of my examiner. In order, therefore, to prove to THE PROPESSION, generally, and to THE PUBLIC, that such " rejection " was not the result of incompetency on my part. I demand from you a PUBLIC EXAMINATION, to be conducted in the presence of a professional audience, and I now state to you that I am ready to undergo such an ordeal on any day, and at any hour which you may be pleased to appoint.

" I am, gentlemen, your obedient servant, " THOMAS SMITH.

" 1. Jewin-crescent. " Friday morning, 8th Jan. 1836."

MANY erropeous opinions are entertained relative to the power which can be conferred by the Crown on the governing body in granting a charter for the establishment of an University in this metropolis. Most of those opinions are equally absurd and unfounded, but there is one which operates at this moment to the disadvantage of professional and public interests. It is believed, we understand, that the new charter can bestow on the emm ners of the University an authority, in awarding diplomas and licenses, equal to that which has been bestowed on the Co of Examiners of the Apotheosius Co many by the statute of 1815. In of it is believed that the University Charter

can empower the Sanate to grant diplomer | ber of a " Royal College of Bergeons." and liberace which shall confer upon their if he be a graduate of a second or third that possessors the privilege of engaging in medical practice in England and Wales. Hence a correspondent who signs his note "OBSERVER," "cannot conceive how the "Editor of TER LANCET should be of opi-"nion that, even supposing the University " should be devoid of any great reputation. " it should still offer no inducements to " candidates to apply for the diplomas, when "the possession of those diplomas will em-" power the graduates to practise in all " branches of the profession, and would " thus enable them to escape from the ex-" tortions practised in Lincoln's-Inn-" Fields, and the degradation of resorting " to the drug Hall in the City."

With regard to the College of Surgeons. it matters not what may be the arrangements in the new University. While we are without a FACULTY OF MEDICINE, and while the public in the distant parts of the kingdom are deceived by the name of "the College," there will be adventurers who will continue to give twenty-two pounds for a really worthless document, although it is well known to every professional man, that any individual may engage in the practice of surgery, without making any such purchase. Young men think it a fine thing to be sucked to show that they are Membets of "the Royal College of Surgeons in London:" and as the generality of the community are ignorant of the obsractor of the examination at that institution, the title often carries with it some importance in the sidnet of the uninformed public. If, therefate, the University be not founded on a principle of just and enlightened liberality. Apothecaries Act of 1815 he remarked, the -If the examiners be not men of very dis- new charter could not operate to the year dispulsion and existed attainments, and if judice of the drag-dealers in Black they dernet prove their qualifications by the and if this Act were absorpted, it is midde his which they obtain their offices, the hoped that there could then be no in "will consider the title of " M.R.C.S.L." consected with medical practice left Wild aqually he valuable on that of positions. But a charact, it s "MENCAL" In short, it will be thought distingly understood, counts some the schooly as well of a man if he be a mois-

University. The new institution, therefore, cannot, in any manner, affect the la vileges which the College of Surgeons can confer on its members, because, in beint of fact, the College has none to confer. It can neither give to a man the right to practise surgery, nor take from any individual that right. It is, therefore, strictly speaking, an incorporated nonentity. The minds of the students, therefore, will not, in all probability, be influenced in the remotest degree, either in avoiding the College of Surgeons, or in applying to that institution for its diploma, by the institution of the new University.

In the case of the Anothecaries' Company, however, the bearings of this question are wholly different. In the instance of that establishment, if it he the object of the candidate to embark in the profession as a surgeon in general practice, he must obtain the license of the Apothecaries' Company. even if he should he a medical graduate of the Matropolitan University. It is on this account that our correspondent "OBERRYER." and many others, are deceived. The source of the error into which they have fallen may be found in the opinion they hold, that the powers which may be conferred by the new charter, can interfere with, or totally abrogate, the authorities which are now exercised by the Court of Examiners of the Apothecaries' Company. In order to dispel this erreneous view, it should be recollected that no pharter can destroy, or even weaken. the powers which are exercised under an Act of Parliament. Unless, therefore, the ditions of an Act of Putlin

commun law of the land. If it be constructed cannot subvert existing rights -- how far instruments and, accordingly, entirely inoperative.

rations, and, as we before stated, if it is to exposure and general condemnation. become, in law, a valid instrument, it must

in order to become him must be standful. A stormy discussion afterwards excess in the the lift, and analogous to the circumstances | enactments. An admirable speach was made.

the principles and details of every charter, which the law itself has created, we are must be in accordance with the statute and inzious to learn, -as the new instrument otherwise, that is, if it he framed in apposi- any new rights and privileges are to be in him, it becomes at once en illegal established by it, in accordance with, or adverse to, the rapidly advancing knowledge of the times in which we live. We have It is impossible therefore to commit a called, repeatedly, for the exposure or A greater blunder than to believe that the new | DRAUGHT OF THE IFTENDED INSTRUMENTS. charter can break down the monopoly, or and we must confess that we have formed soften the tyranny, of the Apothecaries' Com- a wrong estimate of the minds of his Mapany, or in any respect control the proceed-jesty's present Ministers, if they cause this ings of the London College of Physicians, document to be projected and executed in because the functions which are exercised secret. If the thing is to become law, the by the drug corporation were created by Act public ought to be made aware what are of Parliament, and the privileges of the proposed to be made its conditions, but if it College of Physicians arising out of the char- be not to possess the weight of a legal inter granted by HENRY the EIGHTH, have strument, but is created for the sole purbeen confirmed by Acts of Parliament. The pose of calling into hirth a series of empty new charter will necessarily be directly pow- and worthless titles, it must be regarded as erless with reference to both of these corpo- an act of solemn mockery, which deserves

It has been remarked that there is no he so shaped as to overate in conformity precedent for the publication of the intended with the existing statutes and prescriptive charter, -- say, in the Government Gasette. customs of the realm. In granting a cher- The proof of this omission of publication is ter, observe, it is presumed, both by the not, alse! manting in words. The effects spirit and the letter of our constitution, that have long been sufficiently perceptible in a sacrifice is made of a portion of the royal the proceedings of the College of Surgeons. prerogative, in order to advance the public the College of Physicians, and other charinterests. The power, therefore, of granting tered bedies. If them he no precedent, so a charter, is, in itself, a lawful condition, or much the worse for the public; for so many prerogative, annetioned by our free consti- the more injurious charters have open into tation. Accordingly, that power, it is easy to existence, and, as the only effectual correcconceive, must, in all cases, be exercised in tire of the evil, let the precedent he immeaccordance with the authority of szisting distaly established. The circumstances which statutes; for if it could be adversely used, transpired in the years 1799 and 1800, are with reference to the law itself, the royal admirably illustrative of the advantage of hand might, for very unworthy purposes, publicity, and the evils of secrecy, in makpush saids by degrees all our penderous tern connected with legislation. The meamong of statetos, and the will of the Krus spagers of the old Surgeons' Hall applied to in it is each cuss suitablish a tyrannical Parliament for an Act of re-incorporation. many over the legislaterial rights of Their bill was introduced, and, on its infaor of the senate. more provisions being made known, the him therefore, that the most charter, profession denounced it as with one value. actives which is suited to the splitt of Home of Lords relative to its proposed

of the measure were denounced as being last sersion of Parliament the charters of narrow-minded and iniquitous in the ex-jour municipal corporations were all detreme, and the advocates of the scheme were abashed and dismayed, and shrunk from the dirty labour which they had been called upon to execute. The bill, therefore, was kicked out of Parliament; but it met with that fate because, and only because, its odious provisions had been subjected to the scrutinizing examination of the members of the profession.

Now mark. In the following year, to what manœuvre did the old corporators resort? Why they went slyly and secretly to the King, and petitioned His Majesty for a charter of incorporation. The scheme was successful. The royal ear was abused, the members of the Privy Council were either knavish, asleep, or deluded, and the instrument was fabricated. The results have been known and felt by the surgical profession in England, during the last sixand thirty years. The charter thus cunningly obtained, was fabricated out of the identical clauses which were contained in the Bill that had been so ecorufully, so indignantly rejected by the House of Lords in the preceding year !

This is a most instructive historical lesson. Are we to be insensible to the admonitory indications of experience, and remain unmoved by the evidence of facts, the force of which any child may feel and understand? We most emphatically exhort the present liberal Ministers of the Crown, not to tarnish their reputation, or derogate from the character which they have established for open and straight-forward dealing with the public, by obtaining for the intended charter the sign-manual of the King, until the country is placed in full possession of a knowledge of its intended clauses. Assaredly it must be confessed that a system of countly intripue and secrecy, in framing laws indiced to bring the same commod which are designed to affect the most inportant interests of the community, is utterly

All res

upon it by Lord Tavanow. The principles of a representative government. In the molinhed, as the enormities to which they had given birth could no longer by endured. Those instruments of oppression had all been obtained in secret, but the acts of injustice which have been perpetrated under them, operated on the public. Could those charters have been obtained, except by some secret, some covert method? If the application for each municipal charter had been made a subject of discussion in Parliament, it is utterly impossible that the principle of selfelection could have sustained its ascendancy during so many lustres as it has done centuries. Secrecy was the source of evil on every occasion when a municipal charter was granted, and in founding an university in the metropolis of this empire, no man in his senses can believe that a liberal Ministry will plunge headlong into such a poisoned source of irremediable of mischief.

NEW METROPOLITAN UNIVERSITY.

(From an Edinburgh Correspondent.)

THERE has not been a topic of more general conversation for a length of time amongst us here than the Metropolitan University, all classes of society being interested in the well-being of our own college; for the average number of students usually amounts annually to as many as two thousand, producing, as you may suppose, a very considerable revenue, not only to the cormorants of the University, but also to the tradespeo-ple of the town. Though some of the other lecturers in the University may suffer more or less, yet it is the members of the medical reserve who are most alarmed on the present occasion, and certainly not without good cause. They have enjoyed it may be truly said, a complete monopoly in the manufacture and sale of degrees for at least a case. tary past; and one year after another have the medical professors used all the genuity to increase the price of until, like all Jews in trade, it It is not much more than twenty years ago th portant interests of the community, is utterly added twenty-five per cent. to the price of incompatible with the spirit and operations each theset, but Dr. John Thompson's

liberal additions to the curriculum gave them The anatomical teachers, as well as the a death-blow, which they are all aware they never have recovered, nor ever can. It is only to be wondered at that their monopoly has laftetless long, and that the largest and greatest metropolis in Europe has not until now competed with them, and had a University within its own precinets, without compelling its inhabitants, as well as those of all England, to repair to Scotland, not in search of knowledge, but in order to be dubbed. consider this fact, indeed, to be a monstrous momaly in the history of civilized nations. Notwithstanding the absurdity of the attempt, our Edinburgh medical professors are deternined to make a struggle to arrest the prorress of reform in medical education. Meetng after meeting has taken place among hem, and if I mistake not you will soon see me of our anti-liberals amongst you, to sow he seeds of discontent, and nurse the tree of corruption. Young Thomson is too well mown from his past services, so that a new nan will be sent to London.

Sir CHARLES BELL is not yet come, and Dr. John Thompson, who knows him of old, quaintly observed the other day, " That 'if the surgical knight does not come down 'immediately, he never will come at all." My own opinion is that he may yet give us he go-by, for it is not common, nay I doubt f it ever occurred, that a Scotch doctor who had once crossed the Tweed ever returned to his native mountains. Parritch and kail re poor fare after roast beef and plum-nulding. However, times are changed, and iir CHARLES's discomfiture at the London University College, the total failure of the Middlesex school, and the approaching revoution in Lincoln's-Inn-fields, may induce he chivalrous knight again to try his forune here.

As it is most likely that you have not aleady seen it, the inclosed copy of his letter, eccepting the chair, will amuse you, It is in excellent portraiture of the man, whose anity is so prodigious, that he never loses in opportunity of talking about " I, myself; . 1 77

* " Brook-street, 11th Dec.

"就在水空就在现金的。"。

"My LOED,-I have had the gratificaion of receiving your lordship's letter, and accept the honour which you, the magis-rates, and council, have conferred upon me. the manner in which this appointment has eon conferred, and the assurances with your lordship has accompanied the armony in our endeavour to culti-Mich science, and promote the reshedien of the University. You place me skettion; but where, most of all, experience and Jadgment are necessary. As to the irst, T trust my habits of life give you suffident werrant. For the rest, I ground my

students, have become exceedingly impa-tient, because the "inquiry" which was instituted to inquire into the conduct of Dr. CRAIGIE, our anatomical inspector, has not yet been brought to a conclusion. circumstance has heaped such odium on the public functionaries, whose duty it was to have prosecuted the investigation without delay, that a public meeting of the students is contemplated, as the coarse and insolent doings of the awl-wise "man of leather," as CRAIGIE is called, has caused an universal feeling of disgust in the schools, and has materially interrupted the teaching of practical anatomy here.

Another topic has formed the subject of a good deal of conversation here, though it may be of too trifling a character to interest you. Dr. ABERCROMBIE has received a medical degree from Oxford! This appears to us to be strange, as we have always flat-tered ourselves that one from our own University was the best of any, whilst we have always ridicaled degrees from an University where medicine is not taught. Although to us the matter is inexplicable, you perhaps may see further through it. All we know is, that Abercrombie, though a very pious man, is a cunning, intriguing little fellow, and when he went up to London to be examined before the Parliamentary Committee, he made himself Sir HENRY HALrosp's most obedient humble servant, and toadied him in all ways, which makes us

hope of being useful, on the characters of those distinguished men, many of them removed from the stage, with whom I have been united, or with whom I have been in consultation on many trying occasions. By this intercourse my opinions have been matured, and now, through your kindness, I shall use the advantages which time and circumstances have given me, so as to pre-serve the record of the opinious and practices of the men who have raised the profession of surgery in these kingdoms to its present acknowledged perfection. By this, to me, eventful change, I am led to reflect on the advantages I have possessed, in my anxiety that your lordship and the council shall not have occasion to regret the decision to which you have come. The uranimity of the council, and the very flattering expressions of your lordship, lessen the regret which every one must acknowledge to be natural to me in leaving a society where I have experienced uniform kindbess and liberality, and in breaking the latimate and friendly relations with some of the most estimable men of our day.- I have the honour to be, my Lord, with great respect servant,

"CHARLES BALL "To the Lord Provest, &c." place that your will President must have sions, and that they were fully determ gree, in payment for the humility and vices" hitherto unkaben.

ST. GRORGE'S HOSPITAL. BLECTION OF A CHAPLAIN.

A VACANCY having occurred in the office of chaplain to St. George's Hospital, in con-sequence of the resignation of Mr. Walker, e candidates for the appointment were, the Rev. FRANCIS GREGORY LE MANN, and the Rev. Mr. NEVIN. The election, which was actively contested, terminated on the 8th instant in favour of the latter candidate-the numbers at the close of the poli being as follows

For the Rev. Mr. Naviw 156 For the Rev. Mr. LE MANN .. 81

Without attempting to institute any inquiry into the merits and qualifications of the candidates, it may be remarked, en pament, that the regret felt within the hospital, amongst those who are most proparly interested in the result of the election -the sick inmates-may be expected to be very great, at the non-election of Mr. La Mann, who by his kindness and attention to the sick, during the seven or eight weeks when he officiated in the hospital for the Rev. Mr. Walken, previous to his resignation, succeeded in obtaining the ap-probation and good will of every inmate of the institution. Mr. Le Mann is well known, by these who have the gratification of his unintance, to be possessed of liberal and elicistened senting nts, and an excellent knowledge of classical literature, having, at a very sarly period of his camer, obtained a fallowithp in King's Collège, Cambridge, Testianoulais of a very fattering kind relative to the fattiful and zealous discharge gh character, by whom he had been em-oyed as a curate; and had not the election on interfered with by the medical and surgical staff of the hospital (with the ex-ception of Dr. Wrisow and Mr. Walken), we is every reason to suppose that Mr. Le Many would have been elected by a triumpheat majority of the independent germbors, many of whom are much disguisted with the independ interference of the affind oligarcy, who for years past have affind oligarcy, who for years past have affidised in all the hospital appointments, gae frequently remarked, in the course of a finance, by the independent governors, the officious conduct of the Broden ty in all matters relative to the heapital

a the means of sending him the Oxford to shate the anisance by withdrawing their we was the amazone of "attendance; their support and influence against as the term of their annual subscriptions should have expired. We were influence, and believe it to be correct, this Mr. Nevre has not had the liencity of a collegiste education. The conduct of one of the medical officers, when same is unworthy of mention, has met with the severest reprobation. At the commencement of the canvair, he announced that he was favourable to the election of Mr. Le Mark, and actually tendered to one of his friends, instructions relative to the most appropriate course to be pursued in order to obtain the chaplainship, although at the very time, the hypocrite was actively canvassing for the other candidate. Personal exposure and rebuke, however, have followed this deception, which the party is not likely to forget during the remaining days of his earthly pilgrimage.

> The British and Foreign Medical Review. Edited by Joun Ponucs, M.D., F.R.S., and JOHN CONGLLY, M.D. No. 1. London. Jan. 1836. Sherwood.

A waw candidate for the favours of the medical profession has wedged itself in amongst the periodicals, between the Medico-Chirarpical Review, and the Edinburgh Medical Journal. Which of the three at last will go to the wall we pretty well know, but object to slarm either party by publicly stating. We are well enough pleased to see the work, as strenuous friends of comnetition in all the departments of medical science. Who, indeed, have more reason to he pleased with rivalry amongst periodicals? We have witnessed the life and death of of his ministerial duties were produced in twenty claimants of that class since the farour of Mr. La Mann. feem clergymen of year of our Lord 1823, each new "journal," most Lenote and all, by thrusting itself beneath the pedestal of Tax Lawest, serving as an additional lever of elevation to thi work. 1. 184

The Editors of the British and Fornis Medical Review pame forward professedig an chiaffy, we believe, with those two ex their project; first, that fireign me rature had not obtained the attenti it descreed from the existing a rindicale of these countries; and, see that the criticisms and analyses of Engl works, which appeared in our quas y in all matters remove to see day the provinced them. From attending the medical journals, were not "tree and common, as well so from roting at elec-

the possessing a competent knowledge of cul journals in this country from being very rience and efficient acquirements, ind 'qualified to undertake it," to " inexperiyouths of " unexercised judgment."

This was a tolerably smart slap in the face for Messra. Jourson, (senior and junior, according to the title of the Medicu-Chirurgical,) with how much justice or decency inflicted, we profess not to say. Such, attempt was made to laugh down the new editors, as they were seen rising through the trap-door, with the announcement in their mouths that they appeared as " writers of known and unquestionable respectability." We are obliged to presume that this character was assumed by the Editors in their own persons, because those gentlemen are the only "writers" who are stated, and are, therefore,acknowledged and known, to be contributors to the first number of the new journal. Or was this an oversight, and contrary to a possible expectation, after such a declaration, that the name of each critic or analyst would be attached to his respective article?

In considering the question of "success" in the establishment of a new periodical, the point of debate with the projectors is -or ought to be-generally, that of the means of the class of persons to whose interests it is to be deveted, or whose attention it is designed to arouse. To talk of there being "room" or "no room" for a new work is abourd. There is always abundance of room where the azena of felt, or not in want, or already supplied, or views of the presiding genius, except subtile in riches, and we correlate suspect when the declarations are adverse to be one or other of these conditions will some of medical reform. province the career of three quarterly made. It would puzzle us, for instance-

o a line medical and

the previous Regulaters of such article, or producted. Why, Mr. Reiner's quarterly 'as the work received might demand," | journal is but just dead! The Edinburgh were not whe productions of man of expe- has long cossed to circulate any where but s- amongst a very select for at home, and ' pendent of the influence top evident'in some hundred or two suggests on movel the heaty productions of jurgaille sail in stations absend; Dr. Jenteson once had considerate writers,"—that the task had such a struggle for it, that nothing but the men " hitherto confided to persons little excitement of change, backwards and forwards, from quarterly to monthly, and 'enced reviewers, however able (!)," " to | monthly to weekly, and weekly to quarter-"misrepresenters and critics of limited by issues of his work, kept it in life and be-"knowledge," " uncandle persons," and ing; and last, though not least, one of the editors of the new journal has already experienced a signal failure as editor of a medical periodical. As, however, there may be purchasers enough to sustain one quarterly journal, it must be a strife of industry. we suppose, amongst the Editors, whose at least, they felt it to be, whereupon an shall be the better production, the last speculation, however, always working under the disadvantage of infancy. Of " induatry," we say, because the labourers in the field of literature are open to the engagement of all, and that redselver would be unwise, indeed, who would work with the aid of inferior talent, when better was to be obtained.

By-the-bye, there is one division of the field in which no quarterly journal has yet mained a character, or even sought it,-that of medical politics, -taking arms in favour of free and liberal medical institutions. Not that any one of them has eachewed the question : but each has either at once declared an open enmity to thorough medical reform, or has second at its noble and generous views, or has with one hand tried to retard its progress, while aiding it with the other. Thus have we seen the most diverse and opposite views in one number of the quarterlies, on the subject of medical gevernment,-good principles, and wretched and impossible details; or correct details with expressions of horsor at sound principles. There mever seems, indeed, placed Marriage it not provided with obstacles to over them that watchful eye, and that matter crucked by the law, — where there reviging hand, which are essential to ensure the liberty of the press. But; though high and starting character,—and heapire whole acres of "room" for the confidence in the sentiments and on of marte, there may be more more expressed in the name of " We," and stable than buyers; the buyers may be reader never appears to detect the ri

at worth! you divine the principles that build be defined on the views which preall in the new journal. Thus, at page 2, re find a most unhappy sigh over " medical petruction," doubtless in consequence of ome obscure impression on the part of the rriter, that " Government" is about to adopt change in medical law which will tend to increase the amount of learning and cientific acquirements" in the medical refermion of England,-that is to my, serally, to upset the ticket and certificate ystem in medical education. Yet at page 6 is to be found the following unconsciously ttered mathema against that very system; which for us to explain and apply is superluous:

"The number of young men sout to their tudies in Lindon, is, we apprehend, coniderable; and the same ever look upon the outbful, ardered, they are thought countenances of the junior student, they dominencement of each assion, without our shoughts being arried to their several homes, where florts are making, and secrifices, of which oung students are not always mindful, and thich give something of solamnity to the acit engagements so soldly entered upon y their public teachers, in years which are bettermine whether or not those sacrifices re to be made, and not a few parents, mistigeties to be endured in vain."

"Sacrifices," indeed! Sacrifices to the pd Manmon, in the temples of the "recognized" hospitals and schools, the College, its Halls, where, for simple hits of worthless appr., thousands upon thousands of pounds a annually exterted from the "anxious areats" of the certificate-lacking stadents he sholition of this system, on the out and, and its sacred preservation on the ther, are the ultimate points for which sadical reformers and the monopolists everally struggle.

Of the execution of the new Review, we see yet hardly perpared fully to speak. The six article, however, is injudicious enough assignize, six. Is it for the production of the single works,—articles not of the alightest six himse—that the projectors continued a new modical journal necessary in

the the shiple there erems to have been been been to be the send of the send o

ine of Lose of the Planus and Mr Appendages, when After Delivery, with Remarks on the propriety of removing that Organ, in Casel of Interdion or Melerins. By John Crantin Tookie, M.R.C.S.R., &c. E. Ooz, Bushwark, 1836. pp. 22.

Faom a little pamphlet which has just been transmitted to us under the above title, we condense the following curious statement:—

Case.—At four o'clock a.m., May 22, 1835, Mrs. Aston, midwife, of Coventry, was requested to attend a woman in labour, who she found had already been in labour forty-eight hours, upon her knees, insisting upon being delivered in that position according to the custom of her country, Ireland. When induced to lie on the bed, an examination of the parts showed the os tincz dilated to about the size of half-a-crown; the child's head presenting as usual. Every thing went on well, and the woman was delivered at 7 o'clock, the same evening, of a living child. The placenta followed whole in a quarter of an hour, being expelled by a pain. No hemorrhage ensued at the time, although a considerable quantity of blood was lost during the night. The after pains were trifling, and she felt so well, that she pertook plentifully of animal food immefiately after the midwife left.

At about four o'clock on Sunday morning, May 24th, Mrs. A. was hastily summoned in consequence, as the messenger stated, of the appearance of another child. The woman had risen during the night, and had gone: into an adjoining room to make water; when her screams alarmed her lossband, who called in some of the neighbours, and found the woman scated on a stool before the fire, with a vessel of warm water in front of her, and a large substauce, which they compared to a child's head and nack. lying between her thighs, supported by her hands. The hemorrhage had been profuse. The midwife found the woman on the bed, pale from loss of blood, and in considerable pain. The blood had even run on to the floor. The uterus was lying on the d. loosely connected to the vagina by a mbrane only. It was removed shred of the without effort, and p seed in a bowl. The eed, and next morning hemorrhage then enamed, as the midwise brought the s father, who discovered, to be that it was an uter o'clock he visited the woman. completely exhaust her arms ab expense of

The second secon

any sensation like bearing down, nor of any established, she again gays the child the substance lying in the vagina, nor of suffer-breast, and persevered in doing so during ag much pain: neisher was these much several weeks, until, finding that one must no distention of the abdomes. We was there then or at any time during the progress of bille attack, the tongue at no time enhibited the case, any thing more than a slight degree of tenderness, which, however, was hardly and sallow as before, and she complains of parent on the left lumbar region only. The only part of the uterus and its appendages not found in the bowl, was the left ovary. The uterus, on inspection, was a heavy, hollow, but firm pyriform body, very nearly as large as an ordinary child's head, at term. No leceration was visible, except a slight rent in the posterior lip of the os uteri. The attachment of the placents was distinctly marked, being of a deeper brown red than the remainder of the mass; a quantity of flocculent matter adhered at its site to the walls of the uterine cavity. It was inserted over, and concealed the opening of, the left fallopian tube. This orlfice was easily discovered by detaching a small portion of the loose flocculent substance. The vessels were large and tortuous, and fully accounted for the great hemorrhage. Upon making a section along its anterior aspect, the broad ligaments, with both fal-I lopian tubes, and the right ovary, were discovered. The funbriated extremities of the tached, and to have remained in situ.

My father judged it prudent not to institute any examination per vaginam, fearing. also, that any salutary union of the aides of the vagina might thus be retarded, and risk an ulterior prolapsus of the abdominal viacera. He enjoined perfect quietude and absolute restriction to the horizontal position, abstaining from active medicine, and ordering a light farinaceous diet,

May 25. Monday morning. The patient had risen during the night, and passed her urine freely. She had slept, and appeared Toas well as on the previous evening. To-wards evening she passed several small scybale. She went on without accidents, except some increase of tenderness of the side, and some degree of fever, and diarrhera on the 27th of May, which continued for three or four days, but which was then the that and from that time she gradually that her health and strength.

to her confinement, milk was in considerable quantity, but imther the loss of the aterus, this together with that of the lochis, ed, yet she persisted in applying a sailed, on the breast, which included one, loose connection with the vagina.

It is equally difficult to account for the region attended, with nation should be at it received of the uterus; or so saile a fit occurred, an from the appearance graciting chuss being removed. When sented on examination, is most been

The woman did not much complain of her health had been in some degree rea good deal of debility, but not such as to preclude her from following her usual occupation.

> The child was for a long time in good health, but about a month since it was attacked by diarrhosa and died.

Principal Physiological Phenomena. Those which present themselves in the history of this case are, the sudden and immediate suppression of the secretion of milk, and the absence of any flow of the lockia. So triffing indeed was the quantity of the latter, that the napkins were but slightly soiled; the hemorrhage too was complisely arrested, as she did not lose a drop of blood after the morning of the 24th (Sunday). There is this additional pacularity connected with the former fast with the farmer this additional pacultarity connected with the former fact—viz. that the milk had already appeared in considerable quantity before the loss of the uterus, but was entirely and permanently suppressed within two days after the separation of that organ. It tubes were particularly clear and distinct, this fluid that the woman persisted in applying the child to the breast, and, impressed with the same idea, she continue do so until within a short period of the child's death, when finding her efforts vain, and that not a drop ever exuded, she finally desisted. She was repeatedly remonstrated with upon the subject.

> The absence of all peritoneal inflammation, also, is a circumstance particularly worthy of remark, no means being taken to prevent it. The only symptom which ever caused any anxiety as to peritonitis was a slight degree of pain in the left lumber region. The great quantity of blood lost when the uterus was separated, might in some measure serve to explain this singular fact? With regard to the violence which effected so complete a removal of the uterus, thirty-six hours after delivery, it is almost impossible to conceive it to have been offered by the woman herself, and yet such, there is every reason to believe, was the fact, if violence alone can suffice to accoun for such an event. The midwife most po tively amerts, and her statement is sta corroborated by the neighbour who first the woman on the morning of Sunday, that no effort was required to remove it from

> It is equally difficult to account for the inversion of the uterus, or to smit when it occurred, sin from the appearance pass

pened spontaneously, no traces of any violence existing, and no portion of the placents or other body remaining, by which sufficient traction could have been made. Provious to its descent on Sunday, nothing, which could have led to any suspicion of such an event, had happened.

The fact of none of the viscers following the uterus, and the total absence of bearing down, are equally inexplicable, unless we adopt the idea that the rectum, distended with fecal matter, had fallen forward towards the pubes, and closed the sides of the vagina. Yet the woman had not the slightest difficulty in micturition. I have not been able to ascertain whether she passed urine on the night of Friday. This circumstance will, perhaps, bring us nearer the epoch of the inversion of the uterus, as it is difficult to suppose a body of such magnitude to have been in the vagina without obstructing the flow of urine. Owing to her constant refusal to permit any examination per vagi-nam after recovery, I am not able to describe the parts at the present moment. Probably the vagina forms a cul-de-sac, in consequence of the adhesion of its opposing surfaces. Sexual intercourse has repeatedly been had with her husband, no mechanical obstruction existing.

In connection with the loss of one ovary, it is interesting to be able to state, that, although no impediment to coits exists, yet the usual feelings and desires are entirely wanting. This might have been anticipated had both ovaria been removed, but one still remains in situ. Of course the menstrual discharge has never reappeared; even the small quantity occasionally furnished by the vagina has not been observed.

The history of this case demonstrates the possibility of removing an organ so voluminous and essential as the uterus, together with the ovaries, fallopian tubes, and ligaments, with only a slight impairment of the general health.

A question has been raised—Can a woman, after extirgation of the uterus, ever become the subject of an extra-uterine conception, should the vagina not close and form a culde-sac? It is obvious that nothing of the kind can ever happen to the woman whose case forms the subject of these pages, as the left overy was the only portion of the nterine appendages not found in the bowl, and all attend feeling is extinct.

I have not met with any case which may thirly be considered as parallel to the presist. In all the other cases the mamme became wasted and absorbed in the present instance they are still prominent, but this, I fallsh, imply be attributed to her perseverance as permitting the child to suck.

MODE OF

REPRODUCTION OF BONE APTER . EXPOLIATION.

In the Beinburgh Medical and Surgical Journal for January 1835, we find an article of which the following is a condensation. It occurs under the head of "Clinical Report for the Summer Session, 1825. By Mr. James Syms, Surgeon to the Royal Infirmary: "—

There are still several circumstances in the history of necrosis which remain very mysterious. One of the most interesting of these, is the process by which exfoliations comprehending the whole thickness of a bone are reproduced. Sometimes nearly the entire shafts of the tibia and humerus come away. But we have seldom an opportunity of investigating by dissection the reproductive process at a stage sufficiently early for discovering the nature of the steps by which it accomplishes ossifi-cation. In the case which is now to be detailed, the process of reproduction had advanced just to the extent desirable for pathological inquiry, and I think it will go far to put at rest the long agitated questions on this subject :-

Case .- Beatrice Stokes, aged 13, strained her ankle by a false step on the 24th of March. Rigors, vomiting, and headache, attended with intense pain in the leg, and the usual symptoms of inflammatory fever. soon followed. She was sent to the Royal Infirmary on the 21st of April. From the middle of the thigh down to the toes, the limb was red, swelled, and tense, except at the fore part of the leg, a little above the ankle, where fluctuation could be felt. Incisions were made, a large quantity of thick dark-coloured matter was evacuated, and the patient greatly relieved. Through the openings the bone was found extensively denuded, and it became necessary to amputate the limb. The recovery was tellious, but perfect.

Examination.—When the limb was examined, it appeared that nearly the whole articulating cartilage of the ankle-joint had been removed by siceration, leaving the bone bare and rough. The shaft of the tibia scemed to be dead throughout almost its whole extent, and had already undergoing considerable crosson by the absorbeing its junction with the cancellated between adjoining the epiphyses. When the finite was carried along the surface of the destroyer active and incision that had been made to expose it, a dense case or shell made falt, which, when displayed by dispersion.

the second

effed, with osseous matter deposited in its from having entered as a pupil this session substance. The membrane was traced dis- at King's College. tinetly from its sound part, where covering the epiphyses, over the dead shaft, and no one who saw it could doubt that it afforded the hed or matrix in which the new bone was deposited. Where covering the posterior surface of the tibia, though detached from the bone, it had suffered comparatively little change, which rendered its recognition at other parts more certain. The new bone did not constitute a continuous shell, but was deposited in flat masses, or scales, of various extent, between which the periosteum intervened so as to insulate them completely from each other, or any portion of the old bone retaining its vitality. The o-scous substance lay on the inner surface of the periosteum, with merely a fine film of the membrane covering it, but with a considerable quantity of soft getatinous, substance like coagulable lymph effused false pretences, he might succeed at one of over this, so as to line the interior of the case. At several parts of irregular size and figure, the periorteum did not exist, and at these parts there was a corresponding deficiency in the new bone. These apertures resembled the cloace, as they are named, which exist in the investing shells that are formed in cases of necrosis, and are usually ascribed to absorption induced by the pressure of matter confined within the bone. But it seems more probable, from this case, that the deficiencies in question depend upon the periosteum being destroyed at particular points in the commencement of

Remarks.-In explaining the history of this case, I think it may be reasonably supposed that the strain of the ankle occasioned inflammation of the joint, which extended to the tibia, and led to ulceration of the articular cartilages, and death of the shaft of the bone; that then suppuration took place under the periosteum, which having become at some parts disorganized, allowed the matter to pass outwards and distend the skin; that lymph was effused from the inner surface of the remaining periosteum, and also in its substance, so as to render it much thicker and softer than usual; and that then bone was deposited towards the inner surface of the membrane in numerous detached points, from which it was proceeding on as to make them coalesce, and constitute a cylindrical case to the shaft.

TING'S COLLEGE, STRAND.

dent, I presume new to address you in hopes sure; but not necessarily with good effect that you manbe able to suggest some remedy on the health. Changes of air continuitly as which I can be compensated for the loss work improvement in the whole system. nt you man he able to suggest some remedy on the health. Changes of air continual symbol I can be compensated for the loss work improvement in the whole system and money which I have sustained The lungs are peculiarly adapted to suff

It appears to me, as the professors have not fulfilled their agreement, that a part, if not the whole, of the money I was obliged to disburse, on entering, should be returned to me. Dr. Bisset Hawkins, as you well know, has not given a single lecture this session, and in his stead we had nothing but a hum-drum Scotch parson, who preached most soporific twaddle to us. Professors Hawkins and Mayo are in constant strife, and as their resignation is considered certain, their lectures are proportionably slovenly and incomplete. Your candid opinion and sincere advice will oblige your sincere admirer,

A KING'S COLLEGE STUDENT. Strand, Jan. 6th, 1836.

. If the writer thinks he could establish a charge of obtaining money under the police offices. It is in the Bow-Street district.

Mr. Don has been elected to fill the vacaut chair of botany at the King's College, Straud. Between that school and the Charing-Cross Hospital, nothing decisive has as yet been arranged. The medical men of the Hospital who are likely to lose their appointments as lecturers in the Charing-Cross School, are opposed to the union. Into this Hospital several Poles in the most destrute state have been received, but when fit for discharge, starvation stares them in the face. They have no homes to go to. The officers of the establishment ask what is to be done with them, or what can be done for them?

A Practical Treatise on Urethritis and Syphilis, including Observations on the power of the Menstruous Pluid, and of the discharge from Leucorrhoes and Sores, to produce Urethritis. With a new Classification of Venereal Eruptions, and a proposal of a substitute for Mercury. Henry Judd, M. R. C. S. &c., Вy London. Highley. 8vo. pp. 568. With coloured plates.

CORRESPONDENTS.

Ciris has not framed his questions ver physiologically. They cannot, therefore, I answered in direct terms. The quantity of air To the Editor.—Sir, Devoted as you have | inhaled continually varies without voluntary theen to the interests of the medical stu- exertion. It may also be increased at pleathe process of imbiblion, and resort has frequently been had to them as media for administering remedial agents, but as yet, without marked and extensive advantage. It is not worth while to agitate the question (except in one or two diseases) while more obvious and less delicate channels of communication are readily approachable.

Mr. Someth will perceive, by the contents of the last week's Lancer, that his first was in print before his present letter was indited. The publication was unavoidably

delayed from want of space.

A correspondent complains of "a custom," adopted by a lecturer at the West End, "during this course of lectures, of occupying a large portion of the time of his audience, by calling over the names of about a hundred students two or three times a week." He agates that the practice is a "source of great annoyance to the majority of the class, whose attention is thus taken up instead of having it devoted to instruction." Another correspondent regards the "custom" as one adopted "with a view to displaying an array of names, of which the majority are not likely, for very good reasons, to find owners in the room. The class," he adds, "would he obliged by the absundonment of the practice."

Gound may be adjusted that his friend labours under an egradious deception. The results described are indicated. We should advise the party to state his case wally, one respectable medical government of the aborration from a state of health is not of the intellect, conviction of the history of his impressions must follow.

W. If the practitioner who made the charges, be qualified, legally, to practice as an apothecary, he would be enabled to sustain his charges in a Court of Law. At any rate, the lady would be placed in a worse position than the one she now occupies by resisting the payment of the demand. On the 'bardship' of the case we cannot express an opinion.

To the Correspondent who dates his letter." Thready mouning."—As the matter has been brought an directly under our notice, we will examine the production, and next next state the result. It certainly, however, was the business of our Correspondent to prevent, in so brief a compact, the third sources of complaint.

ERRATUM.—Page 608, of this Number, col 2, line 17, for compressed, read comprised. Page 611. itto 27, for a ligament, read ligaments.

METEOROLOGICAL REPORT.

(Extract from a Meteorological Journal kept at High Wycombe.)

Days.	Therm	ometer.	Barometer.		Rain.	Wind.	Weather.					
-	Highest.	Lowest.	Highest.	Lowest.	lus. Dels.							
Jan. 4 5 6 7 8 9	45.25 48.50 45. 39.50 39. 39.50 28.75	43.50 42. 38.25 33.75 28.50 28.75 27.75	29.98 30.01 29.98 29.68 29.75 29.72 29.97	29.96 29.98 29.86 29.65 29.70 29.57 29.13	0.0125 0.0375	E. E. E.	The whole week dull and heavy, with rain on the 5th and 6th, and sleet and snow on the 9th and 10th.					

Observations for December,

Thermomerier. Highest, 49,58, on the 1st; Lowest, 12, on the 25th; Mean, 21,00156.—Baromeier. Highest, 59,58, on the 33rd; Lowest, 20,68, on the 1st; Mean, 21,50134.—Rachber of days of rails, 9; Quantity larges and decimals, 0,5035.—Winds. 5 Eart; 2 West; 2 North; 2 South; 5 North east; 6 North east; 6 North east; 6 North east; 7 North weet.

In relation to the prevalence of certain diseases, as connected with atmosphering the connected with atmosphering the connected with atmosphering the connected with atmosphering with the connected with atmosphering with the connected with a connecte

Wigh Wycombe, Jan. 12th, 1836.

HE LANCET.

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LONDON, SATURDAY, JANUARY 23, 1836.

f1835-36.

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

ROW IN THE COURSE OF DRIAVERY IN THE UNIVER SITY OF PARIS.

By M. ANDRAL

Physician in Chief to the Höpital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Paculté de Médecine of Paris.

LECTURE IX.

LESIONS OF INTELLIGENCE IN CERE-BRAL HEMORRHAGE.

GENTLEMEN, - Lesions of intelligence form the next part of our subject. Like lesions of motility and sensibility, they should be divided into such as precede the hemorrhage, and such as occur after it has taken place. In most cases of cerebral hemorrhage, the individual enjoys the faculty of intellect undisturbed up to the very moment of the attack. There are no premonitory symptoms on that side; however, in other cases, we observe some change in the intellectual faculties which precedes the invasion perfect come, from which no kind of exof the disease by a greater or less interval, citement can rease kind, or into which he
Thus the intellect seems lazy, and incapable quickly relapses, even if he shows some of any effort. The individual seeks repose feeble indication of remaining sensibility, of his mental faculties, and has a constant Do the different states of intelligence, durtendency to sleep, from which he is with ing the moment of an anopleric attack difficulty roused; others, on the contrary, exhibit an extraordinary degree of irritability and exoftenent. Thus we have seen an indisting in whose the access was preceded by great physical agitation and constant deof motion; it was impossible for him to to lesion when the injury r others become cross and quarrelsome does pathological anatomy. so there become eross and quarrelsome idoes pathological anatomy is days before they are attacked, and ficient data for lecalizing themselves up to violent fits of passion, any one of its interespon face titling almost manks. It is not easy to to me to be established, it may be taken to be established, it may be taken to be established, it may be taken to the disorders of conditions of the interest passions, apoplery. We are carefulful heaterfragely, department, because the interesting of the effort of the conditions of the

norance than really advancing knowledge. Some patients present divers hallucinations of the senses; thus the memory is some times lost before the attack of hemorrhage : the individual for a few minutes is unable to say where he is or what he does. In other cases all the senses are implicated, and the patient falls down in a true state of come, from which he unexpectedly recovers. We may now ask, What occurs at the instant of the effusion of blood into the brain?

How for are the Intellectual Faculties modified. during the actual Effusion?

In some cases the intellect remains intact amidst the trouble of the other functions. It is not certain, as authors say, to find the intelligence abolished at the instant of effusion. Cases have been observed where the sensibility and power of motion were completely destroyed, yet the mental faculties remained untouched, and this especially takes place when only a small portion of the curebral substance has been compromised in the lesion. Sometimes the intelligence becomes more weak and dull in proportion as paralysis affects the limbs; the patients become stopid; their language is incoherent and unintelligible, but conscioueness still remains. Finally, in some cases, the loss of intelligence is, as you all know complete, and the patient lies in a state of the most depend upon

Differences in the Seat or Intensity of the Hemorrhage?

Are the intellectual faculti

intense or extensive, the intelligence is moderate effusion into the substance of the abolished, no matter in what region of the brain the lesion may be situate. Again we may ask, Does the modification or loss of intelligence occur only in cases where the hemispheres of the corobinin are engaged in the lesion? This is a point sustained by several physiologists, who attribute the acts of intelligence to the cerebral hemispheres and their convolutions. But what do facts teach us? That complete loss of consciousness, and, of course, annihilation of all mental power, may coincide not only with hemorrhage situate in all possible points of the cerebellum, but also exists in cases where the effusion has struck another organ than the cerebral hemispheres. This latter fact has been frequently observed. We need only call to mind the analysis which we made during the course of our last lecture, of thirty-two cases of hemorrhage into the substance of the cerebellum; in several of these, the intellectual faculties were more or jess abolished, although that part of the brain to which their manifestation is commonly attributed re-mained intact. When the mesocephale (the pons varolii) is the seat of hemorrhage, in what manner is the intelligence modified? Does it suffer as when the cerebrum and cerebellum are the seat of lesion? Certainly, and even in a still more marked degree. all the cases that have been observed of hemorrhage into the substance of the pons, the action of the intellectual faculties was suspended, because lesion of this central reunion of the brain, cerebellum, and chord, is always accompanied by more or less complete and prolonged coma.

We may lay it down as a general principle, that

Hemorrhage of the Spinal Marrow,

into any portion of it, does not give rise to modification or abolition of the intelligence; this is readily conceived: however, the rule admits of some remarkable exceptions. In have been dissipated; animal life returns, a few rare and curious cases, effusion into the superior portion of the chord has produced a reflected effect (retentimement) on the brain, from the law of mutual association, by which all the various parts of the nervous system are linked together in one harmony and in unity of action. A case of this kind, which deserves peculiar attention, has been titled by Dr. FARRE in his inaugural dissertation for the year 1832 (" Propostions and Observations on several points of Surgery and Medicine," No. 153). Here the patient, a man advanced in life, was carried off by an attack of apoplexy, accompanied off by an arrace of apoptery, according to the property of the light o

anterior pyramidal hodies on the left side.

We have now passed in review the various modifications which the mental faculties present, either before the engarrence of the hemogrhage, of at the modern it takes place. It now remains to consider the state of intelligence

After the Effusion of Cerebral Hemorrhage has been completely established.

In cases where the hemorrhage is very violent, coma persisti, the intelligence is absolutely abolished, and death soon overtakes the patient in this condition. When the effusion is less extensive, the state of coma generally disappears after a longer or shorter interval, leaving the intellectual faculties in various degrees of integrity. In a very small number of cases, the patient recovers the perfect use of his mental powers, but this unfortunately is a rare exception. In a great majority only a part of the intelli-gence is restored, and that gradually; offusion once accomplished, leaves traces that cannot be perfectly effaced from the mind. the habits, or the passions, of the individual. Thus, in general, after the occurrence of cerebral hemorrhage, we observe some weakness of the intelligence, and this in patients who had not lost it during the instant of the attack; the powers of the mind are here evidently reduced; the patient is unable to apply himself to any serious mental occupation; profound meditation is fatiguing, and even injurious; in a word, the intellect, attacked at its source, is incapable of any exertion beyond that necessary for the most ordinary occupations of life. There are other patients who are not so happy, In some cases the alteration of the intellect is still more grave; the individual is not so fortunate as to recover even a portion of his mental faculties; thus we see a certain number of persons, who remain in a state of the most wretched imbecility or idiocy after the first symptoms of cerebral hemorrhage but the mind is gone for ever; it is rarely that this state ameliorates; the depravation of the intellect generally increases up to the moment of death. In the moral conditions which thus accompany effusion of blood into the brain, I have sometimes had occasion to witness a curious modification of the cha-racter; the individual, induced to a state of complete infancy, bursts like takes at the least contradiction; even when spoi with kindness, he sometimes crick and without our being shills to discover all mediate cause for this manifestation of ordered schalblity. Others, again, full I an acute state of mental derangement; stead of imbecility it is mania, which clares itself as a consequence of small

wish a storile delirium, similar to that so how are we to resolve it? By an appeal to often seen in connection with isolammation facts; by an analysis of such cases as have of the contents of the cranium, and in there been published by others, or observed by cases we problem have such an accordant to the membranes cooking portion of the creater he legion resided in the or inflammation of the membranes cooking portion of the creater he headers are the caffected handsphere; the delirium, then, soribed by M. Boulland as the instrument may be rejected rather as a complication of speech. than a consequence of apoplexy. The intelligence may not only be lost, or weakened one part of it may be more or less modified Thus certain patients, after an attack of degree of judgment, of wit, of imagination, &c.; but the memory is completely lost; in other cases, again, the memory is only par-tially attacked; the individual remembers everything, for example, execut the names of things; he cannot call to mind a single substantive in his native language. We substantive in his native language. shall return to this curious point in the history of cerebral disease at a future time.

Affections of the Speech.

In our last lecture, we saw how the power of speech was sometimes completely de-stroyed by effusion of blood into the hemiof articulation; the aphony then was symptom of paralysis; but language requires not only the action of the tongue (for were this not the case, all animals being possessed of that organ, should speak), but in addition that loss of speech may occur with the exto the power of moving the tongue a certain istence of the lesion in very various portions
action of the brain that dominates the musof the brain. You will also find in the cultar action, a guitting inquence which co-ordinates the movements of the tongue and, frequently quoted it, we shall mention again larynx, and gives rise to that harmony which is necessary for the production of speech. students of the production of speech is this certain, then, that a peculiar portion of years of age, who presented hereit is a most remarkable one. The students of the observation was a femiale 30 the brain is destined to regulate the forms—ward in La Pitie. Three years before, the is injured, we have a species of aphonia quite other symptom of any consequence was ob-different from that formerly alluded to. In served. When we saw her for the first some cases of cerebral hemorrhape, we have it time, complete aphony existed, yet the pa-complete loss of speech; in others the mo-tient could move her tongus in all directions. tions of the tongue remain free, and the and thrust it out whenever she was desired. motions; this proves that we have somemotions; this proves that we have somein the alteredia the one set of cases, which
in the biner set, remains intact; but what
it this something? what is the nature of the
alteration upon which the loss of speech,
death we found a ramellimental of the
alteration case of apoplary, dopends? A posterior extremity of the corpus striature,
on the left side, not larger than a good sized,
and the string labed professor of the formation per, a similar lesion, nearly identical in ifficial to the authorice extrementy of each primary misphore, because, in all the cases he cocupied the centre of the university, the contraint observe, where the power of centrum ovale of Venusenius.

Thus you see, on the authority of the brain, which are irretramble, that loss of the brain, in the correct as it is by the option of the interest of the contraint of the primary conditions with a lesson of the standard of precising is not abolished with a

I have found thirty seven cases of this kind; thirty-seven where the lesion was confined to the anterior lobes. Now, of these thirty-seven, the power of speech was completely lost in twenty-one cases, and preserved in sixteen. This disproportion is as you see not very great, and hence we conclude that lesion of the unterlor extremity of the hemisphere does not necessarily bring with it loss of the faculty of speech. However, we should remark that this does not prove strictly that the power of employing language does not reside in these anterior lobes, for, perhaps, in the sixteen cases we have cited, the legion was small, and the minor degree of intensity may possibly explain the absence of the

Again; I have found seven cases where the anterior lobes were intact, the lesion residing spheres of the brain. In the cases thus exclusively in the posterior, yet here the best alluded to, the phenomenon depended similar of speech equally existed. Finally, we collips on paralysis of the muscles which move lected seven more observations of loss of the tongue, the chief mechanical instrument speech with equation into the middle loss of of the hemispheres.

After reading these cases, which you will find noticed in the fifth volume of "Clinique," it is impossible not to conclude that loss of speech may occur with the excular action, a guiding influence which co- same book a case, which though we have tion of articulate sounds, and when that part had been seized with loss of speech, but no brain preserves its power of directing these the intelligence was intact, and the faculty of sensation and of motion remained free dished professor of the school, M. on the left side, not larger than a small sized larger, than a small sized to the americal extremetry of each form, colour, and extent, with the former,

considerable alteration of the anterior lobes, in others frequent; bowever, it is oftener the parts described by the physiologists we slow than quick i healty, in other cases, the have alluded to as being the instrument of pulse is feeble, soft, and smally compressible speech. This conducts us to an explanation of the reason why so many different theories have been formed as to the organ of speech in the brain. Each observer, struck with the coincidence of a certain number of facts, tion, or on individual dispositions. has built up his theory upon them, to the exclusion of all others; but they have commenced to generalize too soon. Thus M. RECAMIER thought that loss of speech coincided with lesion of the middle lobes of the cerebrum. M. SERRES, with alteration of the corpora striata, because he saw a few cases in which the patient was mable to speak, the effusion having its sent in that part. Finally, M. BOUILLAUD, as we have already said, placed the instrument of speech in the anterior lobes. I fear, that all these conclusions are premature; they cannot evidently all be correct; they appear premature, because not only is the faculty of speech abolished with lesions situate in various portions of the brain, but this symptom occurs when the lesion, exists elsewhere. Thus M. LALLEMAND (Letter 2, page 134) mentions a remarkable case in which the power of speech was completely lost, although the lesion, a ramollisement, was situate in the left lobe of the cerebellum. From these different considerations we conclude, that here, as in a thousand other cases, it is impossible to localize the seat of language from pathological observations.

In our last lecture we saw how hemorrhage of the nervous centres was accompanied by various alterations of the intel-lectual faculties, of sensation, and of motion. The functions of nutrition also are more or less modified; let us now examine these : and first for digestion.

The Digestive Functions

however, which we may observe in many respiration are affected much sconer, even cases, viz., a more or less obstinate constitution the hemorrhage may not be conpation of the bowels; the muscles of the riderable, and the same remark applies to intestinal canal and rectum in particular, do the spinal marrow. When the lexion of the not act with their accustomed energy, and cerebral hemispheres is very extensive, when been already said on the latter subject.

The State of the Pulse

aton takes place, the pulse is fell and strong; in entirely, the propletting and the

under the finger. These diverse conditions are not necessarily connected with the immediate disease, but depetit, wither, perhaps, on an antecedent state of the circulastate of

The Capillary Circulation

resents itself with several differences. During a length of time it was said that if the patient's face was red, the conjunctiva injected, the figure swollen, &c., the case belonged to what was denominated sanguineous apoplexy. On the contrary, when the face was pale, we had to apprehend a serous apoplexy: we cannot allow these distinctions in the present state of the science. Several patients who have died from true effusion of blood into the substance of the brain, have presented a remarkable paleness of the face. This is by no means an uncommon occurrence, and shows that symptoms taken from the state of capillary circulation about the face are not to be relied on. We may conclude by remarking, that amongst the phenomena which precede or follow cerebral bemorrhage, we sometimes observe small effusions of blood underneath the ocular conjunctiva, or a more or less copious hemorrhage from the mucous membrane of the nares.

Respiration

is certainly the function of nutritive life which most frequently undergoes modification in consequence of cerebral hemorrhage; but in many cases the respiratory organs remain quite free from derangement. Thus when the effusion of blood-is slight, occupying but a small portion of the nervous pulp, respiration is not modified in any remarkable manner; on the contrary, when are in general but little influenced by the the lesion happens to be scated in the autocourrence of apoplexy. There is one effect, stance of the mesocophale, the organs of not act with their accustomed energy, and cerebral hemispheresis very extensive, when even the mucous membrane seems deprived a large quantity of blood has been suddenly of a portion of its sensibility; hence drastic effused from the vessels of the highly, then purgatives often fall to produce evacuations.

The state-of the circulation also presents at once assumes that genular character so certain grounder, but as they follow nearly generally known under the name of "stagethe same laws for apoplexy as for cerebral congestion, we refer you back to what has non is one of a dangerous nature, sand in nour cases dangers has assumed has a source-blass dashes assumed has a source-blass dashes assumed him to the latter subject. most cases denotes the approaching of the individual struck with apoplexis The State of the Pulse probably depends on a lation of the particle of the par be laid down for the changes which it may jury of the brain. Experiments teach us present. In some cases, at the moment affur that if we instant that pain of prives

embarrassed, the pulmonary circulation in- affusion of blood into the cerebellum, has terrupted, and the lungs themselves sur- not been frequently observed. We are accharged with blood. Now this is exactly quainted with only seven cases of this kind what happens is severy cases of apoptery, where the patients almost universally die from embestissiment of the respiration. Re-mark, however, that the peculiar state of the respiration to which we now allude does not of necessity accompany all cases of cemebral hemorrhage. You will meet with several examples of the contrary, and would fall into error were you to conceive that stertorous breathing is a fixed symptom of apoplexy of the brain. How far are

. The Secretions

modified by hemorrhage of the nervous centres? Upon this point we have very little to say; in fact, nothing constant has been observed of sufficient importance to merit a particular examination. In our last lecture, when treating of paralysis, we touched upon the retention of urine which sometimes occurs in consequence of apoplexy; we pointed out the necessity of attending to the state of the bladder and intestinal canal. It is useless to repeat what we have said upon that occasion.

We have now successively reviewed the influence exercised by hemorrhage of the nervous centres on the different acts of animal and organic life. We have, in order to complete the subject, a few observations to offer on the phenomena presented by

The Reproductive Organs.

Physiologists were long ago struck by the fact, that in certain cases of cerebral hemorrhage, the patient exhibits a symptom that would seem rather to belong to perfect health; this symptom is erection, which, as I have just said, has been noticed in connection with apoplexy for many years, although no explanation was attempted to be given for this unusual phenomenon. Certain authors, indeed, compared the erection which manifests itself occasionally in patients attacked by apoplexy, to the phenomena of strangulation, and referred this apparent stimulation of the genital organs to a sort of asphyxia, -- to a reflux of venous blood,—to a profound trouble of the respiration and circulation. The question remained in this uncertain state until the time of Gant, who, in his destrine of the localiwhen of families, placed the regulating ower of the genital organs in the cerebel-This theory has since then been recoloud with a considerable share of favour. many physiologists will now tell you That if symptoms of inclination about the months organs manifest themselves in the course of any disease, the chief cent of the on, or irritating cause, is to be found in the cerebellum. However this may be, the solucidence of election, or other symptoms paramet of the generative organs, with | + Chaires die Hopitax, t. 1, p. 79.

where erection or other signs seemed connected with apoplexy of the cerebelium; while, on the other hand, the same phenomenon has been seen accompanying hemorrhage in various other parts of the cerebrospinal axis. It is a remarkable circumstance that in the seven cases of hemorrhage of the cerebellum to which we allude the effusion always existed in the middle lobe; nowhere else. Of these seven, six have been published by M. SERRES, either in the Journal of Physiology, edited by M. MAGEN-DIE, or in the second volume of his Anatomy of the Brain,* I cannot just now call to mind which. The other was observed by M. Guior, + and in this also the lesion occupied the middle lobe. We may cite one of M. SERRES' cases as an example. The subject of the observation was a female 70 years of age: she was struck with apoplexy, and although at this advanced period of life, her menstrual discharge returned at the instant hemorrhage took place. Afterdeath a coagulum was found occupying the middle lobe of the cerebellum. The genital organs presented even a greater degree of erythism than is usually seen at the period of men-struction; the uterus was filled with coagulated blood, and the inner surface of the fallopian tubes, together with the ovaries, were excessively vascular and injected. You must now be struck with the coincidence in all these cases between the symptoms and reat of the lesion. In all, the effusion took place into the median lobe. We do not find a single example on record of erection, or any other excitement of the generative organs, being produced by hemorrhage into either of the lateral lobes. This circumstance is remarkable. However, we have to observe, that whenever bemorrhage to any extent takes place into the substance of the middle lobe of the cerebellum, this part of the organ is naturally distended, and, from its position, must exercise more or less pressure on the superior portion of the spinal marrow. Hence we are unable to say with certainty, whether the phenomenon of erection &c. may not depend on this latter cause, as well as on the actual lesion of the cerebellum. There is something in this subject that is not very easily explained or understood, something that disagrees with our notious of disease in general. Is it not strange that the accident connected with the reproductive organs should be diametrically opposed to what we see taking place in all the other systems? The general phenomena

These six cases are to be found in the "Angtomy of the Brain." Five refer to makes; three were of erection; the sixth is that of the festale whose seek is noticed by the lecturer.—Rep.

of cerebral hemorrhage are passive: in all the mode of treatment I pursue; and also the other apparatuses we have signs of in- of pointing out to you certain errors which, action, of partylas, but here, on the continuous properties a state of action, a higare these subjects.

excitement at the moment the individual is In the first place, let me recall to your

withdrawn from all intercourse with the external world.

The question now before us is a complex one, and not to be resolved by a few experiments, or hy a few examples drawn from pathological anatomy. It is certain that phenomens of the same nature as those under discussion may occur when the lesion is situate far from the cerebellum. Thus erection, ejaculation of the seminal fluid, &c., have been observed in connection with myelite, with inflammation of the cerebral hemispheres, and several other disorders of the cerebro-spinal axis not immediately implicating the cerebellum. M. PINAULT presented to the Anatomical Society the case of an individual in whom the spinal marrow had been violently contused by luxation of the 5th from the 6th cervical vertebra: here there existed perfect crection for more than six hours. M. SEGALAS introduced a pointed instrument into various parts of the vertebral canal, irritating the middle and inferior portions of the spinal marrow, and erection and a discharge of somen were produced. Finally, atrophy, ramollissement, and various other diseases of the cerebro-spinal axis, are occasionally accompanied by accidents of the generative system. However, we cannot pursue this question any further; we do not profess physiology; our business is to investigate the morbid phenomena of discase, their causes, symptoms, and treatment. Let us therefore turn from this digression.

CLINICAL LECTURES

OX

BURGICAL CASES,

DILIVERED IN 1836 AT THE

JERVIS-STREET HOSPITAL, DUBLIN,

24

WILLIAM WALLACE, M.D., M.R.I.A.,

Suggeon to the Hospital; and to the Infarmary for Biocases of the Skin, Venerual Diseases, and Diseases of the Urinary and Genital Organs.

PROLAPSUS ANI.-ITS PATHOLOGY AND PRINCIPLES OF TREATMENT.

I wast to call your attention this morning to the case of the infant who has recently died while labouring under the state covered by a visel's as called "prolapsus ant." It will afford me to a covered by a visel's as opportunity of explaining to you the visus which is have long entertained respecting the pathology of this dispust, and any visible posses."

In the first place, let me recall to your minds the particulars of the case to which I have alluded. When this child, who was about one year and a half old, was admitted, also presented a very wretched picture, but one which, I tagnet to say, is not unfrequently seen amang the lower orders of this city. She the content of the content



triments and a strained further on the attempted reduction in the manner in which lasteral than on the enterior or postector! I always reduce such cases; that is, by aspect of the tennews, and farther enteriorly than posteriorly. The remainder of the surtium to be pushed up first; and it was face of the firmour, or that of the southern quite outdent, that the efforth made in recruitments, had a less suporth and uniform appearance. It was paler, as if they are the contrast of the child, seemed to afford it much comints fort, and to trangullies it mosas and into folds. In short, it presented an appearance, so different from the remainder of the surface, as to force out by simplified that the structure of the two manner in which it was the contrast to be contrast to make the contrast to my con below the level of the more coloured and more vascular surface. This inequality was not, however, owing to any destruction by an ulcorative process, for it presented an appearance, merely as if the vascular surface was more loose, more pulpy, more vel-vety, and therefore more in relief, than the paler surface. The small end of the tumour had a rounded form, or eval, placed transwhole was not unlike, in its shape, the os ateri. The whole mass or prolapse felt firm and clastic, or like a tumour composed which was in its small extremity, was ulcerated, and so narrow, that it barely allowed the end of my little-finger with presence to pass in. When the finger entered about an inch, it reached a large sacculus, in which it could be moved about so extensively, that I could not feel the walls of the intestine. The child strained almost constantly, and every now and then there escaped some flatus, with which there squirted out a minute quantity of a slimy substance, of a mottled white and brown colour, more or less greenish, and having somewhat a fecuent appearance. The discharge of even a small quantity of this matter scemed to be siways followed by momentary relief. During the effort to discharge, the tumour was increased in tension and in size, and as soon as the effort subsided, it became more flaceid and less prominent, so that it might be said to be constantly and alternately projected and retracted. This appearance was not and represent which the solution of the country of the country leads on much owing to any portion of the country leads on accountry from the polving the country leads of the country of t

and this is the point which I wish you to pect that the bowel could be passed into the pelvis.

On making an examination of the rectum after reduction, the orifice of the anus. and the gut immediately within it, were so wide, that I found no difficulty in passing, to the extent of two inches, two or three of my fingers, and in turning them in the portion of the rectum immediately within the orifice of the anus. The portion of the gut which thus easily admitted my fingers, was versely, with a depressed centre leading that which had formed the covering of the into the cavity of the bowel, and on the large end of the prolapsus, and which was large end of the prolapsus, and which was now returned to its natural situation. Higher up than this relaxed portion, the bowel presented to my touch a firm and undilatof crectile tissue. The orifice, or opening able sensation, and when I passed my finger into this portion, I found it to be in a tight passage, the end of which I could not reach. I also found considerable difficulty in passing this indurated portion up into the pelvis, for there seemed to be some pressure downwards on it.

After the reduction of the tumour I directed two drops of laudanum to be given to the child, and afterwards she slept quietly for several hours; which, as I was informed, she had not done for many weeks previously.

Attention was, on my next visit, directed to the laying down a plan for the restoration of the digestive organs of the child, by food and by appropriate medicine. My efforts were, however, fruitless, as, indeed, was to be expected; for although the lufant seemed much relieved, and although the prolapsus never returned further than to show a ring of macous surface at the orifice of the anus, the state of emaciation and wretchedness continued to increase, and in eighteen days after admission she died; her death being preceded, for a day or two, by a tympanitic state of abdomon, with considerable pain on pressure, great thirst, and occasional vomiting.

On dissection, the large intestines were The mother admitted that the child had been other, and to the surrounding parts, and had this prolanges for several months; that in separating the adhesions it was evident for the last gir, upon the howel was almost that faculent matter had been efficied, and that faculent matter had been efficied, and that lattering the had several process, and that lattering the had several process, and that lattering the large intestines, their surface. On urand a several process, and that lattering the large intestines, their surface to the large intestines, their surface the large intestines, their surface to the large intestines, their surface the large intestines, their surface to the large intestines, their surface to the large intestines, their surface to the large intestines, their surface. least-affection. These ulcarations were more marks, I hope you have carried along with numerous as we approached from the open to the signoid ficture of the colon. The exper portion of the rectum was found sunk, or singlety awaginated in the middle portion, but was easily drawn up out of it. there being no adhesion between them. The rectum and the sigmoid flexure of the colon were now removed from the subject, and in doing so, I had occasion to remark that the sphincters of the anus were so clongated, as to form a much wider opening than could be considered natural to so young a child. Here is the rectum and lower part of the colon laid open, and here is a drawing of them :-



Here you observe a very prominent ridge in the upper part of the rectum, at which part you see that the bowel is quite contracted and strictured, and that this contracted state is upwards of an inch long. You also remark that the intestine above the contraction is greatly dilated, and, as it were, sunk round the narrow contracted ortion, so as to form a sort of cul de sac. You also remark that this contracted portion is ulcorated, and hard, and thick. The gut nearer the orifice of the anus than this, is free from ulceration, is contracted in its length, and thickened, and far more vascular than either the narrowed portion or the portion above it. It is evident to you, I am sure, that the vascular portion of the intes-tions surface formed the outward covering of the prolapse, that the contracted portion formed its orifice, and that the superior dilated portion was the part into which my prostate gland in a direction flowing finger passed, when it had ponetrated and backwards to the same. Its less through the orifice of the prolapse. It is about one men and a half. It is the also evident that the immediate cause of also evident that the immeniate cause of the arms of the manufacture into the cavity of the period from death, was the discharge of the contents of the meetines into the cavity of the period from the meeting into the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the cavity of the period from the meeting in the tens through some of these ulcerated open-ngs, and the inflammation consequent is called the internal Alti ough I have been misute in my re- which are so street with

or the manner in a principles which man. But, before I speak of this mechanica i I must beg of receive to the you to recold Excistive to the

You know name of reclum is tines which extends from the apper outlet of the pelvis to the man, and in adults measures, in general, about ten inches. It may be said to consist of three portions, a superior, a middle, and an inferior portion; and each of these portions has a direction, a structure, and relations, possible to itself. The superior portion, which resembles more than either of the others the upper division of the intestinal tract, is characterized by its being covered by peritoneum, which forms for it a fold, called the meso-ractum, and connects it to the back of the pelvis; by its comparatively cylindrical form; by its projecting loosely, in some measure. into the cavity of the pelvis; and by its direction, which is from above downwards, and slightly from left to right. It forms more than half of the whole length of the rectum, and extends from the sigmoid flexure of the colon, or from the brim of the pelvis, to the line where the intestine is destitute of a peritoheal covering, or to where the third bone of the sacrum joins the fourth. Where this upper portion terminates, the middle portion of the rectum commences. It is about three inches in length, is directed from above downwards, and from behind forwards, with a gentle curve. It corresponds posteriorly to the inferior part of the sacrum, to the coccyx, and to the ischio-coccygeal muscles, and anteriorly to the inferior fundus of the bladder, from which it is separated, inferiorly and externally, by the vesiculæ seminales and vasa deferentia; and more inferiorly by the prostate gland. This portion of the rectum bas no peritoneal covering, unless when the bladder is very much contracted; and even then there is only a small portion of its anterior surface covered by this mem-brane. Its structure is flittinguished by the great strength of its longitudinal assembler fibres. The third, the lowest, and the smallest division of the rectaes, extende in prostate gland in a direction doors and backwards to the attes. Its less a continuation of the mucous memi

the entestine, do not extend upon the lowest | my former collesgue in this hospital, Dr. portion. This drawing tolerably well re-



c Lower partion.

presents the form, direction, comparative size, and relations of these different parts of the bowel, and from it you may observe that they are so curved, in respect to each other, as to form a part of the letter S. But it will be found that these different parts of the rectum are distinguished from each other, not only by their directions, their form, relation, and structure, but also by the state of contraction in which they generally exist in the living body. Pass your finger within the anus of any healthy person, and you will find that it will be grasped by the bowel for a little way within the orifice; that is, as far, or nearly as far, as the inferior division of the rectum extends above this portion, the bowel is found to surround the finger loosely, or without making much pressure. This soft and lax state extends throughout the whole length of the middle portion, and exists whether the rectum does or does not contain feculent matter. If the finger be passed on still It is also equally clear, that if this state inforcher, we shall very often meet a sort of creases, the whole of the middle portion of ring, with a rounded soft surface. This is the gut will be protruded externally, the and from many others when I count and who arrives the coordinate the upper and lower thinking of the rooten are, when it can be a supported that the upper and lower thinking of the rooten are, when it is a supported that the man capable of exciting in ordinate tensor must or straining, is capable of causing a prolapsus of the anus; that this prolapsus

O'Beirne.

Let me now call your attention to the state of the rectum in an individual making an effort to expel feces, when his bowels are constipated. The lower portion of the rec-tum, including the orifice of the anus, is then found more or less relaxed, the length of the middle portion diminished, and hence thrown into circular folds; while the upper portion approximates the lower. straining be continued, some of the folds of the middle portion appear at the orifice of the anns; and if in this state of the parts a finger he introduced, we can easily, owing to the diminution in length of the middle portion, feel the lower part of the upper portion, and even pass the finger into it, when it will in general be found to be more or less contracted.

It is evident, from what I have said, that if, from any circumstance, the relaxation of the orifice of the anus, and the decrease in length of the middle portion of the rectum. with the consequent wrinkling of its coats, and the approximation of its upper to its lower portion, be excited, and continued with pressure downwards, the folds of the middle portion of the gut will escape from the orifice of the and, producing the state called prolapses of the annes, and which, as it exists in its prdinary degree in infants, is represented in this drawing.



the lower portion of the upper division of lower orifice of its upper division will, in the rectum, and if the finger he passed into the same proportion, approximate the arms, this ring, it will experience more pressure and in time pass through it, and thus protagate did in the middle division, though due the state of parts, so far has the proless than in the lower. From these facts, lapse is concerned, which exists in the and from many others which I could add, child whose case we have been consi-

will always, in the first instance, he formed

- 184 ·

by folds of the middle division of the rectum; and that if the discass increase, more
or less of the upper division, and inhiequently of the higher portions of the jubbs; p
tinal track, will be layerted, unless it helppens, ar accurred in the present instance, a
and as is pretty uniformly the court of a
lawys, when the invarion or accurates in
the rectam, that there exists, at the line of r
inversion, a spasmodic, or a personnelly
constructed stricture; and, under such circumstances, an increase of inversion cannot
take place beyond the seat of stricture, without the greatest difficulty, or perhaps not
at all.

It is also evident, in the first place, that in every case of prolapsus, where a stricture exists, as there is thereby more or less resistance offered to the escape of the contents of the bowels, those contents will be retarded above the narrow portion, and by their pressure will cause that dilatation of the gut, higher than the stricture, which was observed in this child, In the second place, that every case of directors, whether spatmodic or organic, in the upper division of the rectum, must become a more or less powerful cause of prolapse, or, at least, of invagination to a certain extent, as the feculent contents of the bowels, not being able to pass, unless with difficulty, through the narrowed opening, the organs of expulsion will necessarily be excited to greater exertion, and thereby the contracted portion made to invaginate itself into the middle pottion, approximate the lower, as I have afreedy explained, and assist to drive the related middle portion before it, through the external orifice or anus.

It is not very difficult to account for the origin of the common and erroneous opimion, that relaxation is the cause of prorus ani. You are aware, that in the case of the infant which we are considering, the muscles upon which the closure and support of the rectum in a natural state deend, were in an elongated and very relaxed condition, and nothing would be more natural than for an observer, who confined his attention to this state, to consider it the cause of the prolapse; but it only requires that you should watch the origin and progreat of this disease throughout the whole rectum, to be convinced, that this state of relaxation is the consequence of the pro-lapse, and not its cause. In fact, a prolapse egold not arise from such a cause. If it could, is ought to occur whenever the re-taining muscles are in a state of relaxation; but it is well known that, in cases of para-plegts, where these muscles are without any tone, prolapeus does not ensue at least from that cause.

When you need the observations of seven-bosome daily mer authors, but particularly those of Mr. facevin connect working. It. face, and Mr. Howship, more and more and

tion of the has attriexistion of the instead of to a et, and a necesof the organs of te appears to suppose a peculiar conformation in the least and direction or an amount in the least whome there arises a disth and direction of the large the upper part of the rectum to both of the recent in the recent in the recent in the recent in the first gentlemen's papers, you will find the recent in the Med. Chir. Trates, and Mr. Barlo's in the Med. Chir. Trates, and Mr. Barlo's in the Med. Gazette. It is a first more remarkable that Mr. Howship; and the facts which he has recorded in his work on the diseases of the intestines, did not form the opinions respecting prolapse which I have developed. He seems to be aware of the connection of structure with invagination or introsusception, and of the necessity of attending to the former, when we are endeavouring to cure the latter. He has also actually described a case of prolapsus ani, in which he found, after death, the upper part of the rectunt contracted, and the lower dilated; but the prepossessions of his mind, instead of leading him to what seems to me to be the proper use of the fact, made him view the contracted portion of the intestine as the healthy portion, and the relaxed alone as the diseased part. I would however recommend you to read Mr. Howship's work and judge for yourselves.

In short, in every case of prolapsus, your first inquiry should have for its object the source of that intestinal irritation, which, by exciting efforts of expulsion, has been the true source of the prolapse; and the cause which in nine cases out of ten produres prolapsus in children will be so obvious that it cannot be mistaken, if attention be paid to the origin of the disease, and its accommanying symptoms. It is a state of disorder of the whole organs, and this likely to the proin one way, but in several. become morbid, their impre testinal surface readless it levis creases the saormal acti morbid discharges of cites to a still more di tion. Hence the

which never f tractions may of sections confid cases the upper oftener morbidly cob part of the canal, and morbid appearance in any the intestinal tract, this pos tum will be found contra responding part of the colon

Picture, then, to yourselves a child whose entire intestinal surface is in a morbid state : whose intestinal secretions are companiently the treatment of diseases of the digestive also in a morbid state, whose sigmost feature organs. The general principles must be of the colon is irritable, and the hard large upper known to you, and their particular applicaalso in a morbid state, whose significance of the colon is irritable, as the place of the colon is irritable, as the place upper like of the colon is irritable, as the place upper like of the colon is irritable, as the place upper like of the colon is irritable, as the place upper like of the colon is irritable, as the place of the colon is irritable, as the colon irritable, as occurrence, and a state of the abdominal viscers which, in ninoteen instances out of twenty, precedes and accompanies infantile directed to the state of the gut. The obprolapsus ani. What must occur in such a case? On one hand, the bowels are mor- hand the morbid irritability and spasmodic hidly sensitive, and their merbid contents excite them to increased action. On the rectum, and on the other hand the relaxaother hand there is an increase of contraction of the upper portion of the rectum, and, at the same time, increase of effort of the organs of expulsion. This effort produces an involuntary relaxation of the parts about the anus, an invagination of the upper division of the rectum in the middle, and its approximation to the lower; a wrinkled state of the middle portion of the gut, and its subsequent protrusion through the orifice of the anus; while the contracted or spasmed state of the upper division of the rectum continuing, and the muscles driving on the contents of the intestines, a dilatation of the part above the strictured portion takes place. The stricture, which was only spasmo-dic, becomes, from a continuance of the disease, organio; and the state is sooner or later reduced which you see in this specimenin a morbid state of the of the intestinal tract, and of its out part by diarrhosa, cure of the colou. er portion of the aupervenes an division of the e orthog of the This is gonothe disease ex-

which have for their object the expulsion of in these, the spannedic contraction of the december posterior is followed by expulse contraction, purging, and by propose spanned contract and by alcoration of the parts of the intertions of the whole standard fract, a shade times will higher up, which jeed either to fatal ennis, or, as in the present case, to fecuon into the abdominal cavity, and

> pathology of prelapsus ani. not tell you that, when the ex of a disease is known, the prinn which its cure is to be attempted at. As the prelapsus of infants results from a morbid state of the abdominal visocra in general, and of the intestinal tract in particular, our first object should be to restore them to health by such remedies as we know to have the effect of improving and the cor-their secretions and tranquillizing their increased. To enter on a detail of the mode of accomplishing these important objects would be to cuter on a dissertation on last year. Independent, however, of this general treatment, our attention must be ject of this attention is to remove on one contraction of the upper division of the tion of its lower and middle portions. From what I have said, you know that if the disease be recent, we shall, for the most part, have simply a spasmed state, and consequent narrowing of the upper division, with a triffing relaxation of the lower; but if the disease be of very long standing, we shall find above, a greater or less degree of pr-ganic contraction and thickening, probably with ulceration and below serious relaxation. Now, it is in vain to attempt the cure of the relaxed parts, until that of the irritable parts is accomplished. How, therefore, are we to proceed to obtain the former chicot? The medical treatment of the morisid state of the digestive organs will assist much. But, this will not, in general, be sufficient; at least its influence will be slow : we must also act on the part locally. In the first place we must keep the partion of the larg intestine above the upper division of the rectum, as empty as possible; for, whenever there is any accumulation in it, irritation of the structured portion of the gut is the consequence, atraining ensues, the strictured nortion exists, and the portion above becoming dilated, the mischief is increased. condly, we must alter the morbid sensibility of the affected surfaces. The first object is to be obtained by thipwing up at regular in-tervals entellient injections, taking care that they pees beyond the narrowed portion; and for this purpose, it will sometimes be neces

sary to use an unusually long pipe, or a gum-in, at regular intervals, smellicut injections, clastic tube. To accomplish the materials to wash out the bowel above the restracted clastic tube. To accomplish the statist ob- to mask out the bowel above the contracted ject, I have experienced great assistance or spanned portion. from the cautious use of a beugie; but, par-ticularly, from the application of the nitrale of silver. By this remedy, I have suce in curing rapidly very severe cases of pro-lapse. The mode of applying this substance must vary in different instances. I expect that in the course of this session you will have frequent opportunities of seeing it used. The principle is, to act on the part with it as you would do on any other surface with the same application, when your object is to alter its morbid action. Sometimes I have rubbed the orifice of the narrowed portion with the solid nitrate, sometimes I have passed into the upper portion of the rectum, lint, impregnated with the solution, made in the proportion of fifteen grains to an ounce of distilled water. In all these modes of using the remedy, the lower portions of the gut are more or less acted on, and this I deem necessary, but I do not consider that it is sufficient to act on these portions only; the action of the nitrate must extend to the lining membrane of the upper division of the rectum.

After the digestive organs have been got into an improved state, and after the parts have been so far tranquillized that there is no difficulty in retaining the bowel in its proper situation, you may commence the employment of tonics or astringents if necessary, to improve the state of the lower and middle portions of the rectum. But I have generally found that even for this purpose the nitrate of silver is the best remedy, as far as local applications are concerned.

I have further to add, that the state of prolapsus ani never, perhaps, comes on without giving, for a long time, warning of its approach; and if attention be paid to these warning symptoms, much trouble may be saved. They consist in attacks of irritability of the bowels, with intervals of ease. The child's bowels will remain, for two or three days, confined, then a purging will come on, by which the retained matter is evacuated, and thus the parts are for a time tranquillized, to be again disturbed, after the accumulation has again taken place. In fritable state of the upper division of the rectum, combined with more or less derangement of the whole of the digestive organs, including the hepatic and urinary secretions; and in passing the finger up the anns, the upper portion of the rectum will often feel preternaturally contracted, or will form a sort of annulus above the pouch or middle portion. When such a case of disease occurs, repair the health of the diges-five organs, principally by attention to diet, "its, exercise, and clothing, and keep up a respect from ordinary. I regular state of bowels, not so much by the anus than in the situation use of purgative medicine, as by throwing bowels in which in the situation.

To repeat prolapses and in children originates in disease of the digestive organs, which draws on in its train a spasmed state, or irregular constant, but particularly of the upper strategy of the rectum. From this there remains difficulty in the escape of the feedlent matter; consequent necessity of straining at the consequent necessity of the continue of the rectum to the lower; a wrinkling of the folds of the middle portion; an escape of those folds through the external orifice; a relaxation or loss of tone in that orifice; a subsequent dilatation of the large intestines immediately above the upper division of the rectum, which has now become the seat of organic disease, with permanent stricture. Subsequently, ulceration of the lining membrane of the large intestines, but particularly of the sigmoid flexure of the colon, with great marasmus, ensues; and lastly, an escape of the feculent matter of the bowels into the abdomen, and consequent death. To cure, -improve the general state of the digestive organs, remove the local contraction and irritability of the upper portion of the rectum, and subsequently give tone and firmness to the middle and lower portions, thus terminating our treatment with the use of remedies with which practitioners too generally commence.

Were it necessary, I could adduce a vast number of facts to corroborate the views I have now unfolded. This would, however, carry me farther than my object at present, which is merely a clinical review of the case in question. Let me, however, recommend you to direct your attention to the subject, or hear it in mind, when you are reading on diseases of the rectum; and you will not fail to be more and more convinced, every step you advance, that what I have brought forward is the true pathology of this frequent and often very troublesome disease.

Whenever in appearability occurs I will develop my mode of treating the production ani of adults also, with the nitrale of all and the application of this remedy to usees of prolapse or introduception of highe portions of the intestinal canel which as pear at the amus, and which differ, as I have already informed you, in no other respect from ordinary probable

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GENTLEMEN,—At the close of my last lecture (LANCET, No. 543, mage 451), I alluded to a case of invisation of the stomach, which I designated sentifus cust hysteria, and I will now read the statement of the case taken down by the clinical clerk directly after the patient's admission.

Jane Simpson, aged 22, a servant, was admitted into the hospital on the 20th of August last. She states that she had searlet fever two years ago, and has been "abort-winded" ever since. About sixteen months ago, without any apparent came, she was suddenly attacked with vonsiting, soon after taking a meal. From that kine she has vomited regularly every day. At first she vomited but once a day, then twice, and now she vomits in less than ten minutes after, or even in the act of, taking fluid. She feels very thirsty; her stomach generally retains solids, but never fluids. There is great heat in the stomach, the abdomen is very tender on pressure, the tongue slightly coated, edges rather red; the bowels have generally been costive; there is some psin in the head; pulse 102, and small. She menstruates regularly. There is, at the same time, a white discharge from the vagina, - some lencorrhœa.

Upon examining into this tenderness of the abdomen, finding that there certainly was some tenderness there, though no external heat was present, I thought it right to apply twenty leeches to the epigastrium, and to order half an ounce of castor oil every other day, and one minim of creosote every six hours, in a small quantity of mucilage and water. At first this dose of creosote was not sufficient. Next day, the 21st, she still vomited after taking food, and, therefore, in the evening the dose was increased to two minima, but still was not sufficient. It

therefore increased to three minims. which these was quite sufficient. She did-of which after taking food, and she centi-led free from vessiting from that the lime for publishmake period. Still, hereyous, shere was the tendormers, but it extended over the whole of the abdomen and thorax, and, therefore. That no doubt that it was merely that the property of the senting and thorax and thorax and the senting that the senting and the senting that the senting the senting the senting that the senting the senting the senting that the senting that the senting that the senting that the senting the

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Make her in any respect antiphing initially.

Make her in any respect and there having being an oventiting from the date of the land being an oventity and any directed to take the mediant was directed to take the mediant wa regart, also was directed to take the medi-ciae anly twice a day. I should tell you that there was no emaciation. She was in

tolerably good condition.
On the 1st of September, having been free from vomiting since the 22nd of August, I ordered her to take a scruple of carbonate of sods, as the complained of scidity of the stomach, and ten grains of carbonate of smmonia, twice a day, with an ounce and a half of the infusion of cascarilla back. I left town at this period, and the appears to have gone on tolerably well, under this plan of treatment, from the 1st of September to about the 19th, when vomiting again returned, and Dr. Bunron kindly saw her for me, and he, viewing the case as I had viewed it, no doubt, -as one in which it was best to use caution,-also applied sixteen leeches to the epigastrium, and ordered her two minims of hydrocyanic acid, with a drachm of syrupus papaveris, every six hours, out of the mistura olei oliva. For three or four days this had the effect of lessening the irritability of the stomach to some extent, but on the 25th she again vomited, her pulse became 100, and small, and the dose of the hydrocyanic acid was increased to three minims.

I returned on the 2nd of October, and found the report stating that she had vomited every day since the 29th, and that she felt a dragging sensation after esting; tongue still was red, the epigastrium tender, the bowels confined, and the felt thirsty; pulse 102, and small. Not attaching any importance to the tenderness over the epigastric region, as no external heat was present, I directed that the other medicines should be laid saide, and that she should take two minims of creosote, in the mucilage, every six hours; and two grains of calonel, and sight grains of compound ex-tract of colocynth, every other night, at hed-time, as her bowels were confined. She vomited the first dose of croosote, and then ceased to vomit; her tongue became less red. her stomach less invitable, and she had less nauses, but she still complained of uneasi-ness in the epigastrium; and more perhaps to source her mind than anything cise, for I had discovered that she was exceedingly hysterical, I ordered a mustard cataplages to be applied over the region of the stomach. The creesote was persevered in. By the 9th of October her toughe had become meanly natural, but sa the still complained of loss of appetite, I did not hesitate to continue two minims of creceote three times a day, and to order two grains of the suighate of quinine with each dose of the organite Under this treatment she totally opased to who saw nothing in it but what was hysterical. I examined her chest myself, accurately, with the stuthoscope, and could discover no disease for the lungs. In fact the whole of her affections were hysterical.

Well, you saw that the creosote relieved the vomiting and the irritable stomach in the first instance, remaining well for some time, under the administration of the carbonates of ammonia and sods, and the carcarilla infusion; but when she had taken there for a formight or three weeks, the vomiting returned and was not allayed by hydrocyanic acid, though it was again arrested by the creosote; and eventually the stomach recovered its power by combining the crossote with a little sulphate of quinine.

Now, as regards the advantage derived in this case from creosote, which you know is a remedy that has not been very long introduced into practice, my late colleague REMARKS ON THE PROPOSITIONS OF MR. Dr. Elliotson being one of the carliest to Yearman.—Scale of REMUNERATION. try its powers. At the same time that Dr. Elliorson was using it, I also was administering it in the hospital; indeed I believe I was the first who brought it to this instiwas the first who drought agree with the opinion he has expressed in his paper in juxtaposition of Mr. Yeatman's and my the Medica-Chiruryical Transactions, that letter in The Lancer of Jan. 2nd. I trust creasone is often of considerable value in that they may induce a thorough sifting of allaying irritability of the stomach, when the arguments for either scheme; and though sue of that viscus. I do not, perhaps, quite agree with him as regards its efficiency in every such case. I think it highly useful in simple irritability of the stormers, but still I am quite certain that, like all other remedies, it does occasionally fail. I am disposed on the whole to say, that creosote is outilled to hold the same rank in the materia medica, as a remedy in irritable conditions of the stomach, free from all inflammatory siction, as does the oxide of bismuth. Indeed, after having used it from the first bested of its being known in this comity, I
windly lay that I have not been able to its
more with creatests in tritable conditions of any previous, for it would that the stometh, than I have with the trade of our many a testable substitute for a practic-

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vomit, and lost all irritability of the stoinach, blamuth. I have used crossote and suchbuight she complained of filtediseas, for which I ordered ave grains of the galaxinum pill with each dose of the guituhe, continue and such conditions of the stoesach. I have used crossote and such which I ordered ave grains of the galaxinum pill with each dose of the guituhe, continue, the same time the guituhe, continue, and the same time the support of occasional hysterial attacks. I should mention to you that during this period she had frequently complained of cough, and site herself entering this period she had frequently complained of cough, and site herself entering the grain of cough, and site herself entering the grain of the stomach. All of your understand grain of the stomach. The cough, as I understood from one of our pupils, who knew something about her, had pusited a little the medical gentleman under whose care she had previously been, and whose we nothing in it but what was hyster tried it. I tried it in a case in Luke's Ward. tried it. I tried it in a case in Luke's Ward. in an old man who, beyond question, had organic disease, most probably attended with an ulcerative condition of a portion of the stomach. In that case a few doses of crossore produced vomiting, which the hydrocyanic sold immediately stopped, and for a time so far allayed the irritability of the stherach, as to enable him to take such diet as the remaining power of the stomach could digest. I need not take up more of your time on this subject, but will proceed to another case, - which, though an instance of chronic disease, presented features of considerable interest.

PAROCHIAL MEDICAL ATTENDANCE.

To the Editor of THE LANCET.

Sin,-1 could hardly have hoped for so allaying irritationary of the automatory of the profession action, and that you cannot but do injury by exhibiting crecotor whenever there is any ching like inflammation in the mucous tisting like inflammation in the mucous tistion on his dwn propositions, and on the desired with the profession action, and that the profession action, and that you cannot be seen the profession action, and that you cannot be seen the profession action, and that you cannot but do injury by exhibiting crecious of replying to one or two of Mr. Yestman's observations, and that you cannot but do injury by exhibiting crecious of replying to one or two of Mr. Yestman's observations, both on his dwn propositions, and that you cannot but do injury by exhibiting crecious of replying to system of a payment for each case of illreas; as well as to put you in farther pus-session of the details of the latter mode of remuneration, as proposed by myself.

With regard to Mr. Yestman's See prop sition, I beg to refer your readers the objections stated in the second solus letter, which I humbly conceive are acuta-eive, as to the difficulty attending the cal-culation of this mode of payment.

timer, who may have medicated, and have become inestinguished for, his duties.

Ills third, proposition is quite in which streets into with my own ylawi, as to the projectity of including swirt thing (with a single street ino., viz., valcination) health missinguished; for it, according to my itan; the transition in the region of the relieving.

But upon his fourth project with the medical officers in this intermediate in the region of the countrilized.

But upon his fourth project with the medical officers in this intermediate in this intermediate in this intermediate in this intermediate in the region of the same class the justice or projects of the medical officers in the intermediate in the region of the same class indeed Mr. Y. elsewhere allows, "that the relicious officers can know institute of the project for the benevolence, persecutiving officers can know institute of the project for the benevolence, persecutiving officers can know institute of the project for the benevolence, persecutiving officers can know institute of the project for the benevolence, persecutivity and helples portion of the countrilized.

Permit me now to show the practicalility with which led has for calculating a soale of remaineration on professional person is to decide on the paprofessional person is to decide on the pa-; the principles I have already laid down. tient's need of assistance) " might have been restored if duly supplied with the medicines and attendance in the earlier stages of the disease.

This early attention can, therefore, only be ensured by an immediate and unrestrained application to the medical officers, and the plan which I have suggested, to prevent the parish and the medical men being burdened with applicants who have no claim on parochial relief, is quite a sufficient check on all parties, viz., that the Board of Guardians should investigate the weekly list of patients presented to them by the medical officer, and declare that the medical relief afforded to those individuals who do not belong strictly to the class of paupers, is merely by way of loan; the regular payments for such cases being recoverable from the patients accord-ing to the provisions of the Poor-Law Amendment Act, or similar provisions to be made for this special purpose. The patient to whom such aid is lent, should be entitled to medicines and attendance for one entire week (at least) from the first application to the surgeon. By this means not only are the parish and the medical officer protected from loss, but, in the interval, prompt attendance is provided for the sick

I have considered Mr. Yeatman's plan attentively, and am unable to discover how his scale of remuneration could be applied, if, as he proposes in his last letter, "the expense of drags were defrayed by parlates and unless." He must turely contemplate some redection of his beale, when he recombended this separate parochial payment

r meddines.

With regard to his proposal, however table in practicable it might prove in large towns, it would, I feel convinced, be quite the contrary in agricultural districts there can be no depot for drugs, except the medical riter's own residence.

A payment for a case of illness must include two items of remuneration; -the first. a payment for drugs, &c. &c.; the becond, a payment for drugs, ac. ac.; the second, for the time, skill, and trouble of the surgeon. The first may be readily estimated by a reference to hospitals and dispensaries ac. The Rev. C. Oxendon, of Bishopshourne, has drawn up, with great industry, skill, and success, a "Buffifical Report of the Principal Provincial Hospitals in Engineering Provincial Hospitals in Engineering land." The average cost of each patient in those institutions will be found in this very valuable work; I have deduced the following calculation from it :-

The total number of patients treated during one year in twenty-seven hospitals (including all except a few small and recently established infirmaries) was 90,426, of which 23,180 were in-patients, and 67,246 outpatients. The total expense of these in drugs, leeches, wine, spirits, surgical instruments, &c., was 17,9691, or about 3s. 111d. per head; - in drugs and leeches only, 11,0444, or 2s. 51d. per head. The first of these sums includes more than the parishsurgeon has to supply his patients with : the second, less; we may suppose the intermediate sum of 3s. to be nearer the mark; but we must admit, from Mr. Oxendon's impartial statement, that the expenditure in drugs in some of the hospitals has been uselessly extravagant.

I have further examined afteen annual reports of some of the principal dispensaries in England, both charitable and selfsupporting, which give a total namber of patients of 26,708; and an expenditure in drugs of 1561L, or about 1s. 3d. a head.

The Rev.C.Oxendon elsewhere says, "The medical expenses of an hospital in-matient : quite the contrary in agricultural districts patient during the same time. So agains, with a scattered population; in these cases they can be no depot for drugs, except the agricultural way hose-epatients will be more they can be no depot for drugs, except the agricultural way that those who attend personally at the dispensary. I consider 1s. 6d. per Mr. Yoshian's objections to "a payment the dispensary. I consider 1s. 6d. per millent" or "per case," apply only to for an in or home patient."

A respectable druggist in Southampton other hand, where there are very few paramples medicines to the patients of charitable dispensaries at 4s. per head; another in Blackfrium, London, at 2s. od. per Again, the circumstance of distance from

But another valuable fact may be taken from St. Mary's parish, Nottingham. In the parochial dispensary, in which the num-ber of patients annually treated (on an average of seven years, ending March 1825) was 2006, and the average annual expense in drugs &c. per head being about 1s. 5d. Taking, therefore, these several averages

as guides, we may reasonably and fairly conclude that a payment of from 2s. to 3s. per head would defray the cost of drug. When the number of patients is great, I have no doubt that 2s. would be sufficient; while, if small, 3s. would be required.

The second item of remuneration, viz. the time, skill, and trouble of the medical attendant, is not so easily estimated, as, of course, it is more a matter of opinion. It cannot and ought not to be expected, that parochial remoneration should, by any means, be equivalent to the value of professional services. Medical men must look for their incomes to the higher and middle classes of society, and can only claim of loss in their attendance on the poor.

Influenced by these notions, I suggest that the lowest average payment for attendance solely, should be 1s. for each case, and the number of patients in geometrical, a this only where there are very numerous much more reasonable as well as more patients comprised within a small space, and correct variation than that of Mr. Yeatman's close at hand to the medical officer; on the scale.

Again, the circumstance of distance from . in, the circumstance and phinly partitled adjust officer, which in phinly partitle described as him conricultural districts entails on b alderably more labour and expense, re a distinct and uniform obarge, not o the rossess just exactioned, but as a permissry check as gardent appointing medical officers situated respective and inaccessibly with research to this substances. gard to

For the distance appropries an additional fourpence are mile for each patient residing at a distance from the medical officer, whether actually visited by him or not. This arrangement would not be open to the objection properly urged by Mr. Yeatman

against a charge for each journey.

Such being the data of my calculation, deduced not only from the average estimates already mentioned, but from a comparison of many perochial salaries, I recommend the annexed scale, in which it will be seen that the lowest charge, 3s., includes, as before stated, the cost of drugs 2s., and of attendance le., while the highest rate of the scale comprises the cost of druge 3s.; attendance 3s.; and distance above five miles (or the community an exemption from absolute within six) at 4d. per mile, 1s. 8d.: in all 7s. 8d.

The intermediate charges of the scale

increase in arithmetical progression, and

SCALE for calculating the Remuneration for Medico-Parochial Services.

Distance of Patients from the Medical Officers being within		Number of Cases of Sickness and Accident attended in each Parish dering One Year, being														
		25		50		100		200		400		800		1600		
- A	1	Mile	6	d. 0	a. 5	d. 6		4.	4.	đ. 6	4	d. 0	3		3	d. 0
2.1	2	Miles	6	4	5	10	5	4	4	10	4	4	3	10	3	4
	3	Miles	6	8	6	2	5	8	5	2	4	8	4	2	3	8
	4	Miles	7	0	6	6	6	0	5	6	5	0	, 4	6	120	•
- /~	5	Miles	7	4	6	10	6	4	-5	10 /	5	4	4.4	10	22 W4#	de.
Å.	6	Miles	7	8	7	2	6	8	6	2	5	8		2		

Exemple.—If the total number of cases hetween any of the numbers mentions useded during one year in any parish be the head of the scale, the payment is.

If the payment for each of those occurring should be altered proportionally; thus a medical officer had attended 150 cases. be 4s. within two miles 4s. 4d., within three miles 4e. 8d., within four miles 5e., and so on.

If the number of cases be intermedia

f., payments would be 4s. 9d., 5s. 1d., 5s. 8d., es 5s., 5s., 5s. 1d., and 6s., 6d., according to the distance requestingly. The subdivision of the scale negatively to request the scale negative.

One column of the above scale, or some infermediate rate of sayment suited for each parish, should be agreed on at the beginning of the year (perhaps according to the number of cases attended during the previous year); otherwise either party concerned might, by fraudulent management, increase or reduce the sun total paid for the same amount of labour at the said of the year.

Egery distinct and different case of ill-

Egery distinct and different case of illness, or accident, in the case individual, however close in saccossipa, should be charged; but to private any maker conduct on the part of the medical officer, a relapse of the same disorder occurring within one month from the date of discharge should be considered as part of the former illness.

There should be no extras, except for midwifery, trusses, and vaccination; I think I am expressing the opinion of a majority of medical men in proposing that the ordinary run of pauper midwifery cases should be managed by a female midwife; a medical practitioner attending only when called on by her. This will not only be a saving to parishes, but a relief to the profession. The charge should not be less than one guisses, with an additional allowance for mileage. Vaccination might be charged at 1s. 6d. per head, and trusses at cost price.

No practitioner should be allowed to attend paupers distant more than six miles, unless he be the nearest eligible medical resident to those paupers; when a further charge of 4d. should be made for every additional mile in each case; nor should any one be permitted to undertake the entire care of a parish or parishes, which, during the previous year, have furnished a total of above 1000 cases; nor any firm of medical men more than 1600 cases.

There is one obvious advantage in the proposed remuneration, viz., that as it provides for two clearly defined items of expenditure, they might be separated, if desired, and so afford a facility to parishes for supplying their own drugs (which, although recommended by Mr. Yestman, could not he satisfactorily effected on his plan); for instance,-deducting 3s. for medicines from each of the payments in the first column, for 25 cases; 2s. 10d. from each of the payments for 50 cases; 2s. 8d. from each of the payments for 100; 2s. 6d. from the payments for 200; 2s. 4d. from the payments for 400; 2c. 2d. from the payments for 800; and 2s. from the payments for 1600; the remainder will show exactly the sums which should be awarded to any surgeon who missing indertake the care of the poor, with-

material part of my scheme unexplained, but shall be happy, with your permission, to enswer any questions or observations it may elicit. I remain, your obedient servant, cas. 12, 1866.

THE LANCET.

London, Saturday, January 23, 1836.

THERE can be but one opinion amongs! honest and intelligent men relative to the course which the Ministers should pursue is founding the new University, and that course is indicated with sufficient clearnes: by simply recommending that they should act upon sound principles of popular government, rather than receive with approbation the noxious suggestions and schemes of the rump of the old corruptionists. The confidence which we repose in the Ministry leads us to suspect that the CHANCELLOR of the Excusousa did good-naturedly comply with an urgent request that he would receive the report made to him by the College of Physicians, and one of the Councillors of the College of Surgeons, concerning the medical department of the projected new institution; and it would appear that some dozens of simpletons have been deceived by the ruse which was so admirably played off upon them by the CHANCELLOR. of the ExcHEQUER. The manœuvring wrong-heads were guilty of the folly of believing that the reception of the report by the CHANCELLOR would be synonymous with its adoption by that Government functionary. It is clear enough that these creatures, who are so fast sinking into professional obscurity, will catch at any straw, however slender it may be, in the hope of maintaining a little while longer even their present degraded position. No sooner, therefore, had the CHANCELLOR of the Ex-CHEQUEE allowed three or four of the old corruptionists to be named as the individuals who should frame a plan for the medical department of the New University, than did the halls of the old Colleges resound with every possible expression of satisfaction and delight.

Every person who has had any experi-

which the corruptionists push their interests benevolent and high-missed occupation in in the government offices, must approve of which they are necessarily engaged assungst ... the measure to which Mr. Spring Rick all classes of the community, they unsection an resorted, in order to be ridded for a while from the entreaties of his termentors. But for any man to suppose that the CHANCEL-LOR of the Excurquen intended to adopt. bong fide, the scheme of the HALFORDIAN crew, is to cast upon that gentleman an imputation which it would be most unjust to the honour and intelligence of the minister to inflict upon him. The medical practitioners of England have not yet forgotten that it was to the head of the present Ministry that they were indebted for the success of Mr. WARBURTON'S motion for the appointment of a committee to inquire into the nature and extent of medical abuses. It will not be easy, therefore, to make those high-minded men believe that Ministers would subject themselves to the imputation of wantonly trifling with the feelings of the most useful and influential body of educated men in this country. Had Mr. Spaing Rice really conferred on SIR HENRY HALFORD, Sir B. BRODIE, Dr. ROGET, and Dr. CHAMBERS, the power of framing the arrangements for the medical department of the new university, he would have proved by that one act-whatever may be the extent of his classical and general attainments-that he was incompetent to exccute the task which had been confided to him by his colleagues, and, moreover, that he was blind to the faults, the prejudices, and the practices, of the parties in question, and possessed of no knowledge whatever of the claims which the medical practitioners of England are at this time forcing upon the attention of the legislature. But we tell the investigation, they are, in all probable in this empire are upwards of twenty thou- upon principles of acknowledged justice and

ence of the industry and pertinacity with and respectability, and, still more, from the influence over public opinion, which is paramount to that of the members of any other profession. It is not extraordinary, therefore, that their arguments, in any question, should receive the respectful and earnest attention of total Pouses of Parliament.

Now, it happens that the members of the medical body have no particular desire to see any new medical titles awarded, which are unconnected with the rights and immunities of legally-qualified practitioners. They necessarily view with caution and jealousy, the proposal to institute a metropolitan university, wherein degrees of medicine are to be granted, because they apprehend that it will only serve further to entangle the question of medical reform, and add to the confusion which already exists on the subject of medical qualifications. At the very outset of the University question, we deprecated any fresh meddling with medical affairs until the report of the Medical Committee of the House of Commons was placed before the Legislature. Not one-third of the esidence, the printing of which must necessarily precode the publication of the report, is yet before the profession; and we suspect that the Ministers of the Crown know little relative to the inquiry, further than that the evidence has proved that the entire system of medical government must be remodelled. That such a conviction exists in the minds of the Members of the Committee, Mr. Rick and his colleagues are, doubtless, sware; but with the particular points of the evidence, the striking facts of the boobies who have been deluded by the lity, totally unacquainted. Who, then, shall tact and discomment of the CHANCELLOR contend that the Ministers can safely are of the Excurences, that the medical reformers are now too strong to stand in fear medical institution? Even if we admit of any ministry. The medical practitioners that they resolve to advance in their work sand in number, and, from their intelligence liberality, will their want of acquaintance the state of the s

withathe defects and abuses of the old cor- | leagues. If Mr. Spains Ricz, however, be porations, may lead them to commit many in an endless network of perplexities. Yet, if they determine to proceed before the Members of the Medical Committee have had the opportunity of framing their report, and apply, in their emergency, to their foca -their inveterate and implemble focs-for advice and assistance, rather than to their stanch and steady friends, they will at once forfeit that respect which is now felt towards them, in a pre-eminent degree, by nineteen-twentieths of the medical practitioners of the United Kingdom.

But the conduct of the executive Government in the last session of Parliament, regarding the municipal corporations, was so distinguished for its liberality, that not a doubt can exist in the mind of any sane man, that the rotten medical corporations, in which the system of perpetual self-election is maintained, will be entirely and for ever overthrown, and that in founding the new university, no similar tyrannical and unjust power will be exercised by any set of individuals whatsoever. Neither the profession nor the public are in a state of mind to be trifled with on this subject. Hitherto the Ministers have proceeded in an honest, straightforward, culightened course of policy, and we call upon them, as they value their own honour and the best interests of the country, to recede with horror from the proffered assistance and embraces of the self-elected and sordid monopolists who have so long scourged and degraded the profession by their iniquitous conduct in the College of Physicians and the College of Surgeonit.

No idle report or loose rumour will induce the profession to believe that the Mito have described the cause which they already so ably supported, and we are rehensible character and description can

really desirous of obtaining for himself and serious and fatal errors, and involve them his official associates the unextinguishable haired, and the profound contempt, of ninetynine hundredths of the medical practitioners of Great Britain and Ireland, he will call to his aid Sir H. HALFORD, Sir B. BRODIE, Dr. Roger, and Dr. CHAMBERS, and adopt as his own the scheme of those gentlemen for governing the medical departments of the new university. The CHANCELLOR of the Excurquen might then take his leave of the question of medical politics. At any rate his views on that subject would never afterwards carry with them the slightest interest, except to the most incurable, ignorant, and sordid of the plundering monopolists.

A EXPORT of the meeting of medical students of this metropolis, which was held in the great room of the Crown and Anchor Tavern on Monday evening, will be found in another part of this week's LANCET. It was computed that from first to last there were present on that occasion 1500 medical gentlemen, nearly the whole of whom were students. A more respectable assembly, or a more interesting one, was never seen in this metropolis, and considering the degree of excitement which prevailed in the minds of the gentlemen present, -all of them labouring under the impression that they had been grossly injured and insulted at Apothecarles' Hall in the person of one of their body,-the decorum and excellent order which prevailed, evidenced the importance that was attached by the assembly to the subjects which were brought under discussion. The declaration which was then made by the medical students of London, in favour of a public examination of candidates for medical honours, is, beyond all question, the most striking fact in favour of ared that nothing but facts of the most throwing open those Halls and Colleges where medical degrees and licenses are connee the profession to withhold their con- ferred, that has ever been submitted to the refron Land Manaobana and his col- attention of the legislature and the sublic

In short, such a declaration must annihilate letters contain, and we also inform what the accret system, and establish in its stead, that we have been requested to state that no petition was forwarded to the govern-

The bold and manly bearing of the medical students of the metropolis, in thus demanding that their attainments may be fairly and openly scrutinized, must obtain for them the respect and admiration of every enlightened member of the profession. The chairman of the meeting, Mr. MEADE, conducted the business of the evening with judgment and ability, and it was gratifying to observe the deep interest which Mr. CARPUR, with his whitened locks, still manifested in promoting the welfare of medical pupils. But what attendance was there of the physicians and surgeons of the "recognised" hospitals of the metropolis? What attendance was there of those gentlemen who utter such a profusion of bonied and friendly professions in their introductory discourses on the 1st of October, - the ticket-selling, fee-catching day? What attendance was there of those ever sincere friends of medical students? Oh the number is easily counted. Mr. Liston, of the London University, was the only hospital surgeon in London who supported the cause of the students by his appearance on the platform, and it rejoices us to be enabled to state that that distinguished surgeon received, as the just reward of his spirit and liberality on this occasion, the unanimous and hearty greetings of the entire assembly.

The views and purposes of the meeting will be found so fully expressed in the account furnished by our reporter, that we content ourselves this week with referring the profession for information and food for reflection on the highly important subject discussed, to that document.

IN giving insertion to the letter of Mesers. Carmicharl, Campron, and Colles, we take this opportunity of directing the attention of our highly respectable correspondent "Observator," to the contradictions of his stayment which these

letters contain, and we also inform him that we have been requested to state that no petition was forwarded to the government by the "Sisters of Charity" on hebalf of Mr. Franall, and that the remarks relative to the interference of those ladies in the election, are entirely unfounded. We have also a separate letter from Mr. Carmicharl, without room to insert it this week.

In a clinical lecture which was delivered a short time since by Sir CHARLES BELL at the Middlesex Hospital, some remarks were made on the subject of reporting clinical lectures in the medical journals, which demand from us an especial notice, and they shall receive it. Without intending to offer to this distinguished gentleman the slightest offence, we would seriously advise him to turn the current of his thoughts to any quarter rather than that of the press, or be will stand a fair chance of entering " modern Athens" as a confirmed twaddler. Some men take pains to make themselves ridiculous. Sir CHARLES BELL is one of them. and on three or four occasions in that way, his attempts have been very successful.

GREAT MEETING

OF THE

MEDICAL STUDENTS OF LONDON,
AT THE CROWN AND ANCHOR TAVERN,
On Monday, Jan. 16, 1520,

TO PETITION PARLIAMENT
TO EFFECT AN ALTERATION IN THE
EXAMINATION OF CANDIDATES

MEDICAL LICENSES AND DEGREES,
AND TO FORM A

CENTRAL STUDENTS' ASSOCIATION.

Tau challenge forwarded by Mr. Thomas Surra to the Court of Examiners at Apothecaries' Hall, demanding a public mannagem in order to prove that his rejection by the Court on the previous Thursday and not determined in consequence of the information of a competency of the candidate, led to the formation of a committee of medical attactuate to determine what steps should be taken by the greet body of students in Lendon on the conductor of the candidate with the prior of the calculated and determine what steps should be taken by the greet body of students in Lendon on the conductor of the greet was engaged.

which they universally laboured in conse-| term the Examiner sneered, and so began quelics of the existing system of private ex- to decry the acquirements of the candidate. aminations at the medical boards. The He was then asked, how nitrogen got into committee, it appeared, resolved as non-the system? He replied, partly by the vening a public meeting of the students to take the subject into consideration, which was publicly advertised, and held on Monday evening last, at six o'clock, in the great room of the Crown and Ancier Tavern, where nearly the whole of the medical students in London were assembled.

The proceedings commenced by the unanimous nomination of Mr. WILLIAM MEADE, of King-Street, Southwark, to the Chair,

amid great cheering.

The CHAIRMAN then opened the business of the evening in the following statement: Gentlemen, you have been called here this night by advertisements, in which it was signified that a discussion on matters of vital importance to your future welfare and interests was to take place. It will be my duty on this occasion shortly to explain to you why it was desirous to hold a public meeting for this purpose. You are all aware that near Blackfriars Bridge there exists an institution which is called the Apothecaries' Hall of London; and you are also aware that many acts of injustice have been committed by that tyrannical body of monopolists. The characters of many of your professional brethren have at various times been destroyed by the unjust proceedings in that establishment, at the examinations of students, and the question now is, whether by an unity of moral force and an appeal for justice to the right quarter on your part, you will not, after this fresh instance of injustice, attempt to prevent a repetition of oppression on the part of the offending body. (Cheers.; Without, then, further preliminary remarks, I shall at once state to you the facts of the case. Within the last three years I have been occupied in the duties of a private teacher in London, and have become acquainted with instances of gross injustice to medical students by the Court of Examiners in Apothecaries' Hall. The details of the examinations would sufficiently testify this fact. I shall confine myself, however, to the act of injustice which has been the more immediate cause of this meeting. The gentleman who was rejected on Thursday week, was interrogated in the strangest manner. He was first shown a prescription in which camphor and marcurial ofniment were directed to be admired. He was asked, what was the use of the camphor? He said, it promoted the absorption of the mercury into the system. Industry inquiry was, how that was effected? He replied, by stimulating the lymphatics. He was then asked, did it act upon the absorbents? His reply was, that the lymphatics were the absorbents, and he also add castor oil to the enemata. "
mentioned that it was partly taken up by mouth?" was the inquiry. He sai
the process of endomore. As that executing because there was great sickness.

agency of respiration. The Examiner said, that there was as much given out as was taken into the lungs, therefore there could not be any taken in at all. He was then asked, did it obtain admittance in any other way? He mentioned, that it was taken in through the medium of the digestive apparatus, and said that some vegetables which are used as condiments contained a considerable quantity of nitrogen. He was asked, what these were? He replied, that they belonged to the natural order of crucifere. He was told to name them; and he mentioned the different kinds of mustard, horse-radish, broccoli, and cabbage. the Examiner said, contemptuously, "Tailor's cabbage, 1 suppose." (Cries of "Shame, shame.") The Examiner soon after inquired, what was the ultimate composition of the muscles? He mentioned carbon, oxygen, nitrogen, and hydrogen; whereupon he was asked in a gruff and surly voice, whether nitrogen, therefore, did not get into the system in beef and mutton? (Much laughter. Then he was asked, what was the state of the bowels in diabetes? to which he replied, that they were irregular in their " Constipated, Sir," said the action. Examiner, "constipated; how can the bowels be irregular when so much fluid passes off from the system by the kidneys?" Great Laughter.) I suppose the worthy examiner considers that much fluid is essential to wash out the bowels. Mackintosh, Gregory, and Martinet, state, the two first, that the bowels are irregular in diabetes, and the latter that they are irregular, but generally constipated. The student was then asked what was the state of the pulse in nephritis, to which he answered " Quick and hard," which the Examiner instantly contradicted in the most abrupt and rough manner, by "Quick and full, Sir." (Cries of " Shame, shame.") Mackintosh and Gregory state that the pulse is quick and hard. Marshall Hall does not notice the state of the pulse in nephritis. He was then asked what was the treatment of intermittent fever, and he said that before the accession he would give an emetic, and mentioned the treatment recommended by Dr. Mackintosh, and which is now very generally adopted, namely, bleeding in the cold stage of intermittents. The candidate was forthwith asked, in a tone of astonishment, would he bleed? He replied that he had heard that practice strongly recommended, and should be inclined to adopt it. He was presently afterwards asked what purge he would give in nephritis, he said he would add castor oil to the enemata. "By the mouth?" was the inquiry. He said, No.

then, would he give by the mouth? He said the part of its Examiners. (Hear, heer, heer.) two or three grains of calomel. "No, Sir," the Examiner replied, "you should give a jorky of the Court, but he is not, surjetly said purge of ten grains of the extract of speaking rejected on any consists by a collogyath and five of calomel. (Issues) majority. An Examiner course is similar to the condition of the condit ignorance, captiousness, and unfairness, was the rejection of the candidate. There are numerous other points in this ex-amination, gontlemen, but I shall not speak further on I this evening. I hope I have mentioned sufficient to satisfy you, that the conduct of the Examiners on this occasion has been unjust. I promise you that the examination shall be published, supported by the very best authentication that can, under the circumstances, be given to it. Court of Examiners, without any means of appeal, so long will injustice continue to be perpetrated. When they improperly reject a cannot, Sir; the Act of Parliament does not law, to apply to the Legislature to give us at least good laws for examining bodies to fall back upon, with power of examining a second time, and public examinations (cheers); for, while they are private, you may be sure that when once a Board of Examiners has committed an act of injustice. they will not like to falsify their first decision by passing a man the second time. The second examination would, if possible, be more unfair than the first. In taking the chair to-night, gentlemen, I do trust and believe that your enemies, who are carefully watching your proceedings, will not have the power of saving that medical students cannot meet without occasioning some disturbance. (Cheers.) The Examiners of the Hall are now chuckling at the idea. that the students will commit themselves to-night, and that is the only ground they have for hoping to have the power of again doing you wrong. With quiet and becoming conduct, you must here protest against their injustice, and you will then succeed in your object. Your wrongs need discussion among yourselves, and the mode of redress-ing them will not be long unsuggested. Many are the men who have, in the course of years, been sacrificed to the injustice of this institution, men who have been fully competent to practice their profession, but who have left that Hall with aching hearts, not knowing where to hide their heads,-men who have been previously known to their fellow students and professional friends as able and well-qualified disgraced on account of some injustice on which I shall not explain

The student is said to be rejected by a for two or three inhances, hears what the candidate says, pursue him by some question which is persider to the Hall (cheering and laughter), walks away, and is succeeded perhaps by another Examiner, who walks by, shakes his head, and crieff "A had husiness," and the papil is rejected. The Act of Parliament contemplates that at least a majority of the Court should listen attentively to the examination, and not that two or three of them should walk to and fro by the table, putting peculiar questions, Such reckless unfairness can only receive and thus professing to form their opinions its reward by publicity. (Hear, hear.) I am on the talents and compotency of a man. I convinced, that so long as there is a private will tell you what is the mode of decision with one of these philosophical Examiners. He says, "When first a young man comes into the room we look in his face, and if candidate, and they are supplicated to give we see that he is clever, we expect so much another examination at once, they say—"We the more from him; but if we do not think he is clever, then we try whether he knows permit us to give you another examination." anything at all, or whether he can be of any Then it becomes our duty, if the Hall is use to society, and so help him on." (Great really so precise in its observance of the laughter.) Is an Examiner who judges according to physiognomies who he should sport with? is such a man as that fit to be an Examiner? (Cries of " No. no." It is too bad that the examinations should assume such a form as they do. There are four tables in the room; it is all a chance to which table a pupil is conducted, whether to Mr. Ridout's table, or some-body else's. Perhaps the other three tables are supplied by at least gentlemanly Examiners, if not very competent ones. (A cry of " Wheeler is as bad as Ridout.") Well, they are both very bad. (Laughter.) Now, of four students who may go in, three may pass through very well, but the one who falls to the lot of the fourth examiner, may, on no kind of principle that is good, fall a sacrifice to that accident, or to some private pique or spite, and have his character completely destroyed. The gentleman who has challenged the Hall to give him a public examination, had, before he went up, the full approbation of his lecturers and teachers to present himself, and he was considered perfectly competent to pass at the school to which he belonged. But there was evidently something premeditated against him, and whether by chance or design he fell into the jaws of Mr. Ridout. It is a fact that in the very middle of his examination, his indentures of apprenticeship, which had before been received, were brought into the room by Mr. Watson, who tapped him on the shoulder, and laid them on the table, when the Examiner took them up at that particular moment to inspect. There was candidates, who have gone from that Hall a reason for this extraordinary proceeding, to you now, b

If Alberta convincing proof that you have plate, and demand that they make it period no protection at the Hall against the most their duty to reform the present system undecoming and depressing acts on the part without delay. I shall have much plateaus eithe Coort. Now, the object of the pre- in co-operating is every way in my power sent meeting is to consider the best means to obtain your object. I remain, your obsof providing a remedy against the injustice dient servant,

of that body, and is protect, in future, the professional rights of the student. (Cheers.)

Mr. Parks, rose and said, —Mr. Chair-Resolutions having for their object these man and Gentlemen,—I am deputed by the purposes, will be proposed to you, and I am sure that you will hear with attention everything that is said to the point respecting them. As far as my endeavours can go there shall be a fair and impartial hearing points in question,—the examinations at the Ifall as at present conducted, and the best mode of protecting the medical students of London from injustice. (Hear, hear.) General politics we shall wholly avoid. I ask of you a calm, quiet, and dispassionate discussion, and let not the Examiners of the Hall, or any of your oppressors have reason to say to-morrow that this was merely a meet-ing of riotous students. That is what they want. It is their great hope that this will be a riotous meeting. "There will be a row," say they, "the students will depart, and then what care we. The students will then have no power, and their meeting won't affect us a bit." If your enemies choose to say what is untrue, why, we can't help that. But let them have no good ground for considering that after this meeting they will actually have more unjust power over you than ever. Deceive their wishes, gentle-men, by testimony that cannot be mistaken. (Loud cheers.) The following letter from Joseph Hume,

and received with very great applause :-" To the Chairman of the Meeting. Sir .-I request that you will state, if it should be necessary, to the meeting, that I should have attended, agreeably to the request contained in Mr. Paine's letter of the 16th, if I had not had a previous engagement which I cannot avoid. Be pleased also to state that I concur in the propriety of their making application to the Government for an immediate and thorough reform in the regulations and practices of the Examiners of the Apothecaries' Company, of the College of Surgeons, and of the College of Physicians. All require to be new cast, and some intelligible system adopted for the regulation of medical education, the granting of degrees, &c., and, above all, all examinations for degrees, diplomas, or liceuses, should be held in public. I hoped to have sten Mr. Warburton respecting his views for the next session. But although I know

200

Esq., M.P., was then read to the meeting,

"JOSEPH HUME.

Committee to propose to you the first resolution, and I can assure you that I feel more than an ordinary degree of pleasure in doing so. I feel that we are now about to try to obtain the redress of one of the greatafforded to every speaker who keeps to the est grievances that can befall a student. We do not meet in ignorance of the tyranny that has so long been exercised at Apothecaries' Hall, when it has suited the purposes or the whims of the Examiners. We know too well that many of the students who have been rejected there, were men who were far more deserving of holding scats in that Court than those men who really occupy them, and while those institutions which affect other classes of the community are undergoing reform, why should not the Apothecaries' Hall be also reformed? Men's minds have become more expanded, and their knowledge much greater, and I am sure it is not right that men who were educated nearly half a century ago, should have the power of sitting as an irresponsible and secret board of examiners, to exercise their power over students of the present day. (Cheers.) We know that very many men have gone into that Hall, who have devoted years to their profession, and who possessed high intellectual attainments, have been made to bow to the shrine of ignorance. (Cheers.) Why should not such an institution become the subject of reformation? But I am happy to know that the days of all close corporations are numbered (hear, hear); and I sincerely trust, that ere two more sessions of Parliament have closed, that the present corrupt body will be totally abolished. (Great cheers.) I hold in my hand a letter which I have received, since coming upon these hustings, from Mr. Warburton. (Some person here said, "That is politics.") A gentleman behind me says I am introducing politics. I say that this is not the fact; I will not touch upon any politics but medical politics, and those are the politics which we are expressly called upon to discuss. Mr. Warburton says that he should have felt much pleasure in joining this meeting this evening. (The same individual said "You mus'nt read it. It's politics. It is private. It is to the sta-dents. Cries every-where from the meeting of " Read, read.")

that he is most anxious to see a therough
"To Mr. Paine, Secretary to the Commitreform in the profession, yet if you wish for
relief you must considering to secist, yourselves, and to lay heart the florer ment a
statement of the sixtle of which you com-

proceedings of the Examiners at Apothe | proposition before the meeting. Mr. Der. carles' Hall, &c. As I had already formed another engagement, I could not have attended the meeting, but independently of that reason, it appears to me to be best that I should not attend it. But I always hear with pleasure that persons who feel themselves aggrieved, assemble to consider and discuss the subject of their grievances, and individually I should, without doubt, have derived much gratification from the information to be received by attending the discussion. With earnest wishes for the prosperity of the medical students of London. I have the honour to be, Sir, &c.,
"HENRY WARBURTON."

(Enthusiastic cheering followed the perusal

Gentlemen, I shall not detain you longer, excepting to entreat that you will universally join in the work we have begun, and I am sure if you do, that we shall soon be able to shout a joyous requiem over the remains of that despotic tribunal of injustice, the Apothecaries' Hall, which has been so execrable in its existence, and will be so de-tostable in its death. (Loud cheers.) I beg to move, gentlemen, "That this meeting is of opinion that the examinations, as at present conducted, at Apothecaries' Hall, are conducive neither to the honour of the profession, nor to the protection of the public, nor are they adequate tests of the abilities of the candidates."

the resolution. Abuses, he feared, had exist- into consideration the means of redress. ed in the Apothecaries' Company ever since it had been entrusted with the power of granting licenses. Young men came up to London, devoted the whole of their time to hending the questions which they put, were they would then exert themselves to obtain turned back. It was notorious, indeed, their just rights, and support the dignity of among medical students, that whatever the the profession. (Hear, hear.) talent and scientific knowledge of the candidate, if he relied upon that for passing, without being initiated into some of the queer questions of the Hall, he would fail. (Hear, hear, hear.) He most cordially supported the resolution.

obtained, said, Gentlemen, I wish to address (Laughler.) I come here as no spy, you for the honour of the pupils at large, ("Oh!") The gentlemen who know me their future welfare, and their future cha-know my least. (Laughler, and a cry of racter in the profession. (Laughter, and "Hear Mr. Darmelf's demonstration of cries of "Hear, hear,")

mott our speak after the next resolution has been moved.

Mr. Evans proposed the second resolution. If they were disposed to hear the gentleman who was so many years older than himself, he (Mr. E.) would super will ingly give way to him. (Ories of "No, no, go on.") He thought that at no time were the students called upon to be more unanimous than at present. Until lately the flagrant acts of injustice commisted by the Apothecaries' Company had been kept in the background; but within the last few months, two most glaring cases had come within his own knowledge, -one was that of a most scientific man who was rejected at the Hall. Strong, however, as were his feelings on the subject, he would not abuse the Apothecaries' Company, neither, he trusted, would others at this meeting, as that would be placing in the hands of the Hall a scourge for their own backs. He was extremely sorry that the Apothe-caries' Company should have put to the test, in the manner they had done, the old proverb-" Didicisse fideliter artes, emollit mores, nec sinit esse feros." (Cheers and laughter.) Certainly the Company was not an instance in proof of the saying. The resolution he had to propose was as fol-

"That with a view to procure a remedy for the evils indicated in the foregoing reso-Mr. Scorrans, with pleasure, seconded lution, it is expedient that this meeting take

Mr. Publicomne seconded the resolution. In case, he said, any among them had been brought there by idle curiosity, London, devoted the whole of their time to or had come in opposition to the objects of perfecting themselves to practise in their the meeting, he wisfied that he possessed profession, went up prepared to the Hall sufficient powers of eloquence to impart to to pass, and often, in consequence of the them the same feeling as he himself pos-Examiners themselves not properly compre- sessed upon this subject, as he was sure

Mr. DERMOTT. Mr. Chairman and gentlemen, I wish to address you before the resolution is put, and even Mr. Wakley, as a conscientious friend. (" Hear, hear, great laughter.) Now, gentlemen, I think that this resolution is alleding as it were ported the resolution.

The CHALRMAR then put the resolution to a point of homour; and I thiak, and to the meeting, when one hard was held up against it, which caused great laughter, and cries of "Let him come forward" having carisen, the dissentient advanced to the platifier, and was announced to the meeting as Mr. DERMOTT, who, when allence was a collusion of the cries of "Go on, so or "out, gontlemen (cries of "Go on, so or "out, gontlemen

The CHAIRMAN, There is at present no. The CHAIRMAN, Lishell take care that

I must request that Mr. Dermott will have the goodness to keep to the object for which, we are assembled,—that point is, the conduct of the Examiners of the Hall.

Mr. DERMOTT. I will do so. The universal interest of the profession is involved, and it might be put to the Company of Apothecaries as a point of honour, inasmuch as their character is concerned in a professional way, that they should examine this man publicly. That is the question I wish to propose to this meeting, and if you wish to put me down on the strength of that question, for God's sake if you can conscientiously put me down, do it. ("No, no, yo on, yo on.") Well, then, I say their honour as professional men, their honesty in some slight degree as professional men is concerned, and therefore, upon the score of the interests of the pupils at large (laugh-ter), I would wish, instead of that former resolution, that this gentleman should be examined publicly before the Apothecaries' Company, and I trust it will be seconded. I put my resolution contra to your second resolution.

No one seconding Mr. Dermott's resolution, it fell to the ground. The second resolution was then carried unanimously.

Mr. PETERS proposed the third resolution. Two or three instances had been adduced relative to the oppression manifested by the Examiners of the Hall, but many grievances were yet unstated. Numerous regulations which were in existence at the time that hundreds of students had entered on their professional studies had since been repealed, or so altered as not to bear any resemblance to their original form. (Cries of " Shame, shame.") It thus became impossible for students to know what to do, they could not tell what would be the amount of their studies, they did not know to what particular branches they should devote their energies, and probably at a time when they might be considered fully competent to practise, some fresh regulations were issued from the Hall, which threw twelve additional months of expense and anxiety on their shoulders. (Shame, shame.) No doubt the Company would say that it was all for the good of the profession, but if the majority of his fellow students thought that such a power ought not to be vested in persons who were not able to till what was and what was met good for the profession, and were liable to abuse their privileges, this was the time for them 50 may so. (Cherre.) A most glaring patence of this abuse happened last sum-Ci- then regulations came out by which Mer. See regulations came out by water to be seedents were obliged to incur an adthrown out, but he would give his reasons
littlessel welve months wear and tear of for dissenting from the object of the meeting,
mind, body, and pocket. They were now, They had met to discuss grievances, and in
too, especially encouraged in grotect them-order to discuss them they ought to know
selves, from the circumstance of the pupils first of all what those grievance were. One
of Esseter, backed by their temperature, having grievance had been stated, and only one,

The state of the s

Mr. Dermott is not offended here; but, swayed the Examiners at the Hall in their acts of injustice; and if twenty-five pupils at such a distance had possessed this influence, what could not the multitude do who were then present? (Cherr.)] The resolution he had to propose was, "That in order to attain the object desired, a petition be immediately drawn up and forwarded to Parliament, praying that an equitable and just tribunal be immediately established, and that the Chairman of the meeting do sign such petition on behalf of the students present."

Mr. LANE cordially seconded the resolution.

Mr. DRUITT, of King's College, said, that the petition ought to be signed by those who wished to do so, and not by the chairman on behalf of the meeting, for the resolution might not be approved of by all, and it might be inferred that it was not approved of by all the students who were present. Ho moved as an amendment that the petition be signed by those gentlemen present who wished to do so, and not by the chairman on behalf of the meeting.

Mr. CHALLICE seconded the amendment. Mr. CROOK supported the original resolution, as it was in favour of the usual method of signing petitions. Besider, one of the principal reasons was, that the Hall was not over lenient with an individual whom they considered to be opposed to them. (Hear, hear, hear.) If the students present signed the petition, he had not the least doubt that many of them would feel the effects of that proceeding when they went up to the Hall. The signature of the chairman would save many a man from unjust disgrace during the remainder of his life. (Hear, hear.) Why did not the enemy who (Hear, Acar.) Why did not the enemy who moved the amendment declare his sentiments boldly, instead of endeavouring by a side-wind to overturn the object of the meeting? (Cheers.)

Mr. Dautrr again presented himself amid much opposition. They had been desired, he said, to give an impartial hearing to every speaker. As yet they had had no oppor-tunity of showing that impartiality, but he would now afford them the opportunity. (Hear, hear.) He would state boldly his reason for opposing the latter part of the resolution. He did so in order that it might not be imagined either that the general body of the medical students of London were aware of this meeting, or that they were inclined to support any petition that might be founded on the resolutions which had been and might be passed. He would not attempt to retort upon the sneer that had been but it had not been proved. (Cries of "Oh, Some gentleman had proposed the right of man towards the Apothecarles' Company, a gentleman who had moved a resolution. stated that there was to be no abuse, though he considered that plenty of abuse, and gross abuse (general history), had been used. He trusted they would listen to him for a few minutes, and then he would sit down. (A cry of " It's quite time you did so.") They had come there to discuss grievances, and he wanted to know what the question was upon which the gentleman had been rejected. (Repeated hisses and cries of " Off. of.") (The chairman begged that the meeting would hear Mr. Druit.) He thought they had met to hear grievances discussed, but it appeared that they would not permit it. No grievance in his opinion had been proved, and if it had, he did not consider that they were adopting the proper means of obtaining redress. (Groans and hisses from all parts.)

The amendment was then put, when two hands were held up for the amendment, and the resolution was carried amidst loud ac-

clamations.

Mr. CROOK said, he had to propose a resolution which he considered ought to have been the first, because, while it complained of the present mode of the examinations at say much about their sittiffy, and as to their sentiments on the points under discounties, the fourth resolution, he did not consider ing of men who had come forward on the that he was in any way acting for the do-present occasion, he did hope that the appearance of the Company, and he thought that the carries. Company would, if the opposite meeting agreed with him in considering tunity occasion, he did hope that the opposite meeting agreed with him in considering tunity occasion, he did hope that the opposite meeting agreed with him in considering tunity occasion, he did hope that the opposite meeting agreed with him in considering tunity occasion, he did hope that the opposite meeting agreed with him in considering tunity occasion, he did hope that the opposite time that the opposite tunity occasion, he did hope that the opposite time that the opposite tunity occasion, he did hope that the opposite time that the opposite tunity occasion, he did hope that the opposite tunity occasion, he did hope

ek," and laughter.) After what he con-sphered to be much abuse from the chair-tribunal. That would be as had, unless the higher authority were also to be elected by promised to address them, he would conclude by reading the resolution, viz. :-

"That it is the opinion of this meeting that nothing will more essentially contribute to the honour and efficiency of the profession, and the public good, than that the examiners of the institution under consideration should be elected by the members at large, and that no reform can be satisfactory that does not render the governing body accountable to the governed."

Mr. BARLOW seconded the resolution. Mr. -- said that he thought that the proceedings of this meeting were well calculated to raise the character of the profession in the estimation of the public. It had been stated that the grievances complained of that evening had not been substantiated. He did not stand forward to discuss individual cases, but he contended that the principles on which the examination was based were bad. Before one man had the legal power of examining another upon any branch of the profession, he ought to give proofs that he himself had attained proficiency in that branch, and he would boldly assert that the members who at present the Hall, it also suggested a remedy. He composed the Court of Examiners at Applwas not prepared to go to the extent that thecaries' Hall had not given proofs of prosome gentlemen had who had spoken dur- fick ney in any branch of science whatsoever. ing the evening. He thought that if they (Hear, hear, hear,) It was not a court could utter a word in praise of the Hall, they ought to do so. (Cris of "That's imposition of the noblect of profession in public estimite"); and as impartiality was to be one mation. (Cherrs.) Ought the doors by of the principles of the meeting, he was sure which students entered the profession to be they would listen most attentively while he opened or closed by such a body, just as endeavoured to say a word in favour of that they thought fit; and were the intellectual institution. Since the passing of the Apo- medical students of this kingdom to be thecaries Act in 1815, he presumed that no placed at the tender mercy of a self-elected one would question that the profession and irresponsible tribunal? (Reiterated had been much improved. (Hear, hear.) cheers.) Even if any individual could come if that proposition was conceded he would forward and praise the illustrious Company, say, don't do away with the Apothecaries' -admitting such an absurdity for an in-Company; modify it, reform it, but don't stant-yet it could not be proved that the destroy it. In his opinion the great fault system of examinations was not deserving of the Company was, that the licentiates of of the strictest reprehension, as that of a self-the Hall had not the governing body under elected body. (Cheers, It would never do justheir control. If they had, the Company tice to the public; it would always act upon would never dare to inflict the acts of injustics own private feelings to candidates. Mr. tice of which they had been guilty. Why Drult hinted that it could not be told whether would they had been gainly. Why partitioned has tendent as technique would they destroy the Company? (A voice. the meeting approved or not of the resolu"Have you passed?" Mr. Crook. "Yes, I done, but safely, if a man held up his hand have." The voice. "Well, what do you think by way of voting, he knew what he was of their shifty?" He (Mr. Crook) could not doing, and they all knew what were his say much about their ability, and as to their sentiments on the points under discounted. Mr. Cappus was received with cheers, and and agreement of the many control of the many control of the many control of the many control of the meeting, and that the Memory so, has given a hundred course of lactures opinions of this meeting, and that the Memory control of the meeting of the meeting. on anatomy and surgery; and you may be seared that it gladdens his heart not a little to see such a body of students come forward and say - not, "Do not examine us," but Examine us in such a manner, that the world may see whether we merit or not the diploma. But unfortunately, the examinations have been private, and grossly par-tial. Oh, I could tales unfold relative to the examinations that would harrow up your very souls, but I must not do so. You have now put the matter into a train for alteration. (Cries of "Yes, yes," and "Public examinations.") Can any man, or any set of men, complain of you for this? To your own feelings how gratifying the circumstance, that when you have worked night and day to obtain the reward of study, you can advance to an honographe, and an the reward of your exertions! (Hear, hear.) Yet in this great country, such a reward has never yet had an existence, but the sysyou pay so much, as a surgical apprenticefee, and have an hospital or a wealthy connection, you must be a miserable anothecary, and are shut out from all those offices to have opened to you. Hear, hear, hear, system to possess them. Look at the College of Surgeons. See there the bust of that great anatomist, unhappy Brookes. (Cheers and " Question.") Surely you cannot wish to interrupt me, when I speak of the injustice, the had conduct, the baseness of the College, to that first of anatomists. (Hear, hear, hear) If ever man was entitled to hold a seat in the Council of that College it was Brookes, and, had he possessed it, he would have been alive now; but, gentlemen, I tell it you with tears, that that anatomist died from absolute poverty-from absolute starvation (eries of " Shame"); and the best pepil of the present day might do the same, as another result of the existing excellent object.

The regulation was then put to the most-ing and dirried unanimously. Mr. WAREN-ting their loudly called for, and the Chark-han and he understood that Mr. Wakiey would speak after the next resolution was

Mr. Buar proposed, and Mr. Faner sespeeded, the next resolution win in the

to present to the House of Commons, a petition, to be drawn up, expressive of the hers of the Parliamentary Committee of Inquiry into the state of Medical Education and Practice, be also requested to support the same in their places in the Legislatorial Assembly.

Dr. - Browners said he would briefly address the meeting. He had waded through the profession like thomselves, and he supposed they were now considered as worth less as he was. Suppose that some gentle-man, possessing all the intelligence in their collected bands (laughter), went up to the Hall to be examined, and that very learned Society chose to say, " Sir, how many protoxides of mercury are there?" That would be an ignorant question. The difference between the protoxide, and the doutoxide, and the tritoxide-(The laughter prevented us from hearing the end of the sentence.) honour-conferring examination, to receive There might be individuals in the company not members of the profession, who had come out of curiosity, perhaps, and, there-fore, when he talked about protoxide, and tem of medical education has been loaded deutoxide, and tritoxide, he was talking with difficulties without honours. Unless Greek to them. (Cries of "Question," and "We don't want a lecture on Materia Medica.") He was only following up Mr. Carpue's views. A friend of his was rejected, the other day, for not being able to tell how which your exertions and your talents ought many protoxides of mercury there were. The collected medical wisdom of England Gentlemen, I have, fortunately, made my- said his ignorance might lead him to kill the self independent by professional exertions, King's subjects. (*Question*, question.) Yet and I now come forward to assist you to this gentleman had an intelligent mind, and obtain the same opportunities. (*Cheers.*) was well versed in botany, anatomy, phyobtain the same opportunities. (Cheers.) was well versed in botany, anatomy, phy-Few, indeed, can hope, under the present siology, and medicine. If the Court of Examiners-if the Court of Apothecaries would allow him (Dr. B) to come before them, be would put every man of them down. (Laughter.)

Mr. WAKLEY was here called for from all parts, and received with many rounds of enthusiastic cheers. He spoke as follows:-In standing before the meeting on this occasion, I yield rather to the advice of others than to the dictates of my own judgment, although it is my duty, circumstanced as I am, and holding the sentiments which I have professed now for some years on the subject of Medical Reform, to contribute in every possible way to the advancement of your interests, which I know are identified with the best interests of the public. Gentlemen, I have indeed passed a pleasant evening on this occasion. To see you assembled to promote the great and paramount object for which I have myself been so long contending, is a source of gratification to me which I know not how to describe. There is a French saying " that those who help themselves Heaven will help." Your prospect is then truly flattering; and let me at it. tell you that you have to-night settled one

great question of Medical Reform in agree- the exercise of its original and very medal ing to tell the Legislature that your confidence in your information, your attaindrugglets of Loudon, whose labours are far ments, and your industry, is such that you care not for-nay that you invite-a public examination into your qualifications to practise medicine - that you are prepared to submit to an honest, just, and deliberate scrutiny, but that you refuse any longer to be subjected to the dishonest and unworthy practices which are played upon you by the Worshipful Company of Apothecaries of London. (Hear, hear, hear.) When I have urged, time out of mind, that public examinations for degrees, diplomas, and licenses, should be instituted, what has been the invariable reply of your enemies-those who, however, have at the same time professed themselves to be your ardent friends? "Oh, poor fellows!" they have said; " they cannot stand such an ordeal; their nerves would be agitated in public; they would tremble too much; they would be incapable of showing what little talent they do possess." (Much laughter.) Gentlemen, this was a base calumny. You demand this fearful investigation. (Cheers.) And now what will your enemies say, and what will the Logislature respond in deciding on the conditions. the arrangements, and the principles of a New University? (Hear, hear, hear.) How will the corporators in the balls and colleges dare any longer to assert that the medical students of the metropolis are frightened at public examinations: The gentleman who proposed the fourth resolution has stated, manifest in his countenance, that he was anxious to amend but not to destroy the Apothecaries Company. Gentlemen, I will destructiveness on this occasion, but I can is concerned, the foundation of the Company's power, the adoption of his propo-sition by the Legislature, will, most assuredly destroy that Company for ever, for it upsets the very principle upon which it is founded. (Heer. heer. hear.) The Com-pany would lie upon no bed of roses if pub-lic examinations were made essential to the possession of professional privileges. Only imagine the ordeal which the men in the present board of Examiners would have themselves to undergo, and the extent of ignorance they would expose. (Great cheering.) No, no, gentlemen. They are altogether out of place as examiners of medical students. The charter of James I. simply authorized that Company to superintend the stone and nerves of steel,—that he drug-shops of London; and I say, let the suffering has the effect upon your and Hall again occupy its old station. Let it and feelings of hardening them to surre

more profitable to them-whatever their competency or their respectability-than are those which are exercised by the medical practitioners. The chemists and druggists at present are without control; no authority is exercised over them by any company. They do just what they please behind the counter, and you are the suffer-ers. (Hear, hear, hear.) To propose what is suggested in your fourth Resolution, is not to propose a reform in the Company, but its abolition, for in effecting such a change in the Act of 1815 as would be necessary, the Apothecaries' Company would sink to the earth. But in establishing the new University-an institution which if constructed, as it ought to be, and according to the principles which common sense inculcates, will prove of more advantage to the English nation than any institution that has been established for the last bundred and fifty years -in the new University, I say, the views expressed in the fourth Resolution may be most beneficially adopted. To that Institution they must apply, and when I reflect upon the influence which medical practitioners exercise over the minds of the community, the blessings which they confer on their fellow creatures, and the quantity of buman suffering which they daily relieve, -I cannot believe that any reforming Government will be insensible to the demand which you now make. (Great cheering.) with that kind heartedness which is so As has been properly said to night, this is no question of party or of politics; it is a question of the welfare of the English nation, of health or disease, of life or death. All make no comparison between our organs of minor considerations should merge in the accomplishment of the great object you tell him this, that so far as the Act of 1815 have in view. It is right that men should not practise without a most careful and judicious scrutiny into their qualifications; but when I reflect upon the drudgery which you have to undergo for a long series of years, upon your innumerable toils, your perplexities, your anxieties, and the hopes you cherish, I cannot conceive how any man can be so cold-blooded and so hase as to make the very moment which ought to be a period of triumph and honour, the hour of degradation, misery, and diagrace. (Loud cheers.) Gentlemen, such mostings as these ought frequently to be beld. The public know not your case, they know nothing of management of management of management of the case of not your case, they know nothing of point anxieties, nothing of your meridies. Do they suppose that you possess hearts of Hall again occupy its old station. Let it and feelings of hardening them to surrounding the macros of England. It is unterly incapable of executing the duties of so your project in carrying on the duties of so your projection, is marchy mercoarry, high an office, so dignified, so exalted a station, and, therefore, let it be confined to

saint who are continually endeavouring to to-day. In thanking Mr. Ridout, do not relieve their fellow men from the agontes of understand me to rejoice at what has been disease, without once supposing they can derive pecualary profit for their skill. (Hear, hear hear.) The public then ought highly to appreciate the pains and perils which you hear.) It is monstrous to conceive such a undergo in endeavouring to obtain a know-thing. Gentlemen, the rejection is no disledge of that profession which is thus devoted to the wants of the community. If no triumph. (Hear, Acer.) As he cannot thenevour claims are now made for the aid of Parliament, and then enforced as I know they will be, no effort that may be made by designing men can frustrate the object you have shown that you entertain not the have in view. (Great cheers.) Gentlemen, slightest respect for that body. (Universal on this point let me do my political enemies in the House of Commons the justice termining that it shall no longer continue to say that I never yet saw men listen with to inflict undeserved punishment on medical more attention, or treat with more respect, the parties who advocate your interests in the great principle of public examinations the House of Commons. (Much cheering.) must be conceded. They would be perIf there be a shade of difference in this feetly legal, even on the part of the Apotherespect between the two contending parties carles. Company. There is not a singlein that assembly, I am bound by truth to clause, line, word, or syllable, in the act of say, without designing to give offence to any one, that the brightest side is not with the liberal party. (" Hear, hear," from the King's demanded that they should be carried on in College students.) I know not how it hap- private? Nay, I have no doubt that when pens; I cannot conceive from what cause it proceeds, but, really, during the last ses- that the examinations would be carried on sion, when emoluments were proposed for in public. The subject, however, was rese medical men at coroners' inquests, the op- mooted in the House of Commons; the position came from the liberal, and not from the other side of the House. Now I mention this to you because I am anxious that the little misunderstanding which exists in the minds of many persons should be removed. You know a good many members him again, by an application to the Courtof of the House. Try them yourselves: ask King's Bench, for the ninth section of the them what are their objections to giving to medical men their due. (Hear, hear.) Gentlemen, the resolution which was last proposed refers to Mr. Warburton. Your petition is to be placed in his hands. A more proper proceeding could not be adopted. The labours of Mr. Warburton in your cause are deserving of unbounded praise. (Hear, Aear.) His assiduity is unabating, his honesty is unquestionable, his intelligence is of the highest order, and I am sure that no effort will ever be wanting on his part to give effect to any resolution which you may ass. A disaster occurred at the Houses of Parliament last year, by which, as you know, a number of medical papers were consumed; and Mr. Warburton's report has, confequently, been much delayed. The committee will by and by here appointed; and the whole of the evidence, and the reit himsed thereon, will be laid before the Your resolutions, therefore, come in time (loud cheers); and I thank Mr. Ridner for what he has done on this occam; I am most grateful to kint for his la-

called the degradation of the candidate. Who, however, will contend that a student can be degraded at the Hall? (Hear, hear, grace, and the passing the examination is acquire honour in the one case, he cannot get degradation in the other. Why, you yourselves, by your proceedings to-night, students. In establishing a new University, 1815 which prevents them from holding the examinations in public; and who has ever that act was passed, the legislature presumed act, in fact, was passed with scarcely any discussion. But there is another pount. say that the examination of the gensleman who was rejected was an illegal examination. He can compel the Court to examine act requires that the examinations shall be conducted by a majority of the Court, bac he was examined by one individual, consequently it was not a legal examination. There are twelve Examiners, and these must be seven to make a Court. The majority of seven, according to Cocker, is four. Now I am told that there are four tables in the room. Are the Examiners Hydras? Can they multiply their heads as occasion may require, so that a proper number of heads: may be at each table to give a decision in. favour of or against a student? (Heer. Acar.) I say therefore that Mr. Smith, if he chose, could compel them to institute another examination, but I trust be will dono such thing. I hope he will rely on the challenge he has given them to examine him in public, in the presence of his professional brethren. Were such examination given to him, the paltry, miserable, managering, tricky, questions that are now put to stredents at the Hall, would never be progund They are now submitted, not to ascert sons in our cause. (" Hear, seer, rem; and dexterny or many the few life susher of this will describe the country of the country. It is the Court of institute research by indicate who have been elected by public by indicate who have been elected by public the country of the c the depth of the student's information but

and movements of the animal body, and the treatment of diseases. Having proved his competency to discuss and explain those principles, the student would be examined on the details of anatomy, physiology, chemistry, medical practice, &c., the object of the Examiners being to put those questions which are important as tests of knowledge Depend upon it this punishment would prevent another such attempt from being made. the aching heart of unfairly rejected stu-dents, and no feeling of distress can be tation to wait upon the Chancellor of the greater than the disappointment of a meri-Exchequer, because there is a charter now to create. I have known this happen to abilling in London,—the last farthing their Chamber. One of the King's College knot of relatives could devote to their education, students here called out "No politics," which and to the purchase of tickets and certifices was surjety deprecated by cries from all cates. I have known the week arrive when other parts of the room.) It has not been prospects in life have been for ever blasted. the Kraminers themselves to say upon this occasion? They have nothing. They will not fafer in either you or the candidate on what point they refored to grant him the license to practise. He is in total ignorance upon the subject. The Examiners are too stay his hand with reference to the semicautious to make such things known. The conditions of the charter which, when a Examiner who rejected him does not dare framed, may, though injurious to your is If he did, it is fifty to one but that his own years. Remember that it ignorance would be exposed. All other attended who go up for examination are in been in each other in a state of uncertainty upon the subject on that some beauty.

concours, then the student will be examined first as to your knowledge of the general principles which regulate the functions. Hall with their heads crammed with false doctrines, instead of true ones, and without being prepared for this, you yourselves may share the same fate. All this perplexity will be destroyed by public examinations before competent tribunals; and it is the duty of the Legislature to act upon your declaration to-night, and to adopt your prayer. (Hear, hear, hear.) When your perather than such as are perplexing, and tition is presented to the House, and the calculated to confuse the mind of the can-didate. Only imagine, if a tricky ques-tion were proposed to him/what a simulta-plained to them, I am very much deceived tion were proposed to him, what a simulta-plained to them, I am very much deceived neous and overwhelming exclamation of in- if you will find in the House of Commons dignation would be ready to burst from one one man who will dure to assert that the or two thousand tongues (Hear, hear, hear.) prayer of your petition ought not to be granted. (Cheers.) But, gentlemen, the House does not meet for a fortnight, and I In the course of my duties as a journalist, I should be uncommonly glad if, before you have often witnessed the streaming eye and break up to-night, just at the lag end of the torious and deserving student, is calculated framing for a new University, and it has been the practice for the King to evereise young men who have expended their last the royal prerogative in the Privy Council their pockets were empty, but when they the practice to make known the conditions have expected that their heads were full of of charters before they are actually granted, information to enable them to pass; and and when they are granted, it is almost too yet they have been treated with insolence late for you to know them. I am anxious, and contempt before the Courts of Exam-therefore, that the Chancellor of the Exiners, their hopes have been blasted, their chequer should be made acquainted, offiexpectations wholly falsified, and at the cially, to-morrow, with your proceedings very moment when they hoped that tri- this evening, because it may have a most umph would crown their exertions, and that important effect in governing his mind rethe object of their emulation was achieved, lative to the conditions of the new Univerthey have been sent back to linger out six sity Charter. (Cheers.) I think the sugor nine months more, or they have alto gestion is a very useful one, for the mogether abandoned the profession, and their nopolists say that the Chancellor has delegated some of his authority in the mat-(Great cheering.) Gentlemen, you would be ter to other parties. I will not name those undeserving of that reputation which I parties, but I do think that the subject is of know ought sooner or later to be conforred so much national importance, that nothing upon you, if you did not use every exertion should be done with regard to it except to remove from yourselves and your fellow publicly. You have a right to know what is students throughout the whole empire, the going to be done on this occasion. The cause of so much undeserved calamity, de- whole of the community is concerned in it, gradation, and misery. (Cheers.) What have and, therefore, if some one on your behalf the Examiners themselves to say upon this were to communicate with the Chaptellor to state why the student was unsuccessful. rests, not be removed for a long series of 8 Apothec

act, but when I balance the good against in all directions, and that the great body of the former kick the beam with a vengeance. Herr, Reer, Acer.) Whatever may have been the virtues of that body, and whatever may have been the extent of its infirmities, its days, as has been truly stated to-night, are numbered, and you are about to be emancipated from as odious a thraldom as ever existed over a body of intelligent men. (Long protracted cheering.)

Mr. Liston, being loudly called for, presented himself, amidst great cheering, and said-Gentlemen, I feel highly flattered by the kind reception you have given me this evening. I came here only as a spectator of your proceedings. I am a mere tyro in medical politics, but you will find in me a stanch supporter of medical reform. The present system does not work well, and I hope that in a short time we shall have a much better one in its place. (Great cheering.)

The CHAIRMAN then put the resolution last proposed to the meeting, and it was carried without a dissentient voice.

Mr. Cutien proposed the next resolution. After the cloquent manner in which they had been addressed that evening by the friends of the student, there remained little they had assembled with a view to remedy. However, he would make a few remarks, and a few only, previous to reading the resolution. He conceived that they could not do a better thing than arrange plans for the correct guidance of their future endeayours. Every school should send its deputy to a central association, -one selected from among the rest, who was competent to take upon biniself the duty of representing the interests of his fellow students, until the time arrived when the Government might provide a better scheme of medical government, and candidates for licenses to practise were fairly treated by an examining board. This change, he hoped, would not be long before it was achieved, for while they (the students) had much in their own power, they had able advocates amongst their seof the greatest ornaments of his country. (Cheers.) The provincial students could not yet have been made acquainted with the proceedings of the students in London, but it would be right to take into consideration as a future securing the propriety of inviting After the participate in the association which he was absent to propose they should from mocing to the suggestion that a deputation he was absent to propose they should from should be formed of twelve gentlemen to the supportant of the leading to the suggestion that a deputation should be formed of twelve gentlemen to the supportant of the leading the evening, wat on the Chancellor of the Exchequer, to present the resolutions of the evening, professional than the proposed that there would be an exactly described that might emanate from the land promised to head the deputation (cheers); and it remained for the meeting schools, are party disconting as professional transfer that the support of the suggestion that a deputation should be formed of twelve gentlemen to present the resolutions of the evening, professional transfer to the formation of the evening.

the wil, I am afraid that the last makes the students would unite in effecting the regeneration of the medical profession.

(Cheers.) He begged to propose
"That for the better protection of the
interests, and the mutual support of the rights, of the students in medicine generally, of this empire, a great central association be formed, which all medical students be invited to join."

Mr. Wiblin seconded the resolution.

Mr. DRUITT would not have troubled the meeting again, had it not been for this resolution. (Cries of spoke, spoke.) He had not spoken upon this resolution, which he conceived was founded in error. (Cries of "Ok.") They were directed to choose a tribunal from among themselves, to examine themselves: how could they choose a competent tribunal? Would the public respect their decision more than they would that of the Hall? Certainly not; therefore he con-sidered the resolution altogether irrelevant to the present meeting. (Cries of " You're quite wrong."

Mr. CROOK said, that no doubt the meeting would consider him presumptuous in attempting to make any reply to some observations of Mr. Wakley, yet be begged to do so for a moment. That gentleman had been to be said on the nature of the abuses which kind enough to compliment him upon his general good expression of countenance. That was very kind of him. He would conscientiously return the compliment, for if ever there was a man whose countenance portrayed universal philanthropy, Mr. Wak-

ley was that man,

THE CHAIRMAN! You must be good enough, Sir, to keep to the subject for which we are assembled.

Mr. CROOK. I am going to speak in reply to Mr. Wakley. Mr. Wakley condemned the fourth Resolution. (Cries of " No. no. he supported it." "It was carried." "There was only one dissentient.") Mr. Wakley did not support the Resolution. (Cries of " Yes, yes, he did." and " Chair, chair. Mr. Crook then retired, and the Resolution was put to the meeting, when, after the show of hands had been taken, the gentlemen niors, and one amongst them who was one from King's College on the platform being dissatisfied at the smallness of the minority. it was again put to the vote, when ten hands were counted against it, and the Chairman declared it to be carried, with a few dissentients, amidst loud cheering.

Mr. PAINE called the attention of the

suggested that a gentleman should attend we deem it our duty to give it the most from each school which chose to send a representative. The resolution was then carried.

Mr. Swith proposed, and it was seconded by Mr. Spanow,—" That the resolutions passed this evening, be published in the Morning Chronicle, The Times, The Lancet, and The Medical Gazette."

The Chairman was then deputed, in the name of the meeting, to write to the Chancellor of the Exchequer, to know when he would receive the deputation.

The thanks of the meeting were then unanimously voted to the Chairman for his able and impartial conduct in the Chair.

Mr. MEADE returned thanks for the vote, and congratulated the meeting upon the proceedings, and the unbroken steadiness of conduct which had distinguished them. They had proved that they could dispassionately discuss their wrongs, and were capable of using great moral force in re-They had taught the Apodressing them. thecaries' Hall a lesson that night which it had never expected to receive from the students of London. The words, " a marked man," were in common use, when speaking of some candidates at the Hall. No more men, he believed, would be " marked" at that institution. Again returning them his most sincere thanks for the honour they ad conferred upon him, he hegged to say that the meeting was dissolved.

Several rounds of cheers were then given

for Mr. Warburton, Mr. Wakley, Mr. Liston, and the Chairman, and three grouns for Mr. Ridout, and some other examiners at Apothecaries' Hall, and the immense as-

sembly quietly separated.

We have been informed that nearly eighteen pounds were collected at the door of the great room, from students, in sixpences, towards defraying the expenses of the meeting, the advertisements, &c., when the amount received being so ample, the re-mainder of the assembly entered without the necessity for contribution; and the Secretary acquaints us that a letter was forwarded on the next morning to the Chanceller of the Exchequer, requesting that the Right Hon. Gentleman would appoint a time, as suggested, for receiving the deputation.

LATE ELECTION AT THE BICHMOND HOSPITAL, DUBLIN.

To the Editor of THE LANCET.

Sin,-An anonymous communication perporting to be " a statement of facts," respecting the appointment of a surgeon to the Richmond Surgical Hospital, has appeared in your Journal of the 9th inst.

As this statement (so far as we are conperned) is devoid of the alightest foundation, becoming in spery

direct contradiction under the responsibility of our signatures :-

lat. We received no list of candidates from the Government, nor from any other

2nd. We never presumed individually, or as a body, to approach the Government on the subject of the appointment in question.

3rd. Our communication with the Covernment was limited to our giving an official answer to an official inquiry respecting the fitness of Mesars. M'Donnel and Adams to perform the duties of surgeons to the Richmond Hospital.

We have the honour to be. Sir. Your obedient servants, PHILIP CRAMPTON. ABRAHAM COLLES. RICHARD CARMICHAEL.

Dublin, Jan. 12, 1836.

DR. GRORGE GREGORY has just been appointed Professor of Materia Medica, at King's College, Strand. Dr. GRORGE GREGORY proved on a certain occasion, before the Westminster Medical Society, that he was pre-eminently qualified as a professor, and the circumstance that he has been poked into one of the empty chairs of King's Cotiege, proves that his claims have not been forgotten. Verily this institution is in a hopeful state.

It is more than likely that this worthy gentleman would have obtained the post, had there been a dozen candidates, because he was owed something by his party, had not yet been paid, and could at no other time be paid so cheapty. However, the fact is, that Dr. GREGORY was the only candidate. Dr. WEBSTER had previously been officially informed by Mr. Mayo, on the part of the managers of this liberal institution, that "he was not eligible to become a " candidate, because he was a mamber of the " established church of Scotland;" and we may here take the opportunity of adding that Dr. Ritchis, one of the ablest and most scientific men in this country, was also informed some time since by the professors of King's College, that " if he would change "his religious creed, and become a me
"id: the Charch of England, he then
"id: the Charch of England, he then
"id: the Charch of England, he then
and again; other condition.

Dit by such men as these that the

ints of King's College have allows selves to be made tools in the op their fellow students in London wit few days. Oh, shame? The it party should have fallen short of a Respecting Dr. Wateren, we The in

his late conduct, in triguities in the institution rities in the institution in

THE LANCET.

Vol. 1.) - LONDON, SATURDAY, JANUARY 30, 1836.

LECTURES

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine of Paris.

ENCEPHALITIS.

GENTLEMEN .- Encephalitis consists in inflammation of that part of the cerebrospinal axis which is contained within the cavity of the cranium. Although within the last few years considerable progress has been made in the study of inflammation of the brain, and within that period the science has made a rapid march, thanks to the labours of MM. LALLEMAND, ROSTAN, BOULL-LAUR, and others, yet we are compelled to confess, that in spite of the knowledge which we have derived from these authors. our ideas on inflammation of the nervous centres are not yet very clear or precise.

The difficulties that beset us in the study of disorders of the nervous system in general, are peculiarly great with respect to the brain, where inflammation of the nervous pulp is not characterized, in the same clear and decided manner, by the production of constant and unequivocal symptoms, as inflammation of other important organs, the lung, for example, or the abdominal viscera. The difficulty of appreciating the symptoms, so as to arrive at a precise knowledge of the seat of the lesion, is also increased by the circumstance that we cannot always separate easily the phenomena depending on actual inflammation of the cerebral substance, from the symptoms which accompany irritation or inflammation of the membranes. Hence a great cause of obscurity,a result which, from the nature of the relation between the nervous pulp and its neurilema, it is often impossible to obviate. Besides, inflammation of the substance of the brain is not a disease so common of occurrence as you might be led to imagine from the accounts of certain authors. Encephalitis, as we understand the word, simple encephalitis, uncomplicated with any other disease, is, in reality, a rare affection. You may spend several months at the hospital without having occasion to witness a case: in short, inflammation of the substance of the brain or spinal marrow cannot be considered as a frequent disease, except by those who, too readily confounding similar appearances, have described every anatomical lesion of the cranial contents

The present Lecture supplies a deficiency which exists in Lecture IV, published in our Number for Dec. 19. In order to secure the n for bearing the Discourage of the gradients to whee care the of the lectures was confided prothe professor a special card of rels of the amphitheatre. But on which the lecture on was delivered, this precaution succeeded in grati-

sors, that to report verbatim was not possible. Anxiety to publish the lecture with unquestionable accuracy, subsequently prewented us from giving place, in their proper form, to the brief notes then taken, but we now place before our renders a correct rement of the lecture. It forms the commence-ment of M. Audral's discourse on encephalitle, and may, we believe, be read with as mexpected influx of much advantage now as in an earlier numher. The affair is simply one of transport see themselves close tion, which no foresight or precaution could mevery comfortable have prevented, but which every care has mey, and so since been taken to render immaterial to the profes- the perfection of the course.

denominate as "myelite," all acute lesions of the medulla spinalis.

Symptome simulating Encephalitie.

To characterize inflammation of the nervous centres' presiding over animal life, we must have a certain assemblage of symptoms, into whose particular history we shall presently enter in a manner calculated, as far as lies in our power, to render the subject complete. We say, an "assemblage of symptoms," for if the practitioner should found his diagnosis on one or two leading symptoms alone, delirium, or convulsions, for example, he may fall into the gravest errors. Thus we should avoid confounding with encephalitis the nervous symptoms which present themselves in the commencement or progress of an enterite folliculeuse (typhus fever), at the breaking out of an cruptive malady, and in the course of several other disorders. The greater number of children who have been cut off by an acute disease, present symptoms of disorder of the nervous centres, delirium, &c.; yet we find no reason for believing these nervous phenomena to be conpected with encephalitis. The substance of the brain is healthy; we discover no trace whatever of inflammation within the cavity of the cranium, and are compelled to regard the accidents alluded to as the effect of sympathetic reaction.

Again, towards the termination of several chronic diseases, when the patient has been worn out by long-continued suffering, the nervous system is more or less disturbed, and we observe various cerebral symptoms, yet we are not qualified in attributing them to inflammation. This is frequently seen in cases of pulmonary consumption, where the patient becomes delirious and agitated a few days before death; yet the brain is rather less injected than in the normal state. The contents of the cranium are found in a condition of anemia rather than of hyperemia or inflammation, a circumstance which is certainly important in a therapeutic point of view. In typhus fever, whatever may be its form, no matter with what degree of intensity it may present itself, the nervous system plays an extensive part in the production of the functional derangements observable during life. There is disorder of the brain as well as disorder of the digestive tube, but we cannot affirm that inflammation necessarily accompanies or gives rise distinction when we come to speaked to the symptoms in either system. We may have a typhoid delirium without encephalitis, as we certainly may have a typhoid diarrhosa without inflammation of the mucous membrane of the intestinal canal.

A comparison of the functional disorders yond all doubt that the functions of the their may he deranged, or even profoundly variable, whether

under the name of "encephalite," or who | modified, without any inflammation of the nervous pulp. Thus, nervous traumatic delirium, the derangement of the intellect known by the name of " delirium tremens, &c., are not symptomatic phenomena of an internal cerebral inflammation; far from it; they exist in most cases with a discoloured state of the nervous substance. Instead of yielding to, they are aggravated by sanguineous depletions, and are in many iustances, as you all know, removed as it were by enchantment, under the influence of opium in elevated doses, a remedy which is fatal in inflammation of the brain.

Encephalitis, or inflammation of the contents of the cranium (meninges excepted), differs in several respects, according as different parts of the brain may be affected; it also varies according to the degree of intensity with which inflammation may exist: hence there are

Various Distinctions of the Disease.

In relation to the first head, we may subdivide it into three species. First : Inflammation of the cerebral hemispheres cond: Inflammation of the central medullary parts, viz., the septum lacidum, fornix, and inferior part of the centrum ovale. Third; Inflammation of the cerebellum. Again, with respect to its intensity, encephalitis may be distinguished, like many other inflammations, into acute and chronic encephalitis. Acute encephalitis may be general; the whole mass of the nervous centres being attacked at the same time; but this extensive disease is excessively rare: it may be partial, confined to a small portion of the nervous substance; this is much more generally the case One hemisphere of the brain may be attacked, while the other remains free from any inflammation, or only a small portion of the hemisphere may be implicated in the diseaso; in a word, encephalitis, like congestion, may occupy any part of the cerebral mass. We explained fully the varicties of degree and sent, when treating of cerebral hyperemia, it is unnecessary therefore to repeat details into which we have already entered.

I have distinguished inflammation of the brain into three divisions, seconding to the scat of the affection, viz., tilliammation of seat of the american vary americans of the hemispheres of the entertum; of the central white parts; and, finally, ledament tion of the cerebellum. This is a necessary toms; however, as the anatomical ters are the same, no matter what being the nervous centres may be the sest of the disease, we shall now procood to thatch a general view of the murhid anatomy of encephalitis.

stance of the cerebellum. The first and most remarkable character is an injection. more or less well marked, of the cerebral pulp. The gray and white substance evidently receives more blood than in the normal state; it is more red than natural, tumeded, and sensibly more firm, than in a healthy brain; these appearances are, as you see, also common to congestion. Can we distinguish, with any degree of certainty, whether this abnormal injection is in fact truly inflammatory, or dependent on a simple hyperemy of the cerebral substance? No: simple congestion cannot always be distinguished from this, the first stage of inflammation; it even passes, by insensible degrees, into the latter, and it is often quite impossible to say where the congestion ends, and the inflammation commences. This is not peculiar to the brain, although it is, perhaps, more difficult to distinguish the two lesions, of which we now speak, in the brain than in any other organ. You will find the same difficulty of separating the two conditions in thoracic affections. How often are we at a loss to decide whether a portion of lung is simply engoue and con-gested, or actually inflamed! The abnormal coloration, which distinguishes the first stage of cerebral inflammation, is very various in degree. Sometimes the injection is bright, and the small vessels are excessively distended, even so far as to allow here and there effusion of blood in small quantities, which mass. In other cases the injection is less striking, and when the nervous substance is sliced off, we merely observe a greater number of bleeding points than usual; in the nervous substance sometimes presents a kind of tumefaction depending on the increased afflux of blood to the part; and this turgescence may be carried to such a degree, as sensibly to angment the volume of the cerebral hemispheres: this is a circumstance well worthy of attention. The nervous pulp, submitted to the effects of an irritating cause. Seconds time fied, with wonderful spublic and the cerebral bemispheres, too large for the inclusive osseous case in which contained, become pressed upon, more on this compression of the hedrosis substance than on its irritation. This is the reason why the brain constantly tests to escape from the cavity of the skull, and form a true abscuss; however, encysted with a second with the cavity of the skull, the first stage), the mollecules of parulent and form a true abscuss; however, encysted abscuss results much more frequently from parity of the premote the chronic than from acute inflammation or the cerebral substance. Sometimes the feature of the cerebral substance.

occupy the convolutions, the deeper parts of diseased hemisphere is evidently more de-the cerebrum, the mesocephale, or the sub-voloped than the one on the opposite side, to which irritation has not attracted an increased quantity of fluid. The convolutions appear pressed closely against one another, packed as it were too tightly in the cranium, and the surface of the brain no longer presents the anfractuosities by which it is so characterized in a normal state. The inflamed hemisphere, tumefied in all points, and increased in volume, tends to occupy more space than it should do, encroaches upon the opposite portion of the brain, and thus produces a variety of accidents all de-

pending on mechanical pressure.

In the early state of inflammation, the cerebral substance has probably already acquired a tendency to become disorganized; however, the only lesions we observe, are the two just mentioned, injection of the nervous pulp, with tumefaction, and a slight increase of the normal consistency; but when the inflammation has lasted for a certain time, we observe characters of a less equivocal nature. The inflamed nervous tissue undergoes a change of consistency. It has lost much of its resistance, is noft. and gives way under the least pressure. This is a general law of pathological anatomy, affecting all organs as well as the brain; hence ramollissement, or softening of the brain, may be an effect of inflammstion, and when it is the consequence of acute inflammatory action, the ramollissement is always accompanied with more or less injection of the cerebral substance. we find disseminated through the inflamed chronic inflammation of the nervous pulp, we also have more or less ramollissement, but instead of congestion, or increased vascularity, we generally find an infiltration of purulent matter which has broken down, and, short, the colour may vary from a deep red as it were, dissolved the cerebral substance. to the most delicate rose. However the in- Acute inflammation of the brain may also jection may vary in different cases, we never terminate by suppuration; indeed, we may find this anatomical character alone; thus say generally, that every inflamed tissue has a tendency to generate pus, and that the brain is not exempt from the general law. Hence the presence of a purulent fluid is one of the best proofs we can have that inflammation has actually existed in the nervous tissue, abstraction being made of certain rare cases where its presence in the brain results from what has been called "abscess by metastasis."

The pus exists at first in the form of infiltration; the cerebral substance is then intermixed with a quantity of purulent secretion, which every day renders more and more friable, soft, and at length almost liquid. In proportion as the disease advances (if the patient happens to survive

sion is confined to a single point of the or merely the soft parts which coversthe brain, and we find only one abscuss; at osseous parietes, and it is by no means rare other times, various portions of the hemi- to see encephalitis developed in consequence apheres contain circumscribed collections of of a simple wound of the hairy scalp. There pus. Ulceration is another form by which are other cases where the bones, extended inflammation of the different organs may externally, appear perfectly sound and interminate. Do we observe this in the brain? tact, but the internal table of the cranium Yes; the observations of Scouttiten and is fractured, and the periosteum more or less ABERCROMBIR leave no doubt but that in- injured, and inflammation extends from flammation of the nervous pulp may give membranous lining of the skull to the sub-rise to ulceration of the brain; but the dis-stance of the brain. ease is one extremely rare.

so well established. It seems, on the con-pointed, by projectiles, &c., which are lodged trary, doubtful that this termination of in-in the nervous pulp. A projectile, by its flammation has ever been observed in the rapid passage through the cerebral sub-brain, although cases have been reported in stance, may determine inflammation, with-the "Memoirs" of the old Academy of out remaining in the brain. At other times Surgery, and M. LALLEMAND has described one in his excellent treatise on "Diseases nervous pulp immediately surrounding it, of the Brain." But the lesions we have now irritated by its presence, takes on an inflammentioned, are not the only ones which may matory action. However, these different present themselves in connection with in-bodies are far from producing in all cases an fammation of the cerebral substance. In a immediate effect. It is not rare to see them great number of cases the membranes beremain for a certain length of time in the
come engaged in the disease, and are in
framed in the same way as the pleure so matory symptoms. Thus, in some cases, a often inflame when the pulmonary tissue is musket-ball has remained several months in attacked by pneumonia. It is this affection the midst of the cerebral substance without of the meninges which produces the various producing any accident whatever. At a morbid effusions of pus, serum, or a san-later period, well-marked symptoms of enguineous fluid, that we frequently find be- cephalitis manifest themselves, death entween the membranes, or in the ventricular sues, and on examining the brain, we find cavities, and which give rise to important the projectile surrounded by an abscess, the modifications in the symptoms of this dis-effect of inflammation. case.

Having thus briefly pointed out the leading anatomical characters of encephalitis, let us turn to a consideration of the

Causes which may produce Encephalitis.

These are often the same as the causes of congestion, for the one may pass rapidly into the other; however, there are certain influences that act more specially in the production of encephalitis. In the first rank, we must place external violences applied to the region of the head, -an order of causes, be it remarked, that plays but an insignificant part in the production of cerebral congestion. Thus blows, falls, &c., in a word, any severe injury of the head, may give rise to the development of inflammation within the cavity of the cranium. It is not necessary that the external violence be applied immediately to the head; in some cases a severe fall, even when the individual has alighted on his feet, is sufficient to produce a commotion of the whole body, to such an extent, that the brain suffers a kind of concussion, which at first seems of little consequence, but sooner or later is followed by true inflammation of the cerebral substance. Wounds of the head may be accompanied or not with a breach of continuity. In the former case, the solution of continuity affects the bones of the cranius, train; thus, for the continuity affects the bones of the cranius, train; thus, for the continuity affects the bones of the cranius, train; thus, for the continuity affects the bones of the cranius, train; thus, for the continuity affects the bones of the cranius, train; thus, for the continuity affects the bones of the cranius, train the continuity affects the bones of the cranius.

Sometimes encephalitis is produced by The existence of gangrene is by no means the action of foreign bodies, either blant or

We may discover the cause of encephalitis in certain chronic affections of the brain itself. Thus in some cases an apoplec. tic cell becomes a cause of inflammation. acting on the same principle as a foreign body, and exciting irritation, or true inflammation, in the surrounding nervous pulp. Various accidental productions have a similar influence, and should be ranged under the same category, - cancerous tumours, for example, scrofulous tubercles, especially in children who are at the same time affected with tubercular disease in the other great cavities; inflammation becomes developed around those tubercles; in many cases, indeed, it is chronic, and gives rise to few well-marked symptoms, but in others the inflammation is positive, acute, and terminates the patient's life, for death here cannot be attributed to the presence of tubescular masses in the centre of the nervous system, for these masses existed perhaps for years, without producing any grants cidents. It is to inflammation that most attribute the fatal result, and, sect ingly, we find a greater or less portion of the

quently deposited in the substance of the terminated in the symptoms of cerebral inpia mater; as they become developed, they flammation. There is no organ of the penetrate into the substance of the brain, body whose inflammation may not occasion-, irritate the convolutions, and by their pre-sence determine inflammatory action, ex-litis, so intimately are the nervous centres actly in the same way as any other foreign connected with all normal phenomena of body in the brain.

of encephalitis, certain affections of the bones, or function in each part of our system. the skull, as caries, exostosis, &c.; and However, we must again warm you against the bones commonly diseased, we the danger of generalizing this proposition may mention the petrous portion of the term too extensively,—against the error of beporal bone as one most frequently affected lieving that every derangement of the nerwith caries; hence the reason why children vous centres which manifests itself during subject to purulent discharges from the in- the course of acute or chronic inflammation. ternal car, are so often attacked, in the end, depends upon actual inflammation of the with inflammation of the brain.

Gentlemen, you all know that the nertion of the middle chamber is not without tions. some influence on the production of cerebral inflammation; for the organ of smelling, inflammation of the masal fosse, particularly when it extends upwards to the frontal siunses: it is not an uncommon thing to see ; an intense and mortal inflammation of the brain develop itself after the extraction of a benign or cancerous polypus of the masal fosse. For the skin, inflammation of the ASCITES integuments of the face, of the scalp, the different forms of crysipelas which so frequently attack these parts, may determine inflammation of the brain. However, you are not always to conclude that if a patient labouring under crysipelas of the face be seized with agitation and delirium, he must! of necessity have inflammation of the brain.

Salah Merek

the living body, and so readily are they in-We must also reckon amongst the causes fluenced by every derangement of structure brain itself.

The act of dentition in children is someyour expansions distributed to our several times an exciting cause of encephalitis; irriorgans of sense, communicate directly with tation is propagated from the nervous pula different masses of the cerebral substance; of the tooth to the central organ; however, hence it is not irrational to expect that we may remark, that congestion is more irritation or inflammation of the sentient frequently the result produced by difficult extremity of the nerve should produce a dentition than true inflammation of the corresponding lesion of the central organ; cerebral substance. Finally, in relating a this is fully confirmed by experience. Thus, history of the causes of encephalitis, let us with respect to the causes furnished by le- observe that it may originate in over-action sions of the organs of sense, we have to of the brain, the organ of intelligence; thus point out,—for the eyes, ophthalmiz, espe we have many examples on record, where cially the internal ones, as a violent irits this disease has been developed under the Ac.; for the ear, inflammation of the laby influence of excessive intellectual labour, rinth and internal parts; even inflammatof violent passion, and acute moral affec-

ST. THOMAS'S HOSPITAL

CLINICAL LECTURE

ON A CASE OF

SCITES AND ANASARCA, WITH DISEASE OF THE LIVER AND HEART,

DELIVERED IN THE SESSION OF 1936.

BY DR. ROOTS.

MARY ANN VAN HAGAN, aged 43, was This delirium is, certainly, in many cases, MARY ANN VAN HAGAN, aged 43, was connected with a disease of innervation, in-admitted on the 9th of July last. She dependent of inflammatory action, and is states that twenty-seven years ago she had merciy a sympathetic phenomenon; how- a severe attack of rheumatism, and well ever, in the uncertainty which reigns, it recollects at that time having suffered pain will parhable always be more prudent to act in the region of the heart, ever since which as if encephalitis really did exist; antiphlosshe has had a feeling of great oppression it describes the suppose of the supp that time. She has felt at times acute pain before of the great nervous trunks are in both hypochondria, extending to the sca-Therefore of encephalitis. M. Bourt - puls, and she has several times had jaundice, nave mentions a case of this kind; a strong Three years before she came into the hospital, she states that her belly began to enplained in the same and at length without resorting to medical aid. The cata-

and have not since returned. From that time, two years and five months before she came into the hospital, she ceased to be dropsical for seven months. Her belly then (two years and five months ago) began to enlarge, and in six weeks became as big as neys remaining still indolent, I considered it was at the time of her admission here. The legs too became very colematous very quickly after the belly began to enlarge, and quickly after the belly began to enlarge, and tapped on the 15th of July, and twenty-five they so continued from that period up to the pints of a yellowish serous fluid were Grawit time of her admission, when the report of off. It was after the drawing off of this her state was as follows:-The legs are fluid that the double bellows sound became very much swollen, and pit on pressure. considerably more distinct, perhaps, than it some of the veins are varicose; the abdomain is very much distended, and tense, and flammation followed the operation, but we the parietes are adematous; fluctuation is, at were enabled to ascertain, as soon as the the same time, very distinct throughout the operation had been performed, that the liver whole of the abdomen, and there is also was considerably enlarged. There was reasome tenderness on pressure. Her coun- son before to believe that the liver was distenance is pallid and auxious, her lip eased, because, upon percussion over the rather livid, the tunica conjunctiva of the region where you might imagine it would eye tiaged with bile, her tongue slightly project if enlarged, there was throughout so coated with a white fur, posteriorly and in much duller a sound on percussion than the centre, and but slightly red at the tip natural, that I did not hesitate immediately and edges. able thirst, and has some names, and occa- write upon her ticket-" ascites et anasional vomiting. Her bowels, she states, sarca, morbus hepatitis, et morbus cordis. are open. According to her account she After the tapping, I thought it right to passes two or three motions of a natural try mercury in conjunction with some dinappearance daily; urine scanty and slightly retic. I therefore ordered her three grains albuminous. Her respiration is laboured, of blue pill, one grain of powdered squill, and thirty in a minute, accompanied by and half a grain of digitalis, to be taken some cough. She also has some expectora- three times a day; and she was also directtion of thick mucus; her pulse 88, rather ed to resume the nitrate of potash, the spirit small, easily compressed, irregular, and in- of nitric ether, and the decoction of tatermittent. On applying the stethoscope razacum. Under this treatment, for the to her chest, mucous and sibilant rattle first ten or twelve days, there appeared to were distinctly heard over the different be some improvement; the month became sides of the chest, on either of the superior sore, the kidneys secreted more urine, the portions, whilst the respiration was indis- legs were much less swollen, and the breathtinct, and the resonance very dull on per- ing was freer. In conjunction with the than natural, and there was also some heaving and a dwelling of the organ against the parietes at each systole of the ventricles. The natural sound of the heart was deadened, and the state of the pulse, as you might expect, was irregular, and it was occasionally intermittent. There was, at the same time, a loud bellows sound distinctly heard at each systole. At first this bellows sound, - which, I confess, was not, perhaps, examined with sufficient accuracy in the first instance, or perhaps it was lost in the sibilous state of the bronchial tubes .at first it was thought to be only single, but very shortly afterwards it was discovered that the bellows sound was double.

For the first six days after her admission into the hospital she was placed upon milk diet, and the effect of diarctics was tried. These diuretics consisted of digitalis, squills, scetate of potate, the decoction of taraxacum, with some spirit of nitric ether occasionally,

menia ceased when she was 40 years of age, | and, at the same time, an occasional purgs tive of compound powder of jalap was given. At the end of a week no decrease of this symptoms had taken place, and as I was quite sure that such an imments body of fluid was not likely to be absorbed, the kids it right to direct the operation of paracen-Accordingly she was tesis to be performed She complains of consider- upon her being taken into the hospital to

cussion at the lower part of both sides, above plan of treatment, diminishing the Upon examining the heart, that organ was quantity of mercury, and merely just susfound to beat over rather a larger space taining its influence, the iodine ointment was directed to be rubbed in over the abdomen, in the proportion of a drachm of iodine to an ounce of lard, night and morning, a drachm of such compound at each friction. This, however, produced much irritation of the skin, and distressed her considerably, it was therefore omitted, and she was directed to rub in instead the ung. potass. hydriod. She went on pretty much in the same way, I should say of improvement, from after the tapping had taken place, to about the end of the first week in August, when the belly again began rapidly to fill, and I wished try small quantities of claterium. I so ingly directed the twelfth of a grain terium to be given, with a draching nit. ether. every six hours, but this proved too active, producing great the abdomen, purging her very violently, as exhausting her powers too much. immediately reduced to the twenty of a grain, and own in

quantity it acted too violently. It was then | 15th of November, somewhat more than than acted more on the bowels than she could bear, and ultimately it was reduced to the fortieth of a grain, still in combination with the nit. other, given every six hours. It then acted mildly on the bowels, but no in-crease of urine followed its use. Some dandelion was next given, in conjunction with the fortieth of a grain of claterium every six a pint of the decoction of taraxacum being directed to be taken daily. However, by the end of August, she was as large as before, although her general health seemed somewhat better than when she was admitted.

On the 3rd of September she had become so large, and suffered so much inconvenience, that it was again determined to perform the operation of paracentesis, and Mr. South, who operated on the previous occasion, operated also now, but only three pints of a somewhat ropy fluid were withdrawn, and there appeared to be at last, after the flow had crassed, some substance pressing against, and entirely closing the orifice of the canula, which was withdrawn, an elastic hollow bougie being passed in instead, but with no better success. A small quantity of blood escaped from the wound.

Now, after this second tapping, freely applied, peritonitis supervened, and was met by the ordinary treatment, - leaches, so long as there was excessive tenderness over the abdomen, and calomel and opium, given until the mouth was again sore. When the inflammatory action had subsided, palliative treatment merely was again had recourse to, and she returned to the use of digitalis, nit, ether, and the taraxacum. Still, however, there was, from time to time, pain in the abdomen, which rendered it necessary, when the mercury was left off, to recur to leeches, - even so late as the 2nd of October, soon after which time she became gradually worse, the dropsical symptoms rather increased, the dyspnæa became more violent, attended with excessive palpitation, the pulse excessively feeble, the extremities cold, and the general debility so great that it was absolutely necessary to resort to stimulants of almost every description, -wine, brandy, ether, porter, amnionia; and as there appeared to be periodical spasmodic attacks of dyapmon, Mr. STONE, or Mr. WHITTIELD, prescribed some ethereal tincture of lobelia affata, which considerably relieved her, and this she continued to take up to the se of her death, in somewhat increased reo that I think at last she took as che 16 or 18 minims of the tineture three or four times in the twenty-four hours. in conjunction with, perhaps, a drachm to sech loss, of the spt. wth. sulph. comp.

mened to the thirtieth of a grain, and even three months from the time of her admission.

Now with respect to the diagnosis. There was no doubt whatever that general dropsy existed, with effusion into the peritoness cavity, and an anasarcous state of the extremities and trunk. Her face was occasionally swollen, the lip somewhat livid, the tunica conjunctiva suffused with bile. The dalness on percussion over the region of the liver, indicated disease of that organ,-its enlargement after the tapping proved this to be the fact. The occasional pain in the abdomen evidenced that chronic peritonitis had existed. The mucous, sibilant, and sonorous sounds in the chest, showed chronic inflammation of the bronchial tubes. The entire absence of clear respiratory murmur at the lower part of the chest, and the dulness on percussion on either side, indicated effusion. The stethoscope made the disease of the beart equally clear; I was quite sure that the left ventricle, and, indeed, I believed that the whole heart was enlarged, for it beat over a greater space than usual, as proved by its prolonged impingement against the parietes of the chest. The parietes of the heart and the left ventricle were shown to be increased, by the deadened sound of the heart. I believed disease of the valves to exist, in consequence of the bellows sound. I remember remarking, before hearing the double bellows sound, to some gentlemen present, that, in consequence of the intermittent pulse. I believed the mitral valve was the seat, more especially, of the valvular disease. Indeed, according to my own experience, whenever there is sufficient disease of the mitral valve to prevent it from thoroughly closing the orifice, you have more or less intermission of the pulse, which I do not find to be necessarily the case where there is merely disease of the aortic valves. When I heard the double bellows sound, it did not at all alter my opinion with regard to the discase being seated in the mitral valve; on the contrary, it seemed rather to be strengthened, for . I conceived that some impediment existed to the flow of blood from the auricle which gave the first sound, and that when the ventricle contracted, a portion of the blood regurgitated into the auricle, and thence probably arose the second sound.

With respect to the prognosis, it was quite clear, from the state of the heart, and the presumed state of the liver,-a state which had existed more or less for three years, and especially for two years and five months, - that recovery was not to be expected. One could only attempt to relieve her to some extent, and for a time we succeeded. But now comes a curious point, which renders this a most interesting case as regards the diagmosis, because such a thing is as likely to in the state of th and perhaps some animadversion. I was and in the living membrane of the sorter quite certain,—the fluctuation was so evi- there appeared to be several depositions of dent, -upon first examining the patient, that | atheromatous matter in small patches. very considerable effusion existed in the immediately upon opening the abdomen; peritoneal cavity,—that there was ascites, a considerable portion of serous field escaped. At the first tapping twenty-five pints of There was fluid also in the peritoneal cavity. fluid were withdrawn, and when she again The liver, the stomach, and the omentum. became nearly as large as before, and was were adherent to the abdominal and costal tapped a second time, only three pints came parietes, and were attached, parity to the away. And why not more? Why, because upper arch of the colon, and parily to come of the fluid must been have contained of the superior convolutions of the final in a cyst. But that would seem to contra-intestines. Now there also adhered slightly dict my diagnosis. Was I wrong? Had to the abdominal parietes, and the under I mistaken ovarian dropsy for dropsy into portion of the arch of the colon, a dense, the peritoneal cavity? I was quite sure smooth, pellucid nembrane, about three that I had not committed this error, though times as thick as ordinary scrous memthere might be an ovarian cyst containing brane, which, passing in front of the small fluid, as well as fluid in the peritoneal intestines, appeared to be attached to the cavity.

were considerably hypertrophied. This exactly corresponded with the state of her pulse. There was none of that violent hamdilatation of the ventricle equal to the hyopaque and whitish, throughout almost the whole extent, excepting a portion at its posterior part of about the size of half-acrown, which was redder than natural, and upon which there were small patches of abrasion or ulceration. The greater portion of the lining membrane of the left ventricle was also opaque, and whitish, more especially near the sortic valves. The tricuspid valve was not changed. The left suricular opening, when viewed from the suricle, resembled a small semilunar chink, rendering the action of the valve imperfect, and this opening was but just large enough to admit the point of the little-finger, which then felt an osseous or calcareous deposit. The other portions of the mitral valve were indurated, and converted into almost carti- junctiva. laginous substances. The aortic valves were thickened and uneven, but still were cape—adherent. I have always told you that I am ble of effectually performing their functions, not ashamed to contact my the lightness.

brim of the pelvis and pubis, extending The post-morten examination I think solved laterally on each side of the line, forming a the difficulty. Long-standing slight adhersac, or pouch, filled with scrum. On a sions existed at the upper portions of each more minute examination, Dr. BARKER lung. The right side of the chest contained found that this false membrane passed over about two pints of fluid, the left, about a the bladder and uterus, between it and the pint, containing no flocculi, and not at all rectum, and was then reflected upwards, tenacious. The lungs crepitated in almost posteriorly, and, passing over the lower every part, but they were very considerably portion of mesontery, joined the upper porcongested, almost throughout, but in the tion of the membrane, where it was attached very centre of the most congested parts to the colon. Much of this was capable of there were small portions of the lung which demonstration, but it could not be con-were perfectly natural. The bronchial pletely traced to the arch of the colon-membrane presented chronic inflamma-The convolutions of the small intestines tion, but no mucus. The whole of the adhered slightly, forming numerous small heart was enlarged; the serous surfaces sacs, filled with fluid. The serous memof the pericardium were perfectly adhe-rent, and both auricles were found con-places, as to resemble cartilage. The liver, siderably dilated. The right ventricle was which was much enlarged when cut into, of its natural size, the cavity of the left was of a brownish-red, muttled with spots, was somewhat diminished, and its walls here and there, of a yellowish brown, and very much indurated, but it did not break down on pressure. The gall-bladder was very small, but contained bile. The spleen was mering stroke which would have attended a somewhat enlarged; its peritoneal cont was quite as much thickened as, or perhaps more pertrophied condition of its walls. The than, that of the liver, and granuled, and, lining membrane of the left auricle was when cut into, the spleen was somewhat when cut into, the spleen was somewhat darker, and much firmer, than natural. The kidneys I did not think presented any evidence of disease, although from first to last the urine was more or less albuminous. The ovaries were somewhat enlarged.

The liver [presenting it] is considerably enlarged, and exhibits that mottled and hypertrophied condition which is frequently observed in intemperate people. This woman had drunk much. Its peritoneal surface is exceedingly thickened; the result of chronic inflammation, and so hard, that the point of my finger will not break three its surface unless I use my nail. You's expect, that with such a liver some would be absorbed into the system thus account for the yellowness of the co

I said that the pericardium was

penly, and now I am about to confess that | thing was felt pressing against the canula. I know of no symptom, general or local, by which you can positively say that total ad- was the result of inflammation, but it is quite hesion of the pericardium has taken place. If you place your little-finger in the opening of the valve from the left auricle, you will feel the bony or calcareous deposition which I mentioned, and, viewing the valve from which, from the thickening of the valve, renders it impossible for the valve to close erfectly. What has been the cause of this? Why it is the result of inflammation of the attack which she had two and a half years ago, as she well recollected having suffered pain in the region of the heart at that time, and ever since has experienced great uneasicartilage, with dyspness. She then had pericarditis, which of course ended in adhesion, and hypertrophy of the left ventricle; at the same time there was, no doubt, as most frequently is the case in acute periand valves, it can be no matter for surprise ! that the patient was the subject of bronchitis, effusion into the chest, and general dropsy. These are only the necessary consequences of such an impeded circulation.

The double bellows sound was, I believe dependent entirely upon the condition of uninterrupted flow of blood from the auricle into the ventricle, - the very narrow openbeing quite sufficient, in my mind, to produce the first bellows sound. Then the valve being unequal to close the sperture entirely, as soon as the ventricle had recrived the blood, and attempted to expel it into the norta, a portion, it is true, would go into the aorts, but a portion would necessarily regargitate into the auricle, whence, I believe, originated the second bellows sound.

With respect then to the reason why the fluid was not freely evacuated from the abdomen on the second tapping, I can only account for it this way. Mr. Sours tells that the two openings were perfectly marallel; exactly at the same height, but that he discovered afterwards that he had moria the first operation made his opening in the lines albs, but a little to the left side of it; in that case the whole, or nearly as much field as is ever drawn off by tapping, prior to the first ope p

Now it would almost seem as though this certain, from the size of the membrane which I have described, and from its density, that that membrane was not the result of inflammation between the two tappings. In the first tapping it is probable that there the ventricle, you will see it is so contracted to the first tapping it is probable that there as scarcely to admit of the point of was a larger quantity of fluid than in the the linger, though it can be passed farther second. If the sac existed in the first instance in that direction than from above. There | (at the first tapping), and it was a perfect is a sort of triangular or semilunar pouch, cut de sac, why did so much more fluid come away on that occasion? Why there must have been a less quantity effused into the abdomen at the second tapping, and perpericardium most probably following the haps some alteration in the position allowed the small intestines to press a portion of the sac against the orifice of the canula, and so prevented more fluid from coming ness and a sense of depression at the xiphoid away; for the moment the knife was plunged into the peritoneal cavity at the post-mortem examination, a large quantity of fluid escaped. I can only suppose that the pouch was not perfect, but had a comcarditis, inflammation of the internal lining munication with the general peritoneal of the heart. With such a state of the heart cavity, and that in the first operation the part in which the opening was made, favoured the discharge of all the fluid. Then some circumstances occurred by which the position of the sac was changed; perhaps the bowel fell down a little, and caused pressure against the canula. As two or three the mitral valve. The cortic valves had not pints were drawn off, a portion of the cyst It think, any connection with it. There would collapse, and might be driven against must have been two impediments to the the orifice, and when the hollow bougie was passed, the same result may have taken ing, and those projecting osseons or calca-, place. It is quite clear that this sac must reous deposits just within; either cause have existed at the first tapping, and that a regular organized membrane of such immense thickness could not have been formed between the two tappings. The circumstance reflects not in the slightest degree upon the operator. The same thing would have hanpened to any body. In point of fact, if it reflected upon any one, it was upon me, for my diagnosis, because I had asserted that she was suffering under ascites, that is, I felt confident that the fluid was contained in the general peritoncal cavity. The result of the first operation showed that I was right, but the second proved the existence of a cyst, as well; therefore, I was both right and wrong,-provided the cyst did really exist prior to the first operation, - did exist, I mean, as a perfect cyst, or a cul de sac,without any communication with the rest of

MORTALITY OF INFANTS IN ENGLAND.

By T. R. Educads, Esq., B.A., of Trisity College, Cambridge.

tion.

of five years out of one hundred born, and 4.6 annually out of one hundred constantly living under the age of five years.

If the number of the dving at annual intervals, under the age of five years, he known (as is the case in England', the law of mormined equally well in two ways, either by been complete, or if they had been defendenced by the number of higher on by the in an equal degree we should have observing the number of births, or by observing the number of the living under the 19.9 (the quotient of the above numbers) dying to the births is also given, and reversely. The English returns supply us with both these relations, which reciprocally confirm one another. I have already stated for each county of England the number of deaths under the age of five years, which occur annually for every 100 constantly living under the age of five years. I have now to exhibit the number which die before they complete their fifth year out of

the number dying under the age of five years during the same time. If the no deficiencies in the registered births and deaths, the number dying under five years out of 100 born would result immediately from dividing the latter by the former number ineglecting a small correction; not exceeding two per cent.. due to the births having been progressively increasing). The result thus obtained will be correct, even if THE very great diminution of the mor- the deficiencies are very considerable, tality of infants in England is one of the vided that the proportional deficiencies in most remarkable phenomena of modern the births and in the deaths are the same.

The existence of this diminution is if the proportional deficiencies are not the established upon principles universally ac-; same, the apparent may be reduced to the knowledged as true by all ancient and true result by means of a small correction, modern authorities on the subject of human respecting the amount of which there is mortality. It is, however, highly desirable room for very little difference of opinion that an extraordinary fact of this nature. There are only two estimates before the should be confirmed by a different, though public of the deficiencies in the registered not a more correct, method of avestiga-births and deaths, each of which points to the" same correction of any quotient ob-Public opinion is at present divided be-tween two tables of mortality, the "North-the registered births. According to Mr. ampton" and the "Carlisle." The public Rickman, the registered deaths are to be appears to have adopted these tables as increased nine per cent., and the registered true, and to have believed them applicable births twenty-three per cent, in order to to the English population in general, after obtain the true numbers. According to their respective authors had ceased to be-lieve so themselves. According to the twenty-seven per cent respectively. The Northampton Table, out of 100 horn, 464 iggs of four per cent, of the tutal registered die before they complete their fifth year; deaths are not specified; the true number and according to the same table, out of of the deaths, under the age of five years, 100 constantly living under the age of five are also to be increased two per cent, on years, 14.2 die annually. According to the account of the births having been pro-Carlisle Table, thirty-two die under five gressively increasing. According to Mr. years out of one hundred born, and 8.2 die Rickman, estimate, then, it may be said annually for every hundred living under the that the deaths specified as occurring under age of five years. In all England and Wales, the age of five years are to be increased during the eighteen years 181.30, there $\{4+9+2=\}$ fifteen per cent. According to died of females only nineteen under the age my estimate, the increase is 4+14+2=) twenty per cent.

In England and Wales, during the eighteen years 1813-30, the registered births of females amounted to 3,129,368, and the deaths specified, as occurring under the age of five years, amounted to 522,503. tality at this portion of age may be deter- If the registry of the births and deaths had tive in an equal degree, we should have age of five years. If the relation of the dying to represent the deaths under five years out to the living be given, the relation of the of one hundred horn. But, according to Mr. Rickman, the births are to be increased twenty-three per cents, and the deaths fifteen per cent; the quotient of the corrected numbers will then be 18.6. According to my cotimate, on thereasing the births twenty; seven, and the specified deaths twenty cent, the quotient will become 18.8, The corrected quotients approach so near \$ other, that they may be regarded as id call and it may be assumed as a fa every hundred born.

In the English population returns are rent results may be assumed as a few which all writers will agree; that the stated the number born in each country diminishing them are per conditionally the significant part of the signi

to state the apparent and not the corrected | cent may be deemed superfluous in a case Sambers for each county. The necessary where the apparent results are already thirty confection will not be exactly the same for per cent lower than any other results with every county; and a diminution of ave per which they can be compared.

Table showing the Counties of England arranged according to the Mortality under the Age of Five Years out of 100 Born; also showing the Proportion of the total Population of each County employed in Agriculture in 1821.

counties.	Dying 5 year of 196	s out	Persales dying an- nually put of 100 living under 5 years	Agricultural Popu- Jation per cent. in	COUNȚIEȘ.	Dying 5 year of 109	s out	fembes dying an- neally out of 169 lying ander 5 yrs	Proportion of Agri- cultural Population in 1821.
	м.	r.	213	A C		M.	F.	Femals neaffy living	F H
Cornwall	*15.3		3.12	38	Norfolk	20.8	18.3	1.40	49
North York	15.9	13.8	3.17	43	Essex	20.6	18.4	3.95	56
Westmoreland.	15.5				Hertford	20.6	18.4	4.03	52
Hereford			3.13	62	Monmouth?	21.4	18.6	3.51	43
Susacx	17.2			50	Cumberland		18.8		36
Wilts	16.5			52	Northampton		18.8	3.97	5.3
Suffolk	16.8			56	Durham		19.2	4.49	21
Dorset	17.0			49	Kent	22.0	19.8	4.75	36
Southampton	18.2			42	ENGLAND and \	22.5	19.9	4.56	34
ilourester				32	WALER			42,410	
Bedford	19.0			62	Leicester	22.9	20.0	4.38	3.5
Rutland	18.5				Huntingdon		20.0	4.21	62
Berk«	18.8				Worrester			5.21	38
alop	18.9				East York		20.1	4.66	38
Somerset	19.2				Cambridge			5.08	GL
Northumberland				27	Nottingham			5.37	35
Oxford	20.1				West York	24.2		4.57	20
Derby	20.0			34	Chester	23.8	22.2	4.78	35
Devon	19.0		3.96	41	Stafford	24.9	22.2	5.43	27
Bucks	20.6			58	Lancaster	28.3	25.3	5.78	11
Lincoln	20.5.	17.6	4.39		Warwick	28.5	25.3	5.29	28
N'ales ?	19.7	18.2	3.38		Surrey		25.9		17
	;	;			Middlesex	29.9	26.2	6.77	4

^{*} The numbers in the first and second columns are to be diminished 5 per cent, to obtain the true numbers.

For the sake of comparing the results It will be seen, on inspection, that the two from the two methods of investigation, I methods of investigation lead very nearly human, not being subject to this source of to obtain any correct idea of the relative to the source of the proportion condities, without the subject of England, according to a knowledge of the proportion employed as a proportion of the proportion

have stated, in the third column of the to the same results, each number in the above table, the number of females dying second column being generally equal to the annually in each county under the age of number in the third column, multiplied by five years, out of 100 constantly living un-der the age of five years; this column is ing to a table of mortality, founded upon merely a reprint of the seventh column of either mode of viewing the subject. Wales the table which I have given at page 409 of and Monmonth are the only apparent ex-No. 641 of THE LANCET. The numbers in ceptions, in which districts the registration No. 641 of The Lancar. The numbers in ceptions, in which districts the registration the area subject to a small error has always been acknowledged as defective in the highest degree. I have also added a specific state of the property during the eighteen miles employed in agriculture out of every miles which the observation extends—100 families existing in 1821. In any given the assumption not accurately true, although locality, the mortality of agriculturists is considerably less than the mortality of the property and the desired and the first and assort that of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the first and assort that of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the property and the considerably less than the mortality of the considerably less than results stated in the first and second rost of the population; and it is impossible

mortality. The recent observation of the deaths have always been deficient in population of Belgium may be cited as an equal degree. That such has been needly illustration of this principle. This population has been divided into two parts, one-dered nearly certain by the coincidence of fourth part inhabiting towns, the remaining results thus obtained with results obtained three-fourths belonging to rural parishes, on different principles, and there as

100 years ending with 1829, supply one of for the single years of the century,

The mortality of these two sections differed no reason to suspect that this has not been to the amount of thirty per cent. the case throughout the entire period of to the amount of thirty per cent. the case throughout the eather period of
The London Bills of Mortality, for the 100 years. The London bills of mortality, the best proofs of the diminished mortality been published in a statistical work of Mr. of infants. Taking five successive periods Marshall. They have not before been pub-of twenty years each, the rate of diminution lisbed in the present form for so extensive has proceeded with extreme regularity. In a period. The almost exact coincidence of the twenty years, 1730-49, out of 100 born the numbers dying at ages greater than the twenty years, 1730-49, out of 100 born the numbers dying at ages greater than 74.5 died under the age of five years. Durisixty years, during the former and during ing the twenty years 1810-29, only 31.8 the latter half of the century, confirms the died out of the same number. The correct-conclusions, deduced from other grounds, ness of these numbers rests upon the as-i that the mortality in London above the rice sumption, that the registered births and of sixty years has suffered no diminution.

Table showing the Ages of the Dying according to the "London Bills of Mortality" for 100 Fears, in five periods of 20 I care each; also showing the Number Dying under five Years out of 100 born.

Between Ages.	1730-49	1750-69	1770-89	1790-09	1810-29	1730-1779	1780-1829
0- 2	190200	153486	140810	117070	112135	421259	292842
2 5	4 1887	39808	39248	42501	39659	105714	100389
5 10	18488	15760	15349	15537	16471	42262	39343
10 - 20	16006	14629	15221	12187	14213	38541	33715
20 30	40666	34972	31222	26244	27768	91913	66959
30-40	49679	41148	37158	354538	35579	110042	89200
40 50	51178	42903	40057	38660	39.36%	114289	97494
50 - 60	41123	34875	. 33791	33961	36598	93168	87180
60- 70	320-0	30221	2843	28368	33935	76456	76601
70 80	2.1288	21285	20724	20533	2,248	55215	57863
80 90	11735	9327	8394	8639	12693	25231	25557
90 - 100	1955	1379	1176	1273	2135	3929	4009
Above 100	182	94	118	72	71	327	210
Total Deaths	521467	440327	411721	380083	397910	1178346	973762
Total Births	315456	307393	349477	386393	477910	796029	1040602
Dying per cent. under 5 years	74.5	63.0	51.5	41.3	31.8	66, 2	37.8

knowledge of these principles appears to be class of the community. Circums exclusively confined to those professionally point to the medical profession as the engaged in the study of the laws of human ter whence the public may reasonab mortality; the simple principles which form mand the rectification of unsound view the foundation of every professional work human mortality. The public have red on the subject, appear to have produced no incurred an undisputed loss of some impression on the minds of mathematicians dreds of thousands of pounds for want in general, or on the minds of the public, desired information. The Government press been selling annuities on old help of England has been widely diffusing error principles well known to be also napus principles and unfounded results. The qualified persons. Mr.

The method of observing facts in human few persons who through their knowledge mortality, is founded upon principles so ob- and reputation might easily have dissipated vious, and of such extreme simplicity, and yet these errors, have remained silent. No the ignorance of these principles is so univer- sound public opinion will be formed on the sal, that I may be excused for now offering a subject, until the spirit of investigating these few general remarks on the subject. The matters be infused among a new and larger Circumsta

on the subject are highly amusing,—he sug- | to have recourse to hypothetical numbers ; gasta that the names of the purchasers Mr. Rickman has absurdly had recourse to should be published. According to his hypothetical numbers when the true numviews, the public indignation ought to fall ber and ages of the living were placed beon the buyers, and not on the pretenders to fore him. Indeed this is representing the knowledge who advised the Government to affair in too favourable a light. For Dr. knowledge who advised the Government to sell commodities at less than their true Price, before adopting the hypothesis of the

All writers on the subject are unanimously of opinion that there is only one correct was nearly the case at the time he wrote. way of arriving at the knowledge of the law of mortality of any population, which is comprehended in observing - the number living, and the number dying, at given intervals England was then increasing with a rapidity of age. The observation may be made, and never before heard of in a long-settled all the essential results may be obtained, by country. any person of the most ordinary capacity quinquennial intervals of age from birth uptive in this respect; the rates for successive | me in The LANCET. years of age rise and fall anddenly in a degree without example in any other table. 1 have published a table agreeing equally well with the observed facts at Carlisle, in which the annual rates increase with a degree of

The mainspring of the errors circulated Mr. Rickman through the government degree with mine, is an object highly to be desired. In the same number of Tag Lan-

population being stationary, collected a great multitude of facts to prove that such But Mr. Rickman adopts the hypothesis of the population being stationary, and at the same time admits that the population of

Mr. Rickman, in divesting himself of the and acquirements. A table of three columns gross errors with which he has disfigured his is to be prepared; the first column contain-literary productions, displays more caution ing the extent of human life divided into than candour. He attempts to transfer the blame, justly due to himself, to continental wards. In the second column are then to writers. He cunningly reproves them for be placed the numbers observed to be living adopting the hypothesis of the "population at the intervals of age expressed in the first being stationary," and conceals from his column. In the third column are to be readers the fact that he is the only person placed the observed number of deaths cor- who has carried this hypothesis to an absurd responding to the same intervals of age. If length, and this when the making of any a fourth column be added, containing the hypothesis as to the ages of the living was quotients of the dying by the living, at the ithe acme of absurdity. The errors consesuccessive intervals,—this column will express the law of mortality of the population observed. This fourth column will contain on account of the generally slow increase of the substance of all the information sought, and is equally attainable by the inexperimental of the population; and the adoption of this and is equally attainable by the inexperimental of the generally slow increase of the population; and the adoption of this and is equally attainable by the inexperimental of the population of t enced as well as by the experienced in these ages of the living have not been ascertained, matters. What is technically called a "table Mr. Rickman has lately discovered that he of mortality" consists in expressing for it "a person not qualified for arriving at single years of age, the rates of mertality, ultimate results," and he has consequently agreeing, when combined, with the rates of associated with himself a professional calmortality observed for quinquennial or de- culator. Whether his assistant is able to cennial intervals of age. The skill of the enleulate correctly we have little means of calculator is, or ought to be, measured by judging; because any statement of the pre-the degree of uniformity with which he cise connection between the materials and makes the annual rates increase or decrease, the alleged results is carefully and suspi-at the same time never deviating from the given facts for larger intervals of age. The second-hand by Mr. Rickman, have been Carlisle table of Mr. Milne is extremely defec- gradually approaching the results stated by

On the 5th of December there appeared a statement in THE LANCET, that the mean duration of female life at birth in England and Wales was 43.70 years. In a medical periodical of the 19th December, Mr. Rickuniformity not found in the tables of any man states the number for England to be quite author.

43.7 years. The publication of the bable which coincides in such an extraordinary the author of this table, is, however, nions of Mr. Rickman loosely expressed in ast person to whom any blame can be the Population Returns, that my results had, for no one has explained better would be found to differ only one-twentieth and by example the only correct part from results consistent with Mr. Rick-Mayortigating the laws of human man's estimated deficiency in the registered Because Dr. Price, having no deaths. One fortsight afterwards, the re-define respecting the ages of the living sults which I called for, made their first ap-pearance, as seen by the following table:— TWO STATEMENTS of the Annual Mortality of Fernales in England, (1) published in The Lancet of December 5, 1835, the other by Mr. Rickman on Dect. | for 19, 1835.

	Ric	Edmon		
Between Ages.	One out of	Or, out of 100 Living	Out of 100 Living	
0 - 5	23	4.35	4.60	
5 - 10	158	.63	.67	
10 — 15	201	.50	.52	
15 — 20	138	.72	.76	
20 30	102	.98	1.04	
30 40	85	1.18	1.24	
40 50	71	1.41	1.49	
50 - 60	49	2.04	2.16	
60 - 70	25	4.00	4.12	
70 80	10.8	9.26	9.69	
80 90	4.9	20.40	21.16	
90 100	2.9	34.50	37.19	

The results which I have stated for Engand and Wales coincide almost exactly with he results of my theoretical table of " Mean Mortality " which I published four years igo, together with a complete and most exensive series of life insurance and annuity ables founded thereon. According to this able, the mortality at every age (excepting he period of infancy) is twenty per cent greater than that indicated by the Carlisle fable. Mr. Rickman and his assistant now dust the facts to be within five per cent if my statement, and they consequently adnit that the mortality in England is fifteen er cent higher than that shown by their reviously adopted but now abandoned Carisle Table.

I have been lately informed that Mr. dilne himself, the promulgator of the Carisle Table, has made a tardy acknowledge nent of errors with which he must have seen acquainted for several years past. He low admits that the mortality under five ears, out of 100 born, in all England, is 24 ustend of 32, as he previously stated. He iss, however, apparently admitted only twohirds of what he knows to be the real error. dr. Milne, on the publication of his table, pave "a proof" of its coincidence at all ges with the mortality of the English population. His admission, therefore, that he had greatly over-estimated the mortality in infancy, is tantamount to the admission that he had greatly under-estimated the mortality at every age above fifteen years. The Carlisle Table may, therefore, be considered as shandoned by its parent.

46, Regent square, London; January 18th, 1836.

ARREST OF VOMITING BY CREOSOTE.

To the Editor of THE LANCET.

Sin,—The following cases of stomachic disease, treated by creesote, are at your service, for insertion in your valuable Journal. I remain, Sir, your obedient humble servant.

GRORGE BODINGTON. Erdington, Warwickshire, Jan, 13, 1836.

Case 1.—Mrs. S., a young married lady, the mother of one child, experienced a most difficult labour about two years since, the operation of "turning" having been resorted to, in consequence of an unusual presentation. She has since suffered from relaxation of the uterine system, irregular menstruation, hysteria, and constant sickness, and, on one or two occasions, from uterine hemorrhage; but the most distressing of her complaints has been an almost daily vomiting of food, some hours after taking it, at intervals of two, four, etc., or eight hours, the food always returning in an undigested mass, whatever length of time may have claused from the period of taking the ireal. Thus the dimen, says at two o'clock p.m., would frequently rethen be rejected in the same state as taken, the only change being that per by mastication. She complain senation of tightness and compilated, the cheat, headache, and a market vision, as to amount shrint to her countenance located blacks.

the pulse was small and feeble, and she "case," so that if the Doctor's views and had a constant feeling of weariness and practice do not exactly correspond with prostration of strength. She had been for those of all the carping critics who may some months under medical treatment with exist from John O'Groat's to the Land's End out benefit. She visited Cheltenham in the course of the last summer, and consulted some of the most eminent medical men there with no better result. Returning diligently in reading the great book of namy care, and baving read in THE LANCET an account of Dr. Elliotson's success in the treatment of similar affections by creosote, I tried that remedy, mixing six drops of it in a little mucilage, with six ounces of water. The patient took but two large spoonfuls of this mixture, when a remarkable change took place in every respect for the better. She remained without sickness a whole day and night, which had not been the case any time for six months previous. Her features looked more natural, the headache and dimness of sight disappeared, the catamenia shortly afterwards occurred in a more natural and copious flow, and she appeared as if cured by magic, so sudden and decided was the effect; but being of an irresolute mind, I could not prevail upon her to continue the medicine, on account of its comfortable change, she began to experivailed upon her to take a pill twice a day. afterwards perfectly well.

o'clock p.m., was rejected the next morn-creased.

ing from the stomach, unchanged in any ln the month of February, 1834, he sprespect. Indeed, this was the case with all plied to me in Hanover, where I was then of crecosts, in an ounce and a half mixture, tightness over the former when we was administrated, giving one teampointul consequently, impeded his gait.

stire of the remarks of the learned prosact of University College on the powers herniz make their appearance.

[precents, and I am the more induced to It could not be a bubb, because the swellresect of the residual terms of the powers between the first appearance of the section of the se

in Cornwall, judgment must be pronounced against him. For myself I am content to know that the learned Doctor is engaged valuable hints, derived from the perusal of his talented, judicious, and highly practical clinical lectures, as I have found them reported in the pages of THE LANCET.

CASE OF

FUNGUS MEDULLARIS

IN THE

CAVITY OF THE PELVIS.

By Julius Wolfr, M.D., Dublin.

A. P., 16 years of age, and of a slender habit, had, except during some diseases in nauseons flavour. She had taken but one his childhood, been perfectly healthy, up to dose, and in a few days after enjoying her the period at which the affection about to be described made its appearance. When ence a return of the symptoms; I then pre- 15 years of age, he began to support his poor parents by dealing in various small arcontaining one drop of creosote in two or ticles, which he carried in a basket, the edge three grains of aromatic confection. She of which, as he walked, always pressed or continued this for a few days, and remained struck against the upper part of the femur. One day he perceived on the inner side of Case 2. The next case occurred in the the right thigh, about two and a half inches person of an infaut, about eleven mouths below Poupart's ligament, a swelling of old; the sickness continued daily for a about the size of a basel nut, which inmonth, and resisted all means employed to creased by degrees and impeded the motion subdue it. This, like the last, seemed to of the limb. He applied to a surgeon, who consist in a suspension of the process of ordered him to rub it with mercurial ointdigestion, as the mother informed me that ment, and to apply cataplasms; but under rice given to the child for dinner at two the use of these means the swelling in-

the food the child took. It was rejected, practising. I found the swelling of about frequently many hours afterwards, unal- the size of a duck's egg, very hard, uneven, seriad. The consequence was, great pros-immoveable, and insensible to the touch, tration of strength, with fluccidity of the The patient was in other respects very well, muscles, pallid countenance, &c. One drop except that the swelling caused a feeling of tightness over the femur when walking, and,

. It could not be an inguinal or a femoral Comp. The infant perfectly recovered, and bernia, because the swelling had an irre-mended no more medicine, gular shape, was hard, uneven, and in-moveable, and its site did not correspond gular shape, was hard, uneven, and im-moveable, and its site did not correspond with any of the sportures through which

I had no reason to suspect the existence

of psoas-abscess, because the symptoms second finger of my left hand, under which precede and attend such an affection were not present, and no fluctuation was perceived

I did not apprehend it to be fungous medulla, because the manner of its commencement and its course seemed to contradict

the supposition.

I ordered the patient to rub the tumour with a mixture of mercurial cintment and iodine, and to employ, internally, Plummer's powder - (Hydrary, Chlorat, mit.; Stib. Sulphur, Aurant.) This treatment effected Sulphur, Aurant.) This treatment effected no improvement; but a few weeks after I could move the swelling under the skin from one side to the other.

The patient having requested me to deliver him from the inconvenience under which he was labouring, I proposed an operation, as the surest and quickest means of getting rid of it. I expected that after having first made a longitudinal incision, and then detached the skin and fascia late which covered the swelling, the remaining adhesions of the morbid mass could easily be detached with the fingers or the shaft of the scalpel.

Operation.-I performed the operation in the presence of two surgeons, Dr. Henniger and Mr. Lange. After I had cut through the integuments and fascia lata, a convolution of dark-blue vessels, and a cartilaginous mass, closely intermixed with each other, were forced out of the wound. They were enclosed in a white, thick, tendinous membrane, and felt bard to the touch. I introduced a dissecting hook into the morbid mass, with which I drew it forth, and tried to separate the adhesions with the fingers and knife, by which means it came more fully into view. Further examination with the finger showed that the mass had more extensive attachments than was at first apprehended, that it went both deeper between the musicles, and higher towards Poupart's ligament. I enlarged the incision in the akin, and the morbid mass, which was firmly adherent to the muscles, was, with great care, separated, and the muscles were thus laid perfectly bare.

To my great alarm I found now that the ment, into the abdomen, and could not be drawn forth, nor could I introduce my finger, to separate the adhesions. I had thus gut into a difficulty, which, however. I avoured to conceal from the many persons who were present at the operation, nutil, after more accurately examining the wound with my finger, and reflecting a few moments, I came to the resolution of making an incision through the integuments, above Pospart's ligament, in such a manner as is regarded when we wish to use a substance illac artery. Through this locision, was also two or two and a said. which was about two or two and a half rhage. It returned frequently, there long, I introduced the first and quantities, and was always of

eac of the peritoneum, to the peous mu Here I discovered a suft morbid mass, w covered a part of this muscle, and whi could easily be separated from it he the fingers. After this was done, I found in difficulty in separating that morbid po which adhered to Poupart's ligament, drawing forth the mass which I has before separated with my fingers i abdomen. The part thus separated was of the weight of nine and a half ounces.

Morbid appearances. - On examination of the morbid structure, it was found that the part which had been situated out of the abdomen, and which had felt so hard and uneven, consisted of dark-blue dilated and contorted vessels, mixed up with a cartilaginous mass, and little granules of fat, all of which were enclosed in a thick white fibrous tunic. The part situated in the abdomen was soft, like the substance of the brain, attached together, of a gray-white colour, intermingled with a great number of minute red vessels, and enclosed in a thin white membrane. In short, it had all the characters of meduliary sarcoma.

Whether the disease took its origin internally or externally it might be difficult to decide positively. To me however it seems

most probable, that the fungous mass in the cavity of the pelvis was of a later date than that situated on: he thigh, because the patient had never complained of general

indisposition, and any inconvenience he had suffered was limited to the external swelling alone.

Progress.-The wound above Ponpart's ligament was soon healed up by being simply brought together with emplast. adhæsiv., whilst the larger wound below Poupart's ligament was dressed with simple cintment. The patient was put to hed, and an appropriate diet was ordered. Except a very slight degree of fever, which appeared in the evening of the 3rd day after the operation, the patient went on very well, His appetite and sleep were good, and the bowels regular. The wound looked well, and suppurated but little. A few days after, he was able to be out of bed, and could walk up and down the room. In the afth week he went out of down without however, returning to his downer extraording. The wound gradually because amiller, and that of a good quality. In the seventh or eighth week a

operation, one afternoon, a sudden blee from the wound took place, withou known cause, and to such a con amount that the patient was all the bleeding was thus checke able to discover the source of

application of cold water. After a few weeks the patient got a cacheciic look, became low-spirited, and lost his appetite. He had, during the day, at irregular intervals, horripilations, and, towards evening, a degree of low fever. The wound assumed an unfavourable aspect, and ceased to secrete healthy matter, but poured forth, in place of it, serum in great quantities. Out of the botthe wound a brain-like mass again sho forth. Light nourishing diet was now ordered, together with the decoction of the cinchons bark, with sulphuric acid, whilst, externally, fomentations, with the same decoction, and alum, were given. The patient apparently, rallied. His appetite returned. In the evening the fever gradually left him, the wound had assumed a somewhat better appearance, the morbid substance was se-

The patient continued to be in this favourable state for a few weeks, and the wound appeared becoming iess. But he had, now and then, slight fits of intermittent fever, of the tertian type, which was endemic in the village in which he lived; but this was soon checked by using the sulphate of quinine.

In this state the patient remained for a few months. His strength apparently increased, the wound became smaller, and secreted but little of the fluid mentioned. The cachectic appearance of the patient, however, did not leave him, though he said that he felt very well. The wound, which was now about the size of half-a-crown, became again of a whitely appearance, and anew secreted a very considerable quantity of the above-mentioned fluid, so that the patient was constantly wet with it. He grew thin, got evening-fever, and had a dry cough, lost his appetite, and was obliged once more to be constantly confined to his bed. This excessive secretion lasted for six or seven weeks, until at length, by the steady use of external and internal tonic and astringent remedies, it, to a certain degree, diminished. The patient, however, was visibly wasting away; the dry cough was now very teasing, and the bark no longer agreed with him. I ordered Decoct. Lich. Island., Pulv. Sulph. Aurant., Antim., et Extr. Cicut., rues, ouppe. Aurest, Americ, et Estr. Cruf., which disminished the cough. Soon after, however, colliquative pempiration and diarrhosa made shely appearance, together with experience of master, and gengreen decinity, on the se sacrum, and aphabas in the mouth, as that the patient was unable to swallow

in the thirteenth month after the operacaff death ensued, the patient being in a so body was not permitted.

24, Names street; Anna Aras - at 15,873

No. COL

PHENOMENON OF THE PULSE.

To the Editor of THE LANCES.

Sin,—The following is transmitted for insertion in a corner of your periodical:—

Staff-assistant surgeon Dr. Hopkins, having occasion to be absent from town for twenty-four hours, requested me to take medical charge of the detachments, stationed in St. John's, for him until his return. On doing so, he stated that he had been called in the morning to see one of the sergeant's wives, who appeared to be labouring under an attack of modified epilepsy. He had About four hours after (at two p.m.) I visited the patient, and found her presentcreted in large quantities, and the secretion ing the following amongst other symptoms complete coma; the pupils dilated; pulse full, soft, and between 80 and 90. On inquiry, I learnt that she had complained, on the previous day, of headache, and had, on the same evening, got drunk, being accus-tomed to tippling. I ordered fifteen grains of calomel, immediately to be followed by a solution of sulphate of magnesia (3) to sviij of water, 3ij. Om. 6. post. calomelan), wet cloths to the head, and fomentations, and bottles filled with hot water, to be applied to the soles of the feet, the calves of the legs, &c. While I was standing by her side, with the finger on the pulse, she was seized with a sub-epileptic fit, experiencing twitches of the muscles of the face, of the superior and inferior extremities, &c. The pulse, from being full and soft, became a mere thread, and quicker and harder. I was struck with the phenomenon, as I could not bring to my recollection having ever read of such an occurrence during epilepsy, and on reference to my books, I have not been able to find the circumstance recorded. I have conversed with most of my medical brethren here, some of whom have retired from practice for ten, fifteen, or twenty years, but not one of them has ever met with such an occurrence. It is from this circumstance that I have ventured to request the insertion of some particulars of the case. One of two causes must have occasioned the diminution of the pulse's volume, either a muscular "vis insita," partaking of the influence of the epileptic seizure, or pressure of the muscles of the arm and fore-arm. But if the latter was efficient, would not the ar-tery, where it is superficial, at the wrist, rather have increased in volume than otherwise? For if we fill a flexible tube with a fluid. and apply a compressing force to two-thirds of its extent, the remaining third will increase in volume, as a matter of course, if the tube be dilatable. I have always been dis-inclined to allow the claim of muscularity of the arteries; but this case has, I confess a linde staggered my creed. The woman did esta grapjalite

well, the medicine acted conjously, and down to us kietories of recovery, when the next day she complained of nothing but submerged had kin fixteen hours, the beadache and debility. I am, Sir, your days, and even seven weeks, in the water.

obedient servant,
John Fuklongs, M.D. St. John's, Antigua, Dec. 12, 1835.

RESUSCITATION FROM DROWNING.

To the Editor of THE LANCET.

SIR .- My connection with the Royal Humone Society as one of its medical assistants, and the vicinity of my residence to the re-ceiving house in Hyde Park, have led to my being called upon to treat most of the cases of submersion requiring medical aid which have occurred in the Serpentine for some years past. I was there on Christmasday, at the time of the accident which, unhappily, was attended with the loss of seven lives, and took an active part in the treatment of the sufferers.

A committee of the society met to inquire into the circumstances of this fatal occurrence, and the notices of their report in the newspapers have produced a long leading article in the Medical Gazette of the 9th inst. on "The Humane Society and its exertions." The writer entertains the most proposteronely absurd notions relative to asphyria from submersion and resuscitation, and is, in consequence, quite unable to conceive how seven persons could have been lost, out of fifteen taken out of the water and brought into the receiving house, unless there existed a fault somewhere. He, however, lauds the society, and admits that it exerts itself to the utmost of its means. In reference also to the medical men who gave remerance asso to the medical men who gave their gratuations assistance on that day, he mays, "It must not for a moment be supposed that we mean to impute the alightest dediction of skill to the gentlemen employed."

The fact is undentable that here were fiften bodies all at once, and middle one roof, to be attended to by seven middled men. In this view of the case, sartiage, many will rather be surprised,

I have not, therefore, any charge against the society or its medical assistants to Tabut, for none has been made. My object is to point out in your valuable journal the arroneousness of the opinions before alluded . I do not fear that the veriest tyro in the profession will be misled by them, th coming clothed with editorial authority. But it is more than probable that sporty. Due is some than proposed that they may confirm the errors, and distress the minds, of some of the many non-pro-fessional periods who read the medical habdomiddle. The fairest way is to quote the words of the writer. He says, Some worthy old senters have insolid

But as we believe that the age of miracles did not extend to the seventeenth century, when these facts are related to have a pened, and as we have feason to dilak human beings were not differently organi formerly from what they are at present must respectfully decline giving credent the marvellous stories aforestid. We believe, however, that there have been some rare cases of recovery where individuals have remained above an hour in the water." The writer here evidently means under the water. Again, after observing that where submersion is accompanied by apoplexy, the instances of recovery are ex-tremely rare, he aids,

"Not so where syncope occurs, as when a person faints with terror at the instant of submersion, or immediately before; for in this state, as is known, respiration may remain suspended for a period more or less considerable, and probably the greater anomalous, where recovery has been effected after a sojourn of two hours or upwards in the watery element, have been of this de-

scription."
Here, also, I presume we must read suder, instead of is, the water, for persons have been many hours in the water, without having respiration suspended at all. I shall trouble you with only one more quotation. The writer says,

" In the Paris arrangements for the resuscitation of the apparently drowned, twelve hours are taken as the maximum, beyond which there is no hope. Where it is ascer tained, for instance, that a person has been eleven hours submerged, no means of proba ble succour are left untried, and the result of this practice is highly satisfactory." (!!!)

The result in every such case would, course, be precisely similar to that of ender vonting to reanimate the bodies of tho unfortunate persons whose heads have been struck off by the guillotine, and as it is highly indufactory to our writing Parisi friends, I suppose we shall soon hear their labours in this new work of chari Equally vain and fruities would be t ablest exercions to restrictiate those w had been free losses, or sweather the merged. The madical and states of Royal Humana Society are too well in ed to make such ridiculeis said full tempts; but frequently in cases of substances for shorter periods, where there is periodity of success, they do institute it personere in the use of means, out if it spect for the feelings of relatives as of it by standers.

The experiments of the sidest mode te, and the opinio

the result of experience in showing, that I in about the nilmines state and in resultante there is little chance of resuccitation after a ing the bowel. Ordered one grain of body has been more than fee consecutive minutes under the surface of the water. I design whether the major Humane Society possesses any well-authenticated record of a single case of secorary after the body had been submerged more than five minutes. I A mixt believe that every one of the seven persons

who met their death at the Serpentine on Christmas day, had been more than that time under the water-some of them, I know, and perhaps all, very much more. It is not at all marvellous, then, that they were not restored. I am, Sir, your very obedient servant,

GEORGE WOOLLEY. 8, Brompton-row, Jan. 19, 1836.

*_ The above letter reached us last week, but too late for insertion in our Number for Jan. 23rd.-En. L.

STRANGULATED INGUINAL HERNIA

To the Editor of THE LANCET.

Sin .- At the suggestion of my friend Dr. Lubbock, who witnessed the following case, I am induced to submit the same to you, requesting that you will insert it in your Journal, and I shall be glad to be made acquainted through your pages with such observations as may suggest themselves as to the treatment to be adopted under similar circumstances on a future occasion. I remain, Sir, yours respectfully,

W. G. GOWING.

Norwich, Dec. 31, 1836.

CARR.-Nov. 7, 1835. Mr. Lambert, æt. 30, of a robust constitution, by trade a baker, was, on Saturday morning, whilst lifting a sack of flour, suddenly seized with a severe pain in the lower part of the abdomen, which continued above an hour, when he became sensible of a swelling in the left groin, which gave him considerable pain on pressure, and continued to increase until about ten o'clock, when I was summoned to attend him. found him suffering scute pain about the unbilious, and comiting everything which he drauls in the left groin there was a swelling, very time, of an olding shape, of about he size of a same agg, descending about one third dawn the scrotum. I placed in a supine position, and relaxed the cominal aperture, by rating the mages the mages did, and attempted to raturn the mages did, and attempted to raturn the mages did, and attempted to raturn the mages did, and the mages did not be exclude the application of the taxis. Not succeeding, I capt that portion which missediatily converged a tobacco enema, and took at the tamour, which was alightly converged to the mages of the taxis. The stomach was perfectly empty, and not like taxis, and and very much contracted; the intestines,

Eight o'clock. Vomiting continues to harass him; withe 100; great thirst, and a general reattenness. Lurative injections or-dered, which brought away some hard feces. A mixture composed of salts and senna, with five grains of calomel, every four hours.

Nov. 8. Nine o'clock a.m. No sleep; pulse 110; vomiting through the night; tongue clean; slight pain in the bowels, which was not increased on pressure; no motion. At four o'clock the symptoms remained the same. At ten I visited him again, and finding that his bowels had not been relieved, and that the vomiting continued, I gave him another laxative injection, which brought away more feces, and ordered a pill composed of a third of a grain of opium and two of calomel, every two hour

9. He could not lie still for more than a very few minutes; frequent vomiting; pulse 110; tongue clean; occasional pain, which appeared to arise from spasm, as it came on by paroxyams; nearly all the muscles of the body, particularly those of the legs and arms, were affected with spasm. Dr. Lubbock was requested to visit him, and he prescribed one drop of croton oil, and five grains of calomel every four hours, with the effervescent mixture. We met again in the evening, but with no better prospect. Every kind of nourishment was rejected by the stomach; pulse 120; no relief in the bowels.

10. Passed a restless night, took some coffee, which remained on the stomach above an hour. Strength considerably reduced; pulse more feeble and frequent; countenance shrunk, and the mouth frequently filled with a bilious stercoraceous matter; he died at about half-past four.

Post-norten Examination, Six Hours after Death.—On opening the addouren, the por-tion of strangulated intestine, which con-sisted of a knuckle of Heum, about two inches in length, was of a dark brown colour, and adhered firmly and generally to the sac, which so completely encircled its upper portion, as not only to obstruct the passage of the feces through the large intestines, but also the circulation of the blood. Its parietes were thickened, and in-filtrated with blood, its external surfaces (the peritoneal covering) firmly adhering together. Its extreme points rested just within the internal ring, which permitted the finger to enter freely, as also did the external ring. The abdominal viscers gene-rally, presented a healthy appearance, ex-cept that portion which immediately cover-

as far as the strictured portion, were dis-tended with liquid feces and gas. Might not my patient's life have been preserved, if, thirty hours after the hernia was returned, an incision had been made so as to expose the abdominal ring, the bowel (which would have been seen) been drawn down, and the hernial sac slit open?

COPAIBAL RHEUMATISM.

To the Editor of THE LANCET.

SIR,-I read in the last Number of your able Journal the communication of Mr. Eagle relative to the circumstance of copaiba producing the disease termed "gonorrhoeal rheumatism," and beg to add my testimony as to the correctness of the views he has taken upon the subject.

It has fallen to my lot to attend a great number of venereal affections, but in no one instance have I seen gonorrheal rheumatism produced unless copains had antecedently been exhibited. I have now before me notes of a case which came under my treatment last winter, in which the most distressing symptoms supervened on the use of the above medicine. The synovial membranes of the knee were greatly enlarged and indurated: the dorsum of each foot was swelled, and the pain wasso excruciating, that the patient was unable to put his feet to the ground for a period of six weeks. His medical attendant pursued (very properly) antiphlogistic measures, such as local bleedings, saline purgatives, &c., but at the same time prescribed a copaiba mixture. When I was called in to see the patient, I found him labouring under great nervous excitement. and he was exceedingly emaciated; pulse 30; numerous petechiæ on different parts of the body; much fever present, and, altoether, he was in a very precarious state I immediately ordered a discontinuance of the copaiba mixture, but at the same time directed that he should persist in the use of the fever mixture, and that the local bleeding should be renewed. Having pursued this system for a week, he declared himself to be quite "another man," and was enabled to follow his usual occupation. The discharge ceased upon his using an injection composed of the Plumb. Superac. and the Zinc. Sulph.

I might give you other cases, but refrain from doing so, in order that I may not encrosch too much on your valuable columns.

1 am, Sir, your constant subscriber, W. B. Maddock, Surgeon.

London, Jan. 19th, 1836.

CÆSAREAN OPERATION.

4 6 1

TERMINATING PATALLY FOR THE MOTHER AND SUCCESSFULLY FOR THE CHILD.

THE following interesting case, attended and related by Dr. B. G. Keaneross, in Rust's Magazine, will be found in No. 2, Vol. 45, of that periodical, the last-published number of the journal:-

The subject of the case was a female, forty-two years of age, who was now pregnant for the first time. The author was called on to attend her on the 18th of March, and found that she had been in la-bour since the 15th. The midwife in attendance had made several improper attempts, with the hand introduced into the vagina, to change the position of the child, and, moreover, had exercised very violent pressure on the sides of the abdomen, in order, as she said, to hasten the birth of the child. The whole abdomen was now excessively painful; the external organs very red, and also painful. On introducing the finger, which caused a good deal of pain, into the vagina, and exploring the pelvis, the antero-posterior diameter of the inlet was found not to exceed two inches; the child's head presented at the os uteri, which was open, and the motions of the infant could be distinctly felt. The Cæsarcan operation was proposed, and approved of, in consultation, by Dr. Warenstoff, who had performed it twice, and once successfully, for both mother and child.

The patient was a woman of short stature, and evidently deformed by rickets, from which she had suffered in her youth. During the period of pregnancy she caught cold, and still coughed a good deal. The pelvis was much inclined forwards; the distance of both superior anterior spines of the ileum was eleven inches, and the conjugate diameter twelve inches; the conjugate diameter of the inlet was estimated at two inches.

The patient having consented to the operation, the surgeon's first care was to empty the bladder and intestinal canal. The woman was now placed in a bed prepared for man was now placed in a hed prepared for the purpose; two sasistants held her feet; another, placed at the head, wook charge of the arms; a physician, sided by a midwife, was stationed on the left side, and intrus-ed with the important duty of preparing the intestines from protricting during the operation. It was impossible to propage sponges, which are recommended by which and Hedenus, in the house of this point a-male; their place was, therefore, supplied male; their place was, therefore, supplied by folding up a sheet in an elliptical form, and placing it over the front of the literus,

while proper persons took care that it should be applied equally to all the abdo-

minal parietes. The uterus seemed to lie in the middle of the bypogustrium; the first incision was, therefore, made in the lines alba, and successive layers of the abdominal wall were divided, with caution, down to the peritoneum, into which an spening was finally made; the division of the soft parts terminated at one inch and three quarters above the pubes, and extendod wards for five inches and a half.

The uterus now presented itself to view, and an incision was made, in the direction of the external wound, about one inch in length. This was immediately prolonged upwards and downwards, with the bistoury, to the length of five inches and a quarter. The child lay with its back forwards, and the operator proceeded to seek his feet, but was unable to succeed in reaching them, from the contractions of the uterus; the same cause rendered it impossible to seize the head; it therefore became necessary to enlarge both incisions downwards by half an inch; the child was then extracted, and although the uterus contracted strongly, no bowel protruded through the wound; however, the state of the infant requiring some assistance, and the person intrusted with the care of the abdomen having turned a one side to aid the nurse, a knuckle of intestine escaped, but was immediately reduced. The wound was now sponged with warm water, a roll of charpie dipped in oil was placed between the uterus and abdominal parietes; two stitches were applied, and the end of the roll was brought out from the lower angle of the wound, which was left open for about one inch and a half; strips of sticking plaster were also wound round the abdomen, and the wound was covered with a compress dipped in oil, and the whole was retained by a bandage.

Immediately after the operation the woman felt herself well; the pulse, sixtytwo before the operation, had mounted only to sixty-five; the only bad symptom was a slight attack of vomiting, which came on immediately after the patient was placed in bed. She was ordered to take a teaspoonful of the following mixture every hour :-R Decoct. Semen. Lini 3vj; Extract. Hyon ciam. Dj; Olei Amygd. 3j; Syrup. Althan

388.

In the evening the patient's pulse had risen to B4, hard and full; the face coloured; the whole shidesies painful. The symptoms were immediately relieved by an abstraction

of twelve ounces of blood.

20. Morning. She passed a quiet night, protty strong; the lochia now come away; and a bloody scrous fluid is discharged from the inferior angle of the wound. The urine is not discharged by voluntary efforts; the use of the catheter is necessary. The cough which effect previously to the operation is ranch dischalifed. Macu distribution

As to the child, it was a full-grown male well formed, weighing seven pounds and a half, and twenty inches long. The antero-posterior diameter of the head was four inches and a half; the transverse three inches and a half; and the mento-occipital five inches; the breadth of the shoulders four inches four lines. In the evening the woman was pretty well; however, the pain returned in the right side of the abdomen; pulse 75.

21. Morning. The physician was sent for to return a portion of intestine that protruded through the inferior angle of the wound during a fit of coughing. This was returned, and fresh plaster applied, so as to close nearly the whole wound. A clyster was administered without any effect, and benceforward it was constantly necessary to introduce the catheter. Mid-day .- The pain in the right side of the abdomen has become very violent, and extends down to the ingui-nal region. It is diminished by leeching and cold applications.

Ile Amygd. Recen. Excerticat. 3j; f. te-rendo cum aqua; Valer. q. s.; Emulsio 3vj; Est. Hyosciam. 9j; Aqua Lauv-ceras 3iij; Syrep. Althem 3j: a spoonful

every hour.

B. Opii gr. 3; Saech. Albi gr. x; f. pulv. D. S.: to be taken in one dose. A lavement was given without any effect. In the evening the pulse rose to 90; the cough had di-minished, and the pain in the abdomen was

supportable.
22. Morning. The patient assures us she feels well; the pain has not increased; but

the cough is now more violent.

lk Opii gr. 4; Sacc. Albi gr. x; f. p. The two last clysters given have not yet opened the bowels. Towards evening the patient became excited from the numerous visits she had received during the day, and the pulse rose to 112. In the night she coughed a great deal, and the pain of the abdomen became much worse. The epigastric region was now tympanitic, and an evacuation could not be obtained by clysters.

B. Olei Ricin. 3iss; Vitel. ov. No. ij; Aque Valer., a. s. ut f. terendo emulsio 3vi :

a spoonful every half hour.

B. Opti gr. 4; Elworaech. Funiculi gr. x;
f. p. deut. tal. Dos. vi. S. One powder every two hours. The cough was appeared by a few doses of this powder; aromatic fomentations were applied to the abdomen.

23. A discharge of some wind has taken place, but no stool; the pain is less; pulse 100; the urine red, taken off by the eathe-ter. The wound has a good appearance, and union has already commenced.

24. Vomiting of a foul-smelling matter during the night; pulse 96; the countenance

agitated. R. Olei Ricini 3iss; Gummi Mimos 3; Vilel. ovi unius; - Aq. Menthe Piper, Valer, aa. 3iij; f. l. a. emulsio, cui adde Syrep.

Mana 31: a spoonful every hour.

ment with assafetida.

Evening .- No stool ; pulse weak, 104 ; another clyster brought away some wind, which gave the patient relief; she has slept but little since the operation; the cough is much diminished; the tongue is covered with a thick yellow crust.

25. The dressings were reviewed to day; the wound seemed partially united, but the stitches remained firm. An ill-conditioned pus was discharged from the ununited points, especially when the abdomen was pressed laterally. During the night the patient made several efforts at stool, and passed some hard feces; pulse 110; abdomen still painful. The tendency to tympanitis is now evident; the patient is delirious, especially when awakened from sleep. The lochia copious, purulent, and fetid.—N Rad. Caryoph., Velor. Min., aa. 35s. Infunde Aque Ferrid. 30j. Stent per 4 hora vas. tec.; colatura adde Extr. Hyosey. gr. xv; Æther. Sulphuric. 358; Syrup. Althee 3j : aspoonful every two hours.

26. The nervous symptoms continue; the tongue is brown; great thirst; the patient complains of great pain; one stool of hard

feces; pulse small, 115.

27. Pulse 96, more developed. The urine was passed for the first time without assistance, and is less red. On dressing the from each other, four inches. The child wound, its upper edge was found to be When the abdomen is pressed upon, the face gives sign of pain; appetite much he must have suffered from the macompletely lost; thirst; no stool, though a nonvres of the midwife. clyster is administered twice a day.

28. The pain of the abdomen has become more acute and general. The patient received some alleviation after the application of cold compresses. An almond emulsion, with Tinct. Opii and Aqua Lauro-cerus, was

ordered. Polse 120.

29. The pain in the right side of the abdomen is very acute. The patient is much agitated, and cries out in agony. The face expresses great suffering, and has taken on the hippocratic cast, Pulse 140, small, and weak. Aromatic fomentations to the abdomen do not produce any effect as before.

30. A knuckle of intestine has given way, and the feces issue in great quantity through the inferior angle of the wound. Pulse 100. excessively small; face collapsed; abdomen less painful; hands and feet stone cold. The patient sank on the following day, 31st, with the common symptoms of gangrene of the intestine.

Body Examined on the 1st of April.

The edger of the wound, except inferiorly, were so closely united, that it became necessary to divide them with the bistoury. The abdominal contents, with the exception of the uterus and great intestine, were normal. The uterus was contracted to the size of a man's fist. Its inferior segment

A lave- | filled the inlet of the pelvis so much, as to oppose some resistance to its separation. The wound of the uterus was now only one inch and a quarter long, and the edges were filled with healthy granulations. We could observe no appearance of the intestine having been strangulated in the wong The posterior surface of the uterus was to mefied, and of a deep-red colonr. The whole of the colon, as far as the signald fie. was filled with bardened feces. Several deep-red spots were seen on the transverse and descending colon, but no gangrene. The anterior wall of the ascending colon was gangrenous throughout, and near the cæcum appeared two orifices, through which the feces escaped into the abdominal cavity. These openings corresponded in size with two roundish prominences of from one to two lines elevation, which existed on the posterior surface of the uterus. In this part only was there a deposit of yellowish

The pelvis of this patient was removed, and prepared for the museum of Munster; when measured, it was found that the distance between the antero-superior spines of the ilcum was sleven inches; the conjugate diameter of the inlet two inches one line and a half; the transverse diameter five inches; the distance of the tuberositics of the ischia lives still, and is very healthy, a circumstance remarkable enough, if we reflect how

Rust's Magazine, No. 2, Vol. 45, contains a case, with a drawing, of medullary sarcoma, occupying the inferior surface of both hemispheres in front of the decussation of the second pair. The man was killed by an accident, and the symptoms to which this remarkable tumour gave rise could, therefore, only be collected from the report of his relations. We cannot award to them much value. We also find in the same number a very good delineation, with a detailed account, of Mr. Weiss's screw lithotrite.

CASE OF

PARAPLEGIA.

Salary.

ACCOMPANIED BY NON-SECRETION OF UNINE AND FECES.

DURING MANY TEAMS.

Described in a Memoir read at the Academy of Sciences and Arts of Padua. By G. MONTESANTO, M.D.

ABOUT three years ago the author of the above-mentioned memoir communicated to the Aridemy of Medicine the history of a Italian prisoner who passed several feares his life without having expected sisters

Dominica Valetto, at the age of 18 years, fell from a great height. The accident, which occurred so far back as the year 1816, was followed by weakness of the lower limbs, and certain difficulty of excreting both the urine and feces. In 1818 he was committed to the jail of Padua for some crime, and after the lapse of a year, was attacked with inflammation of the spinal marrow. The patient's life was saved by the assiduous care of M. MENATO, but sensation and motion were completely lost in the lower extremities. The paralysis was soon joined by a new order of phenomena. Every day, five or six hours after each report, Valetto vomited all solid and liquid substances that he had eaten. The excretion of feces and urine was now completely suppressed, and in addition to the vomiting by which the meals were daily rejected, the patient was now accustomed, after an interval of a few weeks. to throw up a quantity of stereoral matter by the mouth.

The patient had already passed eight years in this condition, when in the year 1828 he was submitted to the care of M. MONTE-SANTO. From 1828 to 1831, the vomiting of stercoral matter became more rare than before that period, and even sometimes was absent during a very long space of time. However, the rejection of fluids was more frequent, and this coincided with a plethoric state of the body that rendered it necessary to bleed the patient no less than sixty times. The oppressed respiration, hard accelerated pulse, lever, pain in the chest, and mulaise, caused many apprehensions of hydrothorax; in fact, he just escaped falling a victim to this disease in 1830, after a very severe winter, from which he suffered extremely, the unfortunate patient's cell receiving no artificial warmth, while he was unable to cover himself in consequence of the weakness of his limbs.

Under these circumstances M. Monte-SANTO Wrote to the judicial authorities, demanding, in the name of humanity and for the interests of science, that the removal of the patient to the civil hospital might be permitted; but the prisoner had been condemned to confinement for life, and the tri-

bunal was mexorable.

In 1831 the habits of Valetto underwent some change; he preferred the coarsest and t heavy food. He refused altogether but and wine, but drank brandy in abunnance. He expressed a great deal of sufferhis and disgust whenever any other food than his favourite choice was prepared for him. Thus on the 27th March 1832, a little fried the which its are against his will excited the

er Acces. This man, who had become an gis, pulse quick, and violent inflammatory objects of great curiosity to the Italian physicians, alled at length in paicon, and Management of the Italian physicians, alled at length in paicon, and Management of the state incessant though fruities; efforts, conflowers away on the life and maledy.

Deminics Valetto, at the age of 18 years, of the atomach, and the exhibition of the stomach, and the exhibition of the stomach and the stomach and the exhibition of the stomach and the stomach of the stomach, and the exhibition of a pain in the back under which he suffered for several years, an unexpected vomiting of stercoral matter in great abundance came on, and towards the end of April the patient was restored to his former health.

At this period a violent shock of an earthquake threatened to overthrow the walls of his prison, and the patient was transported to another. During his passage he suffered severely from pain in the stomach and spine at each shock of the carriage. The spinal pain now became aggravated, and was accompanied with internal pulsations: the abdomen unexpectedly swelled, as if distended with air. This last symptom, though temporary, was the more remarkable, because hitherto the patient never complained of any painful sensation below the stomach, or in the region of the great intestine, the kidneys, or bladder, even while he suffered most severely in the

neighbouring parts.
On the 20th Nov. 1833, Valetto was attacked with acute febrile symptoms, preceded by a sensation of coldness, and oppressive pain in the head. The fever was arrested by bleeding: the calm which generally followed this remedy was not now attained. Towards the middle of December his sufferings increased : the stomach refused to bear any food; he was depressed, complained of violent pulsations near the vertebræ in which the pain was usually scated, and in spite of frequent efforts was unable to throw up any matter from the stomach. The disturbance of the circulating and digestive organs was partially calmed by a copious bleeding; but the unfavourable symptoms soon returned: the epigastric region was now contracted, while the hypogastrium was hard and tumefied. After an access of very violent suffering, he threw up some liquid, inodorous, insipid matter, and then some bitter fluid. The region about the xiphoid cartilage now became the seat of a new pain; the hands and arms trembled. Towards the month of March 1834, the lower extremities became oxiematous, and presented much of the appearance seen in phicgmasia alba dolens.

On the 12th May, Professor Fabris, chirar-gien-en-chef to the Civil Hospital, visited the patient: he explored the state of the rectum, and found the gut very much contracted, and lined with an inodorous greenish mucus: the finger could not distinguish any portion of the bladder, and the patient seemed so fatigued from the examination, that it was not judged it to introduce a catheter. The patient's health now declined from day to day: the tumefaction of the ere symptoms, excessive cardial limbs began to decline, and at the sar

time he passed a small quantity of urine through the threitin. The urine discharged was watery, nearly free from odour; sometimes he remained for several hours without passing any; at other times he excreted two pounds in the twenty-four hours. It is important to remark that he never had had either incontinence or retention of urine, and that it was never necessary to introduce the catheter, a circumstance so often required in paraplegic individuals.

At about the month of October he was again removed to another prison, in which he survived only three months. By degrees the impossibility of taking food was established; he vomited at once every liquid and solid substance as soon as swallowed.

On the 13th February 1835, the symptoms of an approaching death were visible, when a quantity of fluid feces, without any premonitory sign, was discharged simultaneously from the mouth and anus. Valetto expired thirty-six hours after this phenomenon, in the thirty-sixth year of his age, and after having suffered nearly seventeen years under this most distressing malady.

Post-mortem Appearances.

The autopsy was made on the following day, in the presence of MM. Brugnolo, Caldani, Morgagni, Fabris, Montesanto, Argenti, and Méneghini. The membranes of the brain appeared to be cedematous, but the hemispheres of the cerebrum were firm and well developed; the cerebellum seemed small when compared with the cerebrum. The vertebral canal was normal: the point in which the violent pain existed during life did not present any alteration: in the cavity was found a large quantity of sero-sangui-neous fluid: the chord itself was normal. In the abdomen the stomach was found much distended, and a great deal larger than in the natural state; from the great bulging extremity to the small cul de sac, it mea sured eight Paduan inches and a half; from the summit of the great end to the middle of the great curvature, seven inches. It contained a small quantity of bilious and fecal fluid: its parietes were healthy; the liver adhered throughout to the diaphragm: the gall-bladder, completely empty of bile, contained about twenty or thirty calculi. The external surface of the small intestines was in many points injected, and of a brownred colour: they were contracted here and there, chiefly near the cæcum; they contained the same kind of fluid as the stomach The excum, ascending colon, and a part of the transverse, were normal: from the iliac flexure to the anus, the intestinal parietes were thickened, resistant, and contracted: the inner surface was the seat of numerous ulcerations: the whole canal contained fecal matter,—in the small intestine, very field,—in the large, hard and dry. The liver and pancreas were healthy.

The bladder, accessingly contracted, was concealed belind the pubes; its paristic were much thickened, and it contained a few drops of thick red urine; the cavity was not capable of bolding more than three ounces of fulfil: kidneys bealthy; western faccid, and a little contracted; the spaticles and organs of generation healthy; the vasicule seminal fluid.—Annali Universale, October, 1835.

DISEASES OF OLD PERSONS.

Clinical Researches into the Diseases of Old Persons. Made at the Hospital of Salpetrière, Paris. By M. Hourman and M. DECHAMBRE. Archives Générales, Nov. 1835.

In a former Number we analyzed the first of these interesting memoirs. We now continue the series from the November No. of the Archives Générales, giving the statements nearly in the language of the authors themselves:—

The anatomical modifications, which the respiratory organs of old females undergo, are accompanied by corresponding changes in their functions. The principal belong to acts which are purely mechanical, and which give rise to what are called the "physical signs" of disease in those organs, and we shall presently see how they correspond exactly with the changes which we have before described as taking place either in the formation of the thorax, or in the structure of the lungs.

CLASE 1.—Old Females with the Thorax well developed, the Flesh abundant, &c.

We have already seen that the respiratory organs differ very slightly in this class from the healthy adult; the same is true of the functional acts; respiration is generally performed with care in these females; deep inspirations are executed without difficulty, though not quite so freely as by an adult; however, the conformation of the thorax already produces some modification in its expansion, which we now proceed to notice, In an adult female, the mean antero-posterior diameter of the chest (taken opposite the middle of the sternum) is from six inches six lines to seven inches; the transverse, at the level of the mamma, from nine inches six lines to ten inches, and near the have of the chest, at the level of the eighth rib, from eight inches four lines to hime, inches.

Now, in the old women of the first class, here under consideration, we have found the antero-posterior diameter seven to meet inches six lines; the superior transvense 2.5, to 9 inches; the inferior transvense, the same

esuit. We do not attach is with importance of undergo any change whatever during of the Shesiute length of each of these dis-inspiration. Hence we may already draw meters, best their institive proportion is a pircumentance widently worthy of attention; vance in age, the powers which dilate the her express mathematically what has been aid in the former paper on the lateral flatening of the thorax in old persons; thus we see the superior transverse diameter becoming as short as the inferior one, and rearly approaching the antero-posterior. As to the augmentation of the diameters furing respiration, they take place nearly equally in all directions; but the augmen-ation is always much less than in the idult, never depressing more than four or ave lines. Finally, the sternum, which is projected forwards during inspiration, unlergoes the rotatory movement described by Haller in a very feeble degree. The chest of these aged females is sonorous, but not to an exaggerated degree. When the lungs advance, so as to cover the heart, the precordial region then becomes abnormally sonorous, and we sometimes cannot discover a dull sound over the whole left side of the chest. We can see at once how this circumstance is calculated to produce a false diagnosis in diseases of the heart or periexpansion of the pulmonary tissue has become hardened by pneumonia. Auscultation discovers a vesicular respiration, as in the adult, but it is less deep, less abundant, more large and clear.

CLASS 2 .- Old Females with a Narrow Chest, and reduced more or less to a state of Senile Extenuation.

In proportion as the organs destined to accomplish the acts of respiration, become as it were worn out, the necessity of performing the function seems to diminish. Frequently the rhythmus of the respiratory movement is excessively irregular and unequal in such females. The thoracic parictes sometimes remain for a long period in a complete state of immobility, and then alternate, with a series of precipitate movements. It is in vain that one would endeayour " to teach them to respire." The attempts which they make to breaths regularly seem only to derange the function in a more marked manner, and instead of inspiring and expiring regularly, we see them perhaps exhausted by violent efforts that lead to no result. In the state of expiration, the antero-posterior diameter is here seven inches to 7.8 lines; the superior transverse is eight to right inches and a condition before the number of transverse is eight to right inches and a condition before the number of the last performed with more energy than in the same and a half. During a deep inspiration then is performed with more energy than in the same and a half. During a deep inspiration then it is not the same and the same and the same and the same of the thorax ovarcomes the must also rethat it efter happens in this class weakened muscular power.
The changes dismesters are an inch.
The changes disclosed by

the conclusion, that in proportion as we ad-vance in age, the powers which dilate the chest, and chiefly those that act on the transverse diameters, diminish considerably in force. Thus, whenever they are. able to draw a deep and regular inspilation, we see the thorax elevated all in a mass, carried abruptly upwards, while the first to the last ribs ascend under the akin which covers them. In this manner we have been able to correct, on the living body, the error of Sabatier, who thought the lower ribs were carried downwards, the middle outwards, and the superior upwards. In this general movement of ascension the sternum is raised eight to twelve lines, but it is pushed forwards in a lesser proportion; fixed inferiorly by the depression of the ribs already. de cribed, and superiorly by the ossification of the first, or even second, costal cartilage, the rotatory motion of Haller can no longer be executed; nay, in some cases, the movement takes place in an inverse sense, and the projection of the sternum becomes greatest near the superior articulation.

The facility with which the chest is encardium, when, for example, this accidental larged, either vertically, or from before backwards, is easily explained by what has been said on the persistence of the costovertebral articulations in aged persons. In resumé, we may conclude from what precedes, that relatively to the transverse and antero-posterior directions, the play of the chest in the old person is exactly inverse to that observed in the adult; however, there, fortunately, remains a third direction, almost independent of the osseous case; this is the vertical, and hence the diaphragm frequently becomes the principal inspiratory agent; obliged to redouble its efforts, tho folds of its surface press forcibly against the posterior edge of the liver, and, doubt-less, there form the deep marks before mentioned. How do the respiratory muscles act in the aged person? The space by which the ribs are separated being considerably diminished, the intercostal muscles must lose a portion of their force; however, the other muscles, though weakened by the general emaciation, act freely. We must, in this remark, except the scaleni and sternomastoid muscles, whose direction is changed, and whose power is nearly destroyed, by the change of form which takes place in the upper part of the person during old age. Expiration is sudden and rapid; the chest

sero-posterior, and do percussion in this second class of old per-

is the increased resonance of the chest. In lungs of the third type especially, the sound is as clear as in a person affected with pulmonary empyema: this circumstance, which might readily lead us astray, if we were not acquainted with it, is naturally explained by the rarefaction of the pulmonary cells, and the dryness and rigidity of the ribs. But the results of percussion are also modified according to the different regions we examine. Thus in front, the part corresponding to the internal molety of the clavicle, presents only a moderate degree of sonorousness, much less than we find at the anterior-superior region. This fact is precisely the inverse of what was pointed out by Laenucc in the adult, and depends, 1st. On the almost constant presence of gray or black indurations at the summit of the lung. 2nd. From the great curve of the clavicle in old persons. On the other hand, from the atrophy of the mammæ, it is more sonorous in the region of those organs than in the adult. The sternal region is commonly but little sonorous, from the smallness of the lungs, which do not completely cover the bone, and from the arched form of the latter. It also results from the same disposition, that the heart, more uncovered than it should normally be, gives a sound extremely dull, which corresponds very exactly with its volume. Behind, when the scapulum, in consequence of the inclination of the body forwards, has undergone a movement of rotation, the sound is more obscure in the fossæ of the scapulum than in the adult.

Assemblation.—In old persons of the 2nd and 3rd class (see former memoir), in whom we observe the extreme rerefaction of the pulmonary vesicles, the respiratory murmur varies according as the lung approaches one or other type. In lungs where the vesicles are not yet confounded together, but clongated into an elliptical form, the respiratory sound has lost that full, deep, low character which marks the murmur in the adult person. The bruit is more diffuse; the column of air seems less pressed upon, and appears to enter large spaces. The timbre is also more clear, as if the air struck smaller and more vibrating plates of membrane.

and more vibrating plates of membrane. In lungs of the third type, where several cells are confounded together, the respiratory sound is an exaggeration of the one just described; it appears as if it were bronchial throughout the whole chest, only the force and intensity of the bruit are less. Finally, when one lung becomes extensively diseased, as by pneumonia, and the functions of the other are consequently more active, the respiratory murmur acquires more uniformity, and becomes more vesicular. The resonance of the voice is also considerably modified by old age; in many cases it is so great as to resemble a true bronchophony.

sons, are much more remarkable than in the former. The most general and striking sharp and high the resonance is offended it the increased resonance of the chest. In some all less remarks the increased resonance of the chest. In the increased is not a series a perfect engisters. The broaden remarks a perfect of the pulmonary confronts, this circumstance, which might readily lead us astray, if we abundant, which is mixed with the respict tory mirror.

Connection between the Respiration and Pulse in old Persons.—Authors have spoken a good deal on the frequency of the pulse a different ages. Thus, among other observers, Socmmering and Adelon attribute 130 to 140 pulsations to the new-born child; 120 at one year; 110 at two years; 90 at three years; 80 at puberty; 70 in the adult; 60 and less in the old person. In the year 1832, MM. Leuret and Mitivié made some experiments to ascertain how far this supposed retardation of the pulse in old people was conformable to the truth, and they found that the pulse, far from becoming more slow, was, on the contrary, quicker. Their calculations, however, were made on a limited number of individuals, 34 old men, and 41 old women. As to the frequency of respiration in old age, we find nothing certain in authors. It does not appear that any researches have been made to determine with exactness that point. The experiments we made amount to 312; the women were all examined before the act of digestion had commenced, from half past six to half past seven in the morning: of these 312 individuals, 98 belonged to the first class of old persons; 214 to the second; but we were soon obliged to put on one side 57, on account of the irregularity and inequality of their pulse. There remained then 255 females, free from disease, the youngest 60, the oldest 96 years of age.

The addition of their ages gives a total of 18,960; the average being 74.33.

The sum total of the pulsations is 20,984; the average being 82.29.

The sum total of respirations 5558; nverage 21.79. Hence the relation of the respiration to the pulse is as 1 to 3.41.

1st. Of the 255 healthy women, 83 belonged to the first class, and here we find the following results, viz.,

Addition of ages ... 6195—Mean 74.64
Ditto pulsations 6673—Mean 80.42
Ditto respirations 1755—Mean 21.14

Relation of the respiration to the pulse, 1 to 3.81.

2nd. 172 belonged to the second class; and here we find,

Addition of ages ... 12,765—Mary (2)
Ditto pulsations 14,311—Menget Applito respirations 3,803—Mean 21,11

Thus we see that both the pulse said respiration are more quick in the second rlam than in the first. We may first quarter conclusions from the numbers just stablished. In the first plate, the prefixe than-

The same with the same of the

ber of sulfitions in the 355 momen being frequent than in the second class, who, \$2.23, fully confirms the opinion of M. Leunext as to the frequency of the pulse in old are more worn down, more decreptd, more
generally attainaged to the adult, and even
tween the prise and respiration, it always
by 17 the average number found by MM. remained the same, it is a consistency of the constant of the same of the constant of the same of the the Veterinary School at Alfort. On the classes was sirultaneous and proportioned to the Veterinary School at Alfort. On the classes will be adopt 20 as the mean was not be always and by dividing the whole numbering to M. Magendie, we find the respiration into 6 series of from 60 to 140 pulsations, we also accelerated in the old person by 1.79, find that in two-thirds of the old persons Finally, if we reconsider the division made the pulse beat at from 70 to 89, and in oneof old persons into two classes, and compare sixth at 90 to 99. It is also curious to exthe results of each, we obtain another amine the progressive augmentation of the curious result, fully confirming what has pulse and respiration: both these functions just been said; we find that in women of augment in frequency together, but the first the first class, younger by constitution than more rapidly than the second. Let us take by age, the pulse and respiration are less an example from the second class.

SERIES.	SERIES. Number of Individuals.		Mean of Pulse.	Mean Respiration.	Relation between the Pulse and Respiration		
Below 60 pulsations	1	79	56	24	1 to 2.33		
From 60 to 69	21	78.38	64.14	18.58	1 to 3.39		
70 to 79	46	74.37	74.37	21.24	1 to 3.50		
80 to 89	54	73.09	83.74	22.26	1 to 3.76		
90 to 99	29	74.22	94.07	25.24	1 to 3.73		
100 to 120	21	73.43	106.52	23.05	1 to 4.79		

The constant relation between the respira- and those derived from the observations of tion and pulse exhibited in the above table is very remarkable; does the same thing occur in cases where the two faculties are disturbed? To answer this question the author had only to recur to fifty seven cases, which, as we before said, they were com-pelled to separate on account of the irregu-larities they presented; of these fifty-seven, fifteen belonged to the first class and fortytwo to the second :-

The mean age of	the women was	66.50
Mean pulse		75.17
Mean respiration		27.75.

Hence the relation of the respiration to the pulse is at 1 to 3.71; but as, in the two classes united; the numbers were as 1 to 3.41, we have a difference of 0.31 furnished. by the fifty-geven cases.

The experiments from which the shows deulations were drawn have been perwild every source of error; the observations moreover, were made on females all placed exactly in the same conditions of salth, situation, nourishment, &c. &c.

.. It tamilles to say a few words on the difpumbers new given, ble eyes!

ENDER .

MM. Leuret and Mitivié at the old hospi-

The thirty-four women examined at Salpetrière gave a mean pulse of 79 instead of 82.19, which results from the experiments of our authors. However, we should remark that the pulse of the natients examined by M. Lebut never passed 100, while that of M. Hourman varied from 80 to 144. Again, of the forty-one old men examined at Bicetre, fourteen coughed; there remain then twenty-seven, who give a mean of seventy-four exactly. The same number our authors found in senarating all the extreme pulsations, and it is curious to observe that M. Lebut declares he did not venture to comprise in his tables a certain number of old persons, although they appeared perfectly healthy, because the pulse presented a frequence which seemed to him incompatible with good health. How easily is the most accurate observer led astray when he allows a preconceived idea to turn him aside from the facts which are before

ANOMALOUS CASE OF LITHOTOMY.

MANABEABLE DELLTATION OF THE CAPSULE OF THE PROSTATE. METY AND

the Editor of THE Landing

Sin,-If you deem the accompanyMix case worthy of admission into your valuable periodical, its insertion will much oblige, Sir, your most obedient servant,

JOHN LIZARS.

38, York Place, Edinburgh; Jan. 22, 1836.

are for the most part our proper instrucdeviations as would certainly occasion the death of a patient in the hands of a timid or flattened plum was instantly extracted. irresolute operator. Of this last class is the following:

hospital on the 29th of December last, and presented the usual symptoms of stone in the urinary bladder, under which he had laboured during the last eight months. He was in this hospital seven months ago under ably, and this is now the tenth day from the the late Professor Turner, who sounded him, but detected no calculus. The day after his admission he was carefully sounded, but no stone was felt; the bladder was rough and fasciculated. He was ordered warm-baths, leeches to the region of the pubes, the misture aque polasse, the uva ursi, and a scton over the pubes. All irritation having been subdued by these means, he was again sounded, and a stone distinctly perceived. A dose of castor oil was administered, and on the following day the lateral operation was performed.

Operation .- All the preliminary steps having been taken, and the existence of a calculus again ascertained, a large stoff was inserted, which could not be made to pass the prostatic portion of the canal. A smaller staff was next employed, which apparently entered the bladder, as its handle was loose and moveable. One of my colleagues held it over the pules, whilst I commenced and the direction where there is least resistance,

mbranous p the profit through the left lobe of which was bard, cardinglinds which was hard, certaingenous, the studges with calcareous depositions. The left forefluger, which guided the lithou seemed to enter the urinary black er, and little fluid, considered to be urine flowed ut, when I begged the staff to drawn. I next inserted a pair of but instead of a calculus, such as the sounding had led me to expect, I discovered nothing but calculi, varying in size from that of a millet seed to that of a pea. I now used a searcher, but was not more fortunate. My finger felt a pouch, equal in magnitude to a crinary bladder, which con-A surgeon attached to a large hospital tained numerous small calculi. One of my has peculiar opportunities for improvement, colleagues, at my request, introduced his and he fails in his duty if he either neglect finger, and the sensation communicated so them, or conceal the useful results of his nearly resembled that of a nucous memobservation and experience. Success, though brane, that he suspected I had wounded the it flatters vanity, is at best an equivocal proof rectum, but convinced himself of the conof merit, for it may happen to the rash and trary by examining that viscus with the unskilful. Successful cases, in ordinary cir- forefinger of his other hand. Another of cumstances, when published, afford but lit- my colleagues was also requested to extle information; cowardice may be unwil- amine, and he, with a scoop, removed some ling to divulge the unsuccessful, but these of the small calculi already mentioned.

I now inserted a catheter, which passed tors: from these we learn whether nature the entrance of this pouch, and got into the or art is the more to be blamed for any un-bladder, and urine flowed out. The cathetoward event; but whether successful or ter was replaced by a staff, along which the unsuccessful, those cases are invaluable knife was carried through the neck of the which lead to the detection of such morbid bladder, as there was no substance like prostate gland, and a stone of the size of a

The first incisions into the pouch occupied about one minute; the second incision, Case.—James Brown, a healthy-locking and the extraction of the calculus, about man, fifty-nine years of age, entered the another minute. From fifteen to twenty minutes were spent in examining this pouch.

The patient has bad no bad symptom-no case of lithotomy ever went on more favouroperation.

Remarks .- The anomalous pouch, which rendered this case so complex, seems to me to have been nothing more than the external fibrous capsule of the left lobe of the prostate gland gradually dilated until it be-came as large as the bladder itself.

Crosse, in his work on Urinary Calenius, p. 34, says, "Concretions in the prostate gland, commencing in its duots, often at a distance from their wrethest orifice, even at the very bottom of a duck go on increasing until each duct is enlarged into a pouch, rendering an escape of the concession into the urethra impossible; the narroughtliss by which the pouch communicates with the urethra often becomes closed in consequence of inflammation and effusion of lymph; the pouch is a secreting cavity, which furn additional deposit; and as the depositions. enlarge or multiply, the pouch enlarge

MR. WATTS AND THE WHEATENHURST UNION.

urinary alculus larger than a common geon, of Stourhouse, who lived within and stand of the in a cavity of the prostate easy distance of size of the prostate who had the cavity of the prostate who had the cavity of the prostate and the cavity of re, from the orifice which first who had the one of the largest A title having contracted, or the size edmitt could not be pressed back into the urethra, and the whole of the prostate gland had been changed into a capsule surrounding

I possess a preparation in my museum with cysts exterior to the urinary bladder, one of which may hold from four to five ounces. These communicate with the bladder. I have also another preparation, where the right lobe of the prostate gland forms

one capsule.

I freely confess that I was not prepared for the complication just described, nor am I ashamed to confess it, since no mention is made of such an anomaly in the writings of the most eminent surgeons, if we except Crosse and Wilson, from whose works I have quoted above, but which I had not

POOR-LAW MEDICAL CONTRACTS.

STATEMENT OF PROCEEDINGS AT THE WHEATENHURST UNION, GLOUCESTERSHIRE.

To the Editor of THE LANCET.

Sir,-I consider it a duty which I owe to myself and my professional brethren, to forward to you what information I possess on the subject of the Poor law Union contracts. An Union called the "Wheatenhurst Union," in the county of Gloucester, is just formed in my neighbourhood, and I am the only surgeon residing within the Union which comprises 14 parishes, containing a population of nearly 8000 inhabitants. I have attended nine out of the fourteen parishes for nearly eighteen years, and have great pleasure in stating that I am much respected by every class of persons, and what is more, I have professionally attended the poor in a manner which has given them said, Mr. Weale got up, and stated that the antics satisfaction; I believe there is not a salary was much higher than he could passer in either of the parishes who would manction, and if we were appointed, the backbarry me in any was he would. of course is self-praise, but I state it simply pointment; that it would be much better to make you fully acquainted with my case, when the Union was first formed, I attraction, I invision, as a parishioner, was know. The addition of the deputy Commissioner at 1001, including everything except mid-(Mr. Wesle), and that the salary should be fired introduced to the deputy Commissioner at 1001, including everything except mid-

The Control of the Co

towards to lateral or posterior surface of strates that I should offer aspech as a can-the present a gland. —See plates ix, fig. 1 and didate for the appointment of surgeon to and it, fig. 2 and 3.

Wilson, and as I could wet possibly fulfit Wilson, and the Urinary Organa, at page the duties of the whole Union, I would di-353, also appeared. —I have met with a vide it with a gentleman, Mr. Hoftwow, and

faving contracted, of the store to his employers and the poor. On the evening before the day for electing the officers, I wrote to a friend and patient, a magistrate, to request he would propose me as surgeon to the Union, in conjunction with Mr. Holbrow; in answer to my note, he politely stated that he did not think I could divide the Union as I proposed, but that it would be divided into two districts on the morrow; that probably advertisements for tenders would be made in the papers, and that I had better wait and ree what was done, adding, that he would take care and mention my name. In answer I begged to assure him that if such was the case, and the lowest tender was to be taken, both myself and Mr. Holbrow would decline offering ourscives.

In consequence of this, when the business came on, my friend asked if it was necessary that tenders should be advertised for, and if so, if the lowest would be accepted. The deputy immediately said that it was their usual plan; that he knew medical men objected to it, but that they always "came to." Accordingly the usual form of advertisement appeared in the county papers, and I was informed that the Union would not be divided in any other way than was announced, which was most inconvenient to us as surgeons. We therefore entered into articles of partnership, to obviate this difficulty, and then no objection could be made to the signatures to the returns.

I again wrote to my friend requesting that he would propose us as surgeons to the whole Union at a salary of 150 guineas per year, and it. for each mid-wifery case. There were two other tenders, the one 1401. for the whole, and 11. for each midwifery case, the other 40% for district No. 1, and half-a-guinea for each midwifery case. The gentlemen who made these offers, lived at so great a distance, that very little attention was paid to them, and I am given to understand that seventeen out of twenty of the Guardians were favourable to our election. Before, however, anything could be said, Mr. Weale got up, and stated that the salary was much higher than he could erve me in any way he could. This Commissioners would not confirm our apcase. The Union is fourteen miles broad, and contains 2500 paupers to be attended by the surgeon. Advertisements were again published in the country papers, and in The Lancer (vide Number for Oct. 17), when Mr. Wands and that he should have Tuc "dienday following w s again appointed to. surgeon, when only one tender arrives, town, offering to undertake the duties of the appointment, without making one inquiry as to the extent of country, or the numbers of the poor. This person's name is Mr. Francis Kavier Mosely, a gentleman who has practised somewhere in America. The whole ground-work of their choice was simply his public testimonian, no one knowing whence he cometh, or whither he goeth; and as this adventurer could not immediately become resident, I was requested to take care of my part of the Union, nine parishes, until Mr. Mosely arrived. This. sir, of course, I did without fee or reward, for upwards of a fortnight. The gentleman has now been here more than a month. He has no instruments. I lent him a catheler only a few days ago. He has no horse, nor any means of conveyance whatever, but his legs, to visit his patients. The sick are very numerous, and I have no hesitation in saying that no man, with two of the best horses in the world, could perform the duties he has engaged to perform; I can assure you, Sir, that I would not accept the whole Union at an equivalent salary, because I feel that I could not do my duty towards the afflicted poor, which hitherto I have ever done.

Now, Sir, 1 have stated the situation in which our poor are left. I am constantly harassied by their applications to me for medical relief, and how I am to act I cannot tell. I should state that the professional men in this neighbourhood are tolerably well educated, and I was myself early in attendance on hospital practice in Bath, and filled the office of house-surgeon to St. Bartholoneu's Happital in the year 1812. I have performed most of the operations in surgery successfully, and, amongst them, several in cases of ancurysm. I merely mention this to show, that my claim rested upon a good foundation. I have resided here nearly twenty vears.

here nearly twenty years.

I hee that you will make use of this letter in any way you think proper, and I shall be happy to give you further information if required. The price per head, I should

have stated above, is 91d. per year.

I am, Sir,

Your obedient servent, TROMAS WATTS.

Frempton upon Severn, near Strond, Clobecestershire, Inn. 1936.

RATES OF ATTENHANCE ON THE

SICK POOL

To the Editor of THE LA WEST

Sir,-Your remarks respective w medical contract system cer of the 12th ult., escaped my pe, and the the earnestness with which you urge the necessity for proposing some plan before the meeting of Parliament, which may tend to supersede the arbitrary, unjust, and cruel measures now adopting by the guardians of Unions, under the sanction of the Poor-Law Commissioners and Assistants, I again trouble you on the subject. The circumstances attending the position of myself and other professional gentlemen in this district, as regards the Union, are fully stated in the petition I forwarded to you on the 18th of September last. In the arrangements that may be made, a specified rate of charge per head, on the gross population of each parish, according to the last census, would be the most desirable mode (if fixed at a fair ratio) of obtaining equivalent remuneration for medical and surgical assistance to the poor. Accordingly, I have made below a calculation of the average expense per head, for the last seven years, for medical attendance on the poor of eleven parishes, attended by me for twenty-five or thirty years past. Some of the parishes are contracted for, and others are attended at so much per case, journeys as well as medicines being charged with a liberal consideration towards the rate-payers, and in no instance has the expense been complained of as greater than was just for the services rendered; and on consulting my medical brethren, it appears that the average as nearly as possible corresponds with theirs.

In The Langer for the 5th of December, in which you have stated that the expense for medical and surgical attendance on the criminals in the Penitentiary amounts to 1/. per head per annum, you have also stated that the labourers in the Unions are provided with similar attendance at the rate of from 2s. to 3s. 6d. per head per assum; but I may I think with correctness assert, that in no instance where a ricens assert, that in no instance where a ricense assert, that in no instance where a ricense assert, that in no instance where a ricense assert, that in no instance where a remuneration unions to one half of either sum; and as the precise sum offered by the granulation of the compound parishes is 15.368 persons, full four-fifths of whom are agricultural good, 300. The product offered for medical and suggest a stendance and mediciness operations, midwifery, and trusses for beingles.

There is consider our committee also which I consider our committee and the I consider our committee and that is the instantant in which guardisms, err, lop of an of assistant-commission-bleided marge proportion of the estate of the instantant comme, which perhaps twenty facely supports his family, after in adjustion marked out by the Board as a

in adivision marked out by the Board as a western division, and the person who for many years has been the attendant of such parishes, happens to reside on the eastern side of the line, those parishes are unceremoniously assigned to another practitioner who happens to contract for the western division, thus depriving the original attendant not only of his parish attendance, but, neces-sarily, of a large portion of his casual private practice, owing to his not visiting such parishes so frequently as when in attendance on the poor; and this is done merely in order that the relieving officer may receive certificates of the health of paupers, from the surgeon of his division, although the fact that no inconvenience can arise from the circumstance of the medical man and the relieving officer residing in different divisions, is proved, by the regularity and facility with which certificates have been forwarded, notwithstanding the various parishes have as yet continued to be attended by the original medical practitioners, owing to medical officers not having yet been appointed, partly by reason of their refusal to comply with the terms offered, and partly from the cristence of private contracts with the different parishes not terminating until Lady-day next. I am, Sir, most respectfully, your obedient humble servant,

EDWARD MANNY. East Rudham, Norfolk, Jan. 20, 1836.

The following is the table above mentioned. The contract in the first seven is for medical attendance, cases of surgery and midwifery being charged for exclusively, but included in the average sum stated per head. East Rainham is six miles distant. Nos. 8. 9, 10, and 11, are attended, per case, at the sums stated per head.

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		. d.
1. East Rudham.	0	74
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3. Harpley		84
3. Harpley 4. East Rainham		7
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7. Bircham, Great		111
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9. Gatesend	1	111
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11. Banchorpe	1	34
	어제 시네 시설	6 Ca

ANNUAL ELECTIONS

AT THE

COLLEGE or SURGEONS -- IRELAND.

Edilor of THE LANCET.

Sra, -The fidelity with which you, from time to time, give publicity to the political affairs of the Royal College of Surgeons in Ircland, encourages me to trespass on your valuable columns with a brief statement of the proceedings of this extraordinary corporation on "Hansel Monday."

That being the day fixed by charter for the election of officers for the ensuing year, the Tory party, of black-balling notoriety, mustered all their forces, in anticipation of strong opposition from the reformers. But what, think you, must have been their astonishment when the hour of contest, one o'clock, had arrived, without a single member of genuine reform principles having ap-peared in the board-room, the supposed arena of party conflict! No, not a Peterstreet, nor a Richmond-man, nor a liberal from any quarter, was to be seen on that eventful occasion! It may be asked whence the cause of this apathy? Have not all members of the corporation an equal interest in its prosperity, and are they not all equally bound to maintain its stability? Nothing can be more fair, nothing more rational, than that such a question should arise in the minds of impartial persons at a distance, who are but little acquainted with the internal workings and perpetual intriguing of the predominant party in this immaculate body; but in the estimation of those who are well informed on the subject of College politics, the Moeral party must stand acquitted of any neglect of duty, on the score of absence, on the present occasion. They have, over and over again, endeavoured to assert their rights and establish liberal measures, with a view to keep pace with the spirit of the age, and thereby maintain the respectability of the profession; but no sooner were the doctrines of liberality and fair play sought to be introduced into the proceedings of the College, than that ever-fertile note of dissention, in this unfortunate country, - that tocsin of discord,—" the No-Popery cry,"—was sent forth by that imp of bigotry and intolerance -JACOB, who, in accordance with the enlightened views of his worthy coadjutor in intrigue, Cusaon, resolved on a plan for black-balling every candidate for member-ship, who might be suspected of entertaining either liberal opinions or just views of passing events. The machinations of those narrow-minded individuals, however illjudged or base they may appear to men of honest views, have, hevertheless, so far

MISSTATEMENTS RESPECTING ARTICLES

712 succeeded in converting the College into a blissful moment, embraced Purps species of prisate or party property, that any Thirty-nine Articles!

"Quid non mortalia per formers to preserve the corporation from total and deserved subversion would prove unavailing. They have tried the experiment

who have been left to fight they (11 - 1ered so much temperate parties) who have been left to fight they (11 - 1ered so much of the parties) who have been left to fight they (11 - 1ered so much of the parties) when they can be to be the parties of the parties o battle of independence. They now rely, with confidence, on the exertions of Mr. Warburton, for the final settlement of a question with which he is so well acquainted.

Well, Sir, "the loaves and fishes" of place and corporate honours were quietly left to the disposal of the monopolists, who, I need scarcely tell you, acted most generously towards themselves. Out of twentytwo officers who were elected, there is not one before whose name a conscientious man would venture to prefix the significant adjective independent; and, with two exceptions, their " honours" cannot, in any station of society lay claim even to a character for excessive respectability. By way of clu-cidation, I beg to apprize you that a Mr. Frank White is the new President, and a more fitting personage could not possibly be placed at the head of such a corporation! He is endowed with the convenient powers of the chameleon, and adapts himself to circumstances, by assuming for the time being the political hue of any party which may be rendered available to his own personal interest. In accordance with this judicious rule of acting, he is, in collegiate affairs, a boisterous supporter of every mouopoly and ing that he excites the admiration, of the huthe liberal Chairman of the Parliamentary Medical Committee that he had been most unjustly excluded from the Surgeoncy of Steven's Hospital, solely on the grounds of However. his being a Roman Catholic. not having much confidence in his own word, on a very recent occasion, he felt it necessary, when putting forward his claims, supplications, and lamentations, to the present Government, as a candidate for the situation of surgeon to the Richmond Hospital, to transmit to his Excellency

" Quid non mortalia p Auri sacra fames!"

Lord Haddington had, gire, no idea that the incessant follower sycophant reporties have become the seeds of bigotry of his Government, Surgeon to be uprooted by "the later well make the seeds of bigotry of his Government, Surgeon the component of the component punishing the seeds of bigotry of his Government, Surgeon the component of the component punishing the component punishing the component of the component punishing the component of the compone

religion, how much is thy sacred mame abused!

And who is the Vice-President for the ensuing year? No less a personage than Mr. WHITE's congenial partner and co-ope-ARTHUR JACOB! Yes, Sir, such is the almost incredible fact. White and Jacob are really the President and Vice-President of the Royal College of Surgeons in Ireland! Arcadia ambo!

"Ab! sure a pair was never seen So justly formed to meet by nature."

I forget the next line, but quis istos separ-abit. JACOB, the vulgar buffoon, whose discursive and disgusting harangues are composed of gleanings from the fishwoman's vocabulary, and the resurrection-man's glossary,—he who is the avoiced advocate of black-balling bigotry and monopoly,—the Conservative champion of every corporate abuse,—he who made such an exhibition before the Parliamentary Medical Committee; and yet, on a late occasion (acting on the supposition, no doubt, that the evidence given by the Irish witnesses would never be published), had the effrontery to state at a boisterous supporter of every monopoly and public meeting of the College of Surgeons, abuse which selfishness can suggest; whilst that he was "the man who told the arch-reat parochial meetings he deems it expedient former, Warburton, to his teeth, the absurdity to play the part of the poor man's advocate, of his attempting to put down or interfere with and in this way attract attention, think- the Irish College of Surgeons," - such is the individual who has been elected Vice-Premane part of the community. As a general sident of this once respectable body, which politician, he says he is a reformer, and, in is now dying a natural but a most ignomiconfirmation of this assertion, he stated to nious death. I remain, Sir, your most obedient servant,

OBSERVATOR SECUNDUS. Dublin, January 15, 1836.

LATE ELECTION AT THE RICHMOND HOSPITAL DUBLIN.

To the Editor of Tun Lament.

Sin,-It is much to be regretted that an Hospital, to transmit to his excellency Sim.—It is much to be regretered that make the truth of his original statement to Mr. I alter distinguished more or less usury is your late distinguished more or less usury is your less that brother, the Town-Major, think of the pages of The Labour: this can more the same of this line of proceeding,—he who was contact the "alter of Hymen." on the faith of the late Dr. Blake's money, from recred towards general improvement, where the errors of Popery; and, at the same utility, and the interest of effects. Buth

engenerous and uncandid minority, facts, in order falsely to enlist from (tacts, in order talsely to enlist bout regard to the evils which will Proceed. viz .: -1. The splitting of the reform party; the Protestant portion of which cannot be expected to co-operate with those, who, under the mask of medical reform, would advance the interests of political-religious fanaticism; and 2ndly. The creation in good earnest of similar feelings in the opposite party, which, I am happy to say, have at present their chief seat only in the jealous and excited fancy of your correspondent. Why introduce into a medical journal at all, the exciting subjects of politics and religion? Most urgent indeed should be the occasion to justify such proceedings. Surely the medical profession at least should be the happy neutral ground, where men of science and philanthropy (though belonging to all sects and parties) might meet on equal terms, free from the rancour of those distracting topics. The medical profession is not, nor should it be, political: the terms religion or politics should never be heard in the pursuit of medical science, or the distribution of its honours; and he is but an ill friend to the profession or to science, who will persist in flinging this apple of discord among the members of the one or the cultivators of the other.

It may be quite true that the majority of medical appointments (such as they are, and God knows they are few and shabby enough) is held by Protestants; but it is to be remembered, that until of late years, there were very few of any other persuasion in the medical profession (and even still they form a vast majority), while the patronage was vested in persons of the same creed, they forming the bulk of the respectable classes and the subscribers, -subscriptions very generally conferring proportional influence. Thus what is selfishly objected to by a few, for reasons easily divined, followed

may gratify, as it would appear to pecially free from politics and religion, and result of, acctarian bigotry, but it is is its boast, that, as a body, it has never a kindred with the better feelings of taken any step in the spirit of either. The ority of the profession. It proceeds fact is, the party who in that budy exercise esquerous and uncandid minority, such a perpicious influence, and have metamorphosed a public institution into a private

published, prefer money to religion or politics either; and they look only to the medical reform sentiments of those they wish to promote: thus their president and several others of the officers are at this moment Roman Catholics, and some of the hottest College partisans belong to the same creed, while the claims of Protestants are a disregarded, because they are reformers. So little does religion or politics prevail among the thick-and-thin "College men," that the Chief among them, Cusack, Jacob. and Harrison, have alternately figured as Conservatives, Liberals, and Radicals, and at this moment the public neither knew, nor perhaps care, in which corps to class theth.

Why then object in such unmeasured terms to the recent government appointments to the Richmond Hospital? Oh, but Mr. Adams is a Tory! He never gave any evidence of any such sentiments. All that the public can know, or indeed is to be known, on the subject, is, that he professes the established religion; and is this to be a bar against all promotion? Truly this is onesided liberality with a vengeance !- I do not wish to be the vindicator of Lord Mulgrave's Government, but I must say that all but prejudiced bigots must see, that in this case, at least, he acted properly, not only for the advantage of science and the Institution in question, but also for the interests of that party which gives such obliquity to the optics of "Observator," 1st. It would becay, but not very gracious, to demonstrate not only that Mr. Adams was by far the fittest person in "Observator's" list, for the vacant office, but that none of the others were actually adapted for the position they had the impudence to claim. And, 2ndly, By the promotion of Mr. Adams, two appointments were vacated; one of which was at once conferred on Mr. Cholera White, an ultra Roman Catholic, -and the other, "surassurably shown the condition of things, without any barty malevelence or exclusive legency to the Jerois-street Informary, which out any barty malevelence or exclusive legency to the Jerois-street Informary, which out any barty malevelence or exclusive Catholic in that Institution. I say nothing of the spreament of first.

Any is the profession at this day conducted a summe that he cannot be objected to, inasmuch hostile feeling your correspondent as his sentiments are as much opposed to the sentiments indeed the exertions of an established religion, and his politics are aid the party to which he belongs shall as extreme as those of any Radical of them cades, it). Individuals of course there all. Further than that, Mr. Carajethael could be who are as bigoted as the most infuriate not have had any "jobbing understanding" by or Radical could desire, but neither the with him, as the appointment was made out while Mr. M'Donnell was in Paris. I may also the country of and, enter into any such sense and de, that the arrangement did not enter the commissioners; they were merely consulted as to the propriety of the

have got here, those who choose are at to meet him, to explain and hear explanaliberty to try its effects. The shock to be tions, and to afford him the use of all his given depends very much on the length of apparatus at the University; and if he (Dr. the wire which may be employed. With a short wire the spark will be pretty bright, but productive of scarcely any physiological would most readily acknowledge it effect. With a very long wire the spark will Mr. Bian stated that he had tried be exceedingly feeble, and the physiological experiments upon the human body with an effect very powerful. With regard to the electro-magnet which he possessed, but that subject immediately under discussion, I can all his experiments produced the same reonly say that, as we are all engaged in the sults, whether the electro-magnet was consame great search for truth, if in any re- nected with the hattery or not. same great search for would, it is a spect I can be shown to be wrong, I will The thanks of the Society were then premost willingly adopt more correct views. It sented, by a general vote, to Dr. Ritchie for most willingly adopt more correct views. It is extendance this evening, and for the stance, and since I came to the London very lucid, able, and highly satisfactory University, that I was satisfied that particles statement he had made. On a suggestion of light did not come from the sun. No im- that "both the experimentalists should be putation can justly fall upon us for correct- included in the vote," the President obing our views. I wish we could treat poli- served that there was a rule of the Society tical questions upon the same principle, so which prevented this course being pursued that the ordinary and domestic affairs of with respect to any of its own members, life might not be interfered with by our no- and that Dr. Schmidt had been admitted a tions on those subjects, and that a man, member that night. The Society was then when he obtained more correct views of political questions, might adopt them without being subjected to the reproach of being a "turncoat." If the discussion here is sufficient to induce medical men to turn more of their attention to the important subject debated, I shall rejoice at having helped to add to the interest of a science, which, I

his present views of magnetism, he had enthe following list:—In-patients admitted, tertained those explained by Dr. Ritchie, 1156; out-patients, 1299; casualites re-Dr. Schmidt then explained some of his lived, 1664; lying-in women attended at views in answer to those of Dr. Ritchie their own habitations, 270; total 3789. which we have not reported, and the whole The patients who have died in the hospital of which, therefore, we omit, with less reducing the year amount to 90; in patients gret, indeed, from the circumstance, that remaining at the date of the report, 123, they would not form a useful portion of a The hospital now contains 130 beds. A loan medical report. He asked, however, why of 2500t. has supplied the deficiency in the Dr. Ritchic said that we, as yet, knew but sums required to defray the whole contains the very little of electricity and magnetism, and the present building and outfit. yet argued that it was impossible that mag-netism should produce any physiological cf-fects. Opportunity, he (Dr. S.) thought, mittee propose to liquidate the debt and en was only wanted to follow out ideas on the large the hospital by establishing a builded subject. He was only desirous of having the fund, a foundation for which has been made ments of the magnet tried as a remedial agent. If Dr. Ritchie would at any time do him the favour of joining him in an examination in a subject of the Committee and the subject of the Committee of the committ mation into all the circumstances of the pro- the sum of 2001. for this purpose, doction and power of his magnets, he would Although the ordinary expendi be most happy to adopt Dr. R.'s views, and first year has been greater than will be

effects than by any agent with which we are acquainted. We scarcely, in fact, yet know ground were shown to him for the change, any of the wars of electricity. The only use of the magnet we know is its pointing to the north; and with voltaic electricity we hould any marry many. The philosopher, hould try to discover the uses of electricity we hould try to discover the uses of electricity.

The philosopher, hould try to discover the uses of electricity we hould try to discover the uses of electricity.

The philosopher, hould try to explain and himself after all electrating that was not before very well known. He should be happy, at the philosopher were the philosopher were the same opinions. Dr. Schmidt had certainly stated nothing that was not before very well known. He should be happy, at the philosopher were provided and were shown to him for the change, with one or two very slight exceptions. Dr. Schmidt and himself after all electrating the same opinions. Dr. Schmidt had certainly stated nothing that was not before very well known. He should be happy, at the country of the country

S.) could convince him (Dr. R.) in the end that he was wrong upon any one point, he

Mr. Bing stated that he had tried various

adjourned.

NORTH-LONDON HOSPITAL.

THE first annual report of this establishassure you, I have most warmly at heart. ment has just been issued. The hospital was (Much applicate followed the remarks of the opened for the reception of patients on the learned professor as he resomed his seat.) 1st of November 1831, and the books show

Dr. Schmidt said that, until he adopted from that time up to November 1st, 1835,

Although the ordinary expenditure of

100

REPUDIAT	ION ()F	A I
future required to support the I presend ext at, yet the receipts the fees pad by students (de acidical o icers to the supportients), and the contributions versary Dinner in May last, has so leave a small balance on months, in the hands of the tre following are condensed states.	ospita	l in	its
present extent, yet the receipts	arisin	g fr	опз
The fees par by students (de	roted	Ďy 1	the
nedical officers to the suppor	t of t	be j	pa-
tients), and the contributions	at the	An	ni-
versary Dinner in May last, has	ve bee	11 811	ch
as to feave a small balance on	the t	welv	re-
following, in the nands of the tre	asurer	. т	ne
following are condensed stater	nents	OJ. Y	
•			
Receipts and Expenditure from . October 31, 1834.	June 1	832	to
October 31, 1834.	_		- 1
Described of GH of the con-	£	4.	d.
Donations and Collections at			-
Profits of a Bazaar in the Re-	4366	11	6
gent's Park, in June 1834	502	3	0
Dividend on Consols	1	12	9
Donation for Investment, by	•		-
W. L. D	100	0	0
Queen Caroline Fund	1200	ō	0
			_
£	6170	7	3
	£	s .	d.
Paid to Builders and Architect		3	9
Salaries and Wages	307	15	8
Advertisements, Printing, Sta-			i
tionery, Postage, Porterage,			
Incidental charges, &c	305	19	3
Investment in 3 per cent. Cons.	100	0	0
Balance in Treasurer's hands	280	8	2
		-	-
	6170	7	3
			_
Receipts and Expenditure from C	Det. 31	. 18	34,
Receipts and Expenditure from 0 to Oct. 31, 1835.			
	£	s.	d.
Balance in hand	280	8	2
Loan at 41 per cent Fund raised for the projected	2500	Ü	0
Fund raised for the projected			
Eastern Fever Hospital, trans-		10	
ferred by Donors	52 65	10	0
Collection at Church Bequest of Colonel Sackville	31	10	Ö
A Third of the Profits derived	ΩĮ	10	٠
A Third of the Profits derived from the Colosseum Fete	188	0	0
A second Donation for Invest-		•	•
ment, by W. L. D	100	θ	0
Dividends on Consols	4		11
Donations, Collections, &c	1991		3
Amanal Salandations	456	3	0
Fees paid by Students for at- tending the Practice during	•		
tending the Practice during		,	
tae mession 1874-35	3130	_ 1	0
	£ 8600	3	4
Laster L			
	•		,
			d. 5
Matice paid to Builders		17 3	0
Paratture, Fittings, & Repairs	1041	J	
Pharmaceutical Fittings and	69	4	2
Assuratus Berginal Instruments, Splints,		7	•
	131	. 8	0
		-	•
X 100			

Advertisements, Printing, Stationery, Case-Books, Postage, Porterage, &c. &c. Ment, Bread, Milk, Groceries, Rice, Meal, Stores, Vegeta-	284		01	
bles, Cheese, Candles, Joan &c. Coal and Wood	12/1	20	•	
Coal - ad Wood	215	5	11	3
and Spirits	64	15	iō	
Beer and Porter	148	7	24	
Patients' extra Diets	33	6		
Bandages, Linen, &c	49	7	1	
Washing	179	2	5	
Incidental charges	84	0	1	
Salaries, Wages, &c	674	14	5	
Drugs, Lint, Tow, Plaster, &c.	447	18	4	
Spirits of Wine	29	5	9	
Leeches	32	0	0	
Burial Expenses. Insurance,			-	
Water Rates, Gas	28	8	6	
Guarantee to R. Liston, Esq.	156	10	O	
Interest on Loan	56	5	Ō	
Investment in 3 per cent. Cons.	100	0	ō	
Balance in Treasurer's hands	17	8	3	
	€ 8600	· -	3 4	

To the Editor of THE LANCET.

Sin,-Dr. Macleod having repeatedly libelled Dr. Cummin, a lecturer at the Aldersgate-Street School of Medicine, by giving circulation to a report that Dr. Cummin was the assistant editor of the Medical Gazette, it was resolved by some of the students of the school to inquire of Dr. Cummin, after his lecture on Wednesday last, whether that statement was true. The design was accordingly carried into execution on that eccasion, the impression being very strong, that neither the slanderer of the students at their late meeting, nor any person so intimately connected with the slanderer. ought to continue any longer secret in the person of Dr. Cummin, if the libel were true. It is but justice to Dr. Cummin to make known in your Journal, that his reply to the questions put to him on Wednesday was, that he neither was the author of the slandering article, nor could have prevented its insertion in the periodical in question, nor was connected in any way, directly or indirectly, with the editing, the manage-ment, or the production of the Medical Gazette. I am, Sir, your obedient servant,

AN ATTENDANT AT THE ALBERSGATE-STREET SCHOOL.

Jan. 27, 1836.

CORRESPONDENTS.

To the Editor.—Sir.—In your report of the proceedings of the Meeting which took place at the Grown and Anchor on Montay evening the 1831 of Laguary, a short speech is assertance to "Dr.— BUCNUBLI." Will you allow me to state; that as I

resent on that occu Was thus, generally the time was not spakes by the time was not spakes by the be, Sir, your chedient acreast, Luigh Blundaille, Branch Blundaille, and Blundai

A Hospital Pupil, Glasgow, must be more dore publishing any statement the subject, we must he names of 4 the the offenders and the aggress. letter must be confidentially authenticate

However widely the medical gentlemen have differed, they must all have denied the truth of the impressions stated in Gamma's letter. The details described therein were not " new," but impossible. We can express no other opinion on the case than that already given; and the treatment can be directed with propriety only after a personal interview with any medical gentleman who may undertake to prescribe for the afflicted patient.

Mr. Matthews.-The wax model was a section of the skull, showing the ganglion oticum, with its branches, and the tympanum, published by Mr. Schloss.

We shall feel much indebted to any of our readers who will take the trouble to inform us, by letter (addressed personally to the Editor), of the names and places of residence of such medical men as they know to occupy the office of Coroner in any part of these kingdoms, whether for towns or counties, and whether living near to, or at a distance from, our correspondents, with the dates (or not) of their appointment.

Does Mr. Broackes desire that his letter should be published? Of course we cannot undertake to call upon the three parties whom Mr. Broackes has named. bare reference to those parties proves the truth and accuracy of our brief critical notice. If the statements in the book be satisfactory, whence the necessity for the collateral aid? We have examined the work again, and are now ashamed of the lenity of our first notice. If we have acted unjustly. it certainly is not to Mr. Broackes, but to the profession and the public. If Mr. B. is not contented, we shall have much more to say on the subject; but we hope the book is shelved.

The letter respecting the Doractshire Medical Association, would be charged as an advertisement at the Stamp Office. passage from it, however, showing the objects of the Institution, will be inserted in the next week's LANCET.

The particulars of the meetings at St. Thomas's Hospital and the London University have been laid before us. At the one, nine students in thirty-four, and at the other seven students in four hundred, have put their hands to documents declaring that the Apothecaries' Company is the pink of British medical institutions. The St. Thomas's students are said to have declared the same thing in writing at King's College, pre-

m in ques- | vious to their sall down the Strand to the Borough.

The facts stated by Investi shall bo. published, but it is impossible to and a plac for them this week.

It would be better to lay the y the plan for the which has been "Student's Association," sent to us, before a meeting of the gentlemen who are interested in its adoption or rejecbf ou spondent may therefore he obtained from the publisher.

The report from the Royal Institution will appear next week.

R. R., Jewin-street.-Time fails us for an epistle. Unless the want is urgent, it would be both economy and good policy to wait.

Mr. Baleman.-1. No farther portion has yet been issued. When it appears, our analysis and comments may be resumed -2. The means of conclusion have not vet been afforded us by the only party who can supply them .- 3. Most probably they will,

Mr. Baxter's case has reached us.

The letters of Mr. H. Prater, Mr. Samuel, Mr. Erett, Dr. Kelso, Dr. Wm. Fergusson, George F. (part), A Pupil of the Borough Hospitals, A Member of the Royal College of Surgeons (part), Anti-Humbuy (part), A. King's College Medical Student, A Licentiale of the Apothecaries' Company, and II., are intended for insertioner

We have received a letter from Mr. Meade, the Chairman of the late meeting at the Crown and Anchor Tavern, stating that several untruths appeared respecting him in Dr. Macleod's journal of last week. The space which would be occupied by Mr. Meade's letter in our columns, would be illbestowed on the fabricator of Messrs. Longman's periodical; and we therefore hope that Mr. M. will be satisfied with the above statement relative to its contents.

The report from St. George's is necessarily postponed for a week.

Observator requests us to state that his reply to the "direct contradiction" given by Messrs. Crampton, Colles, and Carmichael, to his statement relative to the appointment of Mr. Adams to the Richmond Hospital, will be forwarded in time for publication in the next number of THE LANCET.

A Student, G. St .- One of Mr. Liston's excellent clinical lectures will appear in our next number.

A Surgeon-We have other reported b Wallace's admirable clinique before for publication.

The statements of Mr. Sopwish in r Mr. Way, are unavoidably omitted this we A Subscriber should endeavour to ob

the information from Dr. A. himself.

ERRATA.—In Dr. Bigmond's paper, TI, for lomelburge, rest rubraces, rest rebrices.

THE LANCE?

Vol. 1.1

LONDON, SATURDAY, FEBRUARY 6, 1836.

f1835-36.

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

BY M. ANDRAL

Physician in Chief to the Hopital de in Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine ut Paris.

LECTURE X.

PECULIAR VARIETIES OF CEREBRAL HEMORRHAGE.

GENTLEMEN, - We have hitherto studied only the ordinary symptoms that accompany hemorrhage of the nervous centres; we have drawn merely a general picture of the most common features of the disease. It is now time to lay before you an account of certain varieties that you will meet with in the course of practice. The nervous symptoms are sometimes complicated with others that do not seem to belong strictly to apoplexy. They are even replaced altogether by phethose symptoms? In what do they consist? arise from accidents occurring in the nervupon disorders in the other systems.

Of more muscles of the trunk or extremities. movement in the cases alluded to? No. The sevidently not a phenomenon of hearth of the brain is in a condition quite opposite, morrhage, whose grand characteristic is the and the convulsions depend, not on an exproduction of paralysis; it depends on an cess of blood, not on inflammatory brita-

inflammation more or less intense of the cerebral matter surrounding the apoplectic cell. In other cases the limb is not contracted, but convulsed. We have seen certain examples where, in a short time after the effusion of blood, the limbs and side of the face were sgitated by spasms, by convulsive movements coming on at intervals and with various degrees of intensity. These symptoms either may appear in the memhers affected with paralysis, or, while one side of the body is deprived of motion, the other is the seat of convulsive actions. Upon what do these phenomena, which occasionally manifest themselves as a con-sequence of cerebral hemorrhage, depend? Not in the effusion of blood certainly, for they are too rare. They occur too seldom to permit their arrangement under the symptoms of effusion. In many cases they are probably connected with irritation or inflammation of the nervous pulp or its membranes.

But are we to conclude on the existence of an inflammatory action in all cases where the spasmodic contractions now alluded to accompany cerebral hemorrhage? Does their manifestation justify the immediate employment of antiphlogistic measures?

Certainly not. Take care how you adopt implicitly such an idea. The most unfornomena of a different nature. What are tunate consequences may be the result. Let us suppose a case in point :-- An individual Where are they found? Certain of them falls down suddenly, deprived of sensation and motion; he has been struck, in other ous centres themselves, the rest depend words, with a violent attack of apoplexy. You bleed him copiously from the arm; the first abstraction of blood seems beneficial; Spannodic Affections of the Limbs.

The first class of symptoms which we have now to examine, is that depending the large now to examine, is that depending the large new to examine, in that depending the large new to examine, in continuance of a state which might have an unfortunate termination. This case is not certainly an exceptional ene. You will first cases of cerebral hemorrhage. Thus, in practice, but can we admit the presence of inflammation to explain the disorders of the runk or extremities. In womener in the cases alludad to? No.

No. 649. *

3 Bearing and

tion, but on a partial anemia of the cerebral homispheres.

There are certain other disorders of movement which accompany hemorrhage of the nervous centres, not as regular symptoms, but as extraordinary and rare phenomena; these algubia must notice in their turn. We have rarely had occasion, indept only three times, to see patients labouring united the symptoms of cerebral hemorrhage, who presented a peculiar phenomenon of a very extraordinary nature; these individuals were at certain moments seized with an irresistible desire to advance, to run directly forwards, and, again, at certain other instants, they experienced the same irresistible inclination to go backwards. Howere we to explain this curious symptom; this strange alternation of two opposite impulses? It is difficult to find a satisfactory reason; however, we may recall to mind, as connected with the subject, the experiments made by M. MAGENDIE to show the influence exercised by lesion of different parts of the brain upon locomotion. You may remember, that when M. MAGENDIE removed the bemispheres of the brain behind the corpora striata, he produced the first strange derangement of motion; and when he destroyed, or took away, the whole of the cerebellum, the animal, instead of advancing, constantly retrograded. Is there anything analogous to be observed in the cases of the patients to whom we have just alluded? Have we found any special alteration in the brain, which would account for the perversion of movement which they exhibited? These are questions which it is impossible to answer in the present state of the science; we have seen only three cases of the kind, and in these three we did not see the autopsy; we are not aware that many other examples exist in the records of medicine; the disorder of movement which consists in a desire to advance or retire by turns, is, in fact, a very rare phenomenon, at least, in turning over the various works published on disorders of the nervous system, we have been able to discover only a single fact, which we propose to cite in brief detail

In some cases of hemorrhage of the cerebellum, the effusion of blood has occupied one of the peduncles of that organ. Now. it has been proved by the experiments of M. MAGENDIE, that when one of the peduncles of the cerebellum is cut across, the animal, instead of constantly advancing, or retiring, as when the cerebellum is removed, shows a remarkable tendency to the circular motion; he seems incapable of getting on the state of compression of the brail forwards or backwards, but keeps perpetually spinning round on the same centre of parts of the body. Again, eschars are very motion; the body of a patient, who pre- readily formed in persons labouring under sented this rare and curious phenomenon cerebral hemorrhage. If the patient has during life, has been examined, and the le- been confined for any length of time to bed, sion, a congulum of blood, was found in one of the cutaneous integument is very tot the peduncies of the cerebellum. This is a suffer from gaugierne: thus were two

coincidence highly worthy of our attention. although it has existed in one a hgle case only; we know of no other; the case was observed and reported by M. SERGES. The patient, a man, sixty-eight years of age, had been much given to the use of prirituous liquors; after an excess, he was seized with a desire to turn round and round, and when compelled to keep his bed for two months heath, the same som tom predominated; the patient, unable to walk, dowed the impulse under which he laboured, by constantly turning himself from one side to another in his bed.

These are a few of the anomalous symptoms, if we may use the term, which occasionally present themselves in cases of cerebral hemorrhage; but we may meet with complications that should be noticed. Thus some patients attacked with apoplexy are at the same time agitated by

Violent Delirium.

This is certainly a complication and not a regular symptom of the disease. The delirium attending certain cases of cerebral hemorrhage, depends on the existence of inflammatory irritation in the nervous pulp immediately surrounding the apoplectic cell, or on inflammation of the meninges in its neighbourhood. In other cases, instead of agitation and delirium, we observe a state of

Somnolence

different from that which usually accompanies and characterizes bemorrhage of the brain. The patient is plunged in a deeper degree of coma; he is more insensible than is ordinarily the case, and here we commonly find, as a cause of this exaggerated somnolence, a greater or less degree of serous fluid, distending the ventricles, or shed between the membranes lining the surface of the brain, and thus exercising a general pressure upon the organ. We now pass to an examination of symptoms that depend on

Lesions of some Organ independent of the Brain or its Annexes.

We frequently have occasion to observe inflammation of various organs marching with apoplexy, and of course modifying or complicating the ordinary phenomena of that affection. These disorders may be of an acute or a chronic nature. The former generally present themselves with a physiognomy altogether peculiar: their march is very rapid, and the patient soon dies in a state of great weakness and protraction.
This latter circumstance probably depends which influences the reaction in dis

points to remark in connection with certain | terminating fatally, and hence the prognosis complications of apoplexy. 1st. The fa- is in most instances very unfavourable. computations or apopters. 125. In Fig. 18 most instances very untavourable, cility with which inflammation may be developed in several organs, and the great tendency of that inflammation to present itself with advantage symptoms. 2nd. The ing the study of heurorrhage of the nervous facility with which the integuments are struck with gangrene in the parts exposed to pressure. These two points are of on at impositince in practice. They teach you on the one hand to be on your guard against the secondary affections with which your patient may be attacked, and on the dangerous character of those disorders : while, on the other hand, they direct your attention to a state of the skin which, if neglected, may give rise to disastrous consequences.

The Duration of Apoplexy

is very various. However, it is a general principle, that this disease, except in cases extremely rare, does not kill the patient on the spot. In a few instances death has taken place in a quarter of an hour after the first symptoms of effusion. In other cases, which still are to be considered as excessively grave, the fatal termination does not arrive before the lapse of one, two, four, or even six hours. All these cases are more or less rare. In a great majority the duration of the disease is longer; and, however it may be contrary to popular ideas, you may hold it for certain that sudden death is much more frequently produced by a rupture of one of the great vessels of the heart, or of the latter organ itself, than by apoplexy. Indeed, experience shows, that in several cases of sudden death, we can find nothing to explain the immediate cessation of life. We may invent hypotheses to cover our ignorance, we may have recourse to physiological explanations more or less ingenious, but laying these aside as mere conjectures, we are compelled to avow frankly that in some cases we can find no pathological lesion whatever to account for the sudden manner in which life has terminated.

Progress of Apoplexy.

The march of cerebral hemorrhage is almost as variable as its duration. Frequently the symptoms go on augmenting, and the disease progresses gradually up to the moment of death. In many other cases we do not observe this constant march from to commencement of the attack to its end-cers are indepens at different times; the first is it was period much better than poles; and this alternation of amendment the consideration of a considerable length of time; this is by no means i indeed, we may say that hamorriage nervous centres is one of the dis-

centres, your he be prepared to allow several varieties of this important disease. Some of them depend solely on the scat of the lesion. Hemorrhage of the cerebrum different from that of the cerebellum: of the cerebellum from that of the spinal marrow. Some varieties are formed by the nature of the accompanying symptoms. Thus we may have apoplexy with loss of consciousness; we may have it with a perfect preservation of the intellectual faculties, two very different forms, you must allow, of the same affection. Again, other varieties are distinguished, not according to the presence or the absence of some great leading symptom, but according to the intensity of the symptoms in general. This latter is a good practical division, one that has been handed down to us from a distant period. Thus apoplexy has been distinguished into mild, into dangerous, and finally, into apoplexy of a middle character. This is an old distinction, and one that is useful in practice, for it leads at once to an appreciation of the most remarkable disorders. Between the two extremes of " mild" and " dangerous" hemorrhage, may be arranged all the great variety of forms which we have pointed out in the course of the two preceding lectures. Finally, other varieties refer to certain complications attending or succeeding the effusion of blood. Thus some cases are distinguished by marks of inflammation or other disorders in some portion of the nervous pulp. In other cases the seat of the complication is far from the brain, and consists in inflammation &c. of one or more of the great viscera.

TREATMENT OF CEREBRAL HEMORRHAGE.

We have now arrived at an important part of our subject,-the treatment of hemorrhage of the nervous centres. However, our observations on the point shall be concise: many of them are anticipated by what we have already said when speaking of cerebral hyperemia. The chief business of the physician in the treatment of cerebral hemorrhage is to follow and combat the accidents as they present themselves; or the treatment may be considered under another point of view, and regarded as preventive.

Venesection

is certainly the fundamental means on which we should depend. A large quantity of or an narrous centres is the or the pa-cesses most hable to relapse. When the pa-tions has been quoe attacked, he has ge-from the system; we repeat, a large quan-nessity and this, or three relapses, the last tity, because it is important to make a sud-



lation by taking away a considerable mass of the circulating fluid. In general we choose a vein for this purpose, and allow the bleed to flow freely through a large orifice. The good effects of venesection may be referred to two principal circ retances; the first is, that it manifestly opposes the continuance of the hemorrhage into the nervous centres. The second effect is to remove any congestion of the cerebral substance by which apoplexy is so often attended, and thus give the patient a great chance of re-covery from that accident. Again, we obtain no small advantage, by a copious abstruction of blood, from its effect in preventing the inflammation, which, as we have before said, tends to develop itself in the nervous pulp immediately surrounding the apoplectic cell, two or three days after effusion has taken place. Finally, venesection may facilitate the absorption of the coagulum, and thus hasten the patient's recovery by removing the material cause of the secondary accidents. Thus, you see, we can justify the utility of general bleeding in many respects, and you will have occasion to prove the truth of what we have said, when the active exercise of your profession shall call you to apply these principles in practice. Many authors advise the blood to be drawn by opening one of the large veins in the fold of the arm. Others, on the contrary, prefer opening one of the veins in the neck, particularly the external jugular vein; we would recommend you, in all cases, to choose the arm. You can manage this part of the body more easily than any other; you avoid any unpleasant, or even any dangerous constriction of the neck, and you are more sure of obtaining the quantity of blood you desire in a shorter time. Finally, some writers speak of choosing a vein in the foot; but this is an uncertain method of bleeding, and not accompanied with any advantages which can make us prefer it to venesection at one of the veins in the arm. Some of the older authors, and, amongst others, MORGAGNI, recommend us to bleed in the occipital veins, a method by which they say we act more immediately and certainly on the brain, but the practice is now completely abandoned.

Another question that has been discussed is the following; "On which side of the body should we bleed?" should the abstraction of blood be made on the same side of the body at which the loss of motion exists, or should we open a vein on the opposite side? All this seems of very little importance indeed: by bleeding on the side opposite the paralysis, you probably abstract blood from the same side of the body at which the effusion exists, but it is not easy to see cerebral hemorrhage, where we are called how the state of the circulation in the brain immediately after the attack, we should bleed is more influenced by this than if we took once largely; we could say a repeat veneway the same quantity of fluid from the section to the same and the latest bleed.

an and efficacious impression on the circu-| other arm: the general effects are certainly more in proportion to the rapid abstraction of blood, and to its quantity, then to the choice of one vein rather than another. We have already drawn your attention to the importance of taking away at once a leequantity of blood; your first bleeding should rarely fall short of a pound, and may be repeated according to circumstances: the English Mactitoder are in the hight of bleeding very freely; they generally abstract 20, 25, or even 30 ounces of blood at a time, and the effects of this practice seem to justify its adoption. You will find certain contradictions to bleeding freely forced by some writers; thus they say when the face is excessively pale, the countenance sunk, the habit of body feeble and meagre, we should be sparing in the quantity of vital fluid we abstract, and particularly in repeating venesection, but I think we are not to attach any importance to the cir-cumstances just alluded to: it is absolutely necessary to arrest the flow of blood into the substance of the brain, and to dissipate any congestion which may attend the hemorrhage; these two points should dominate all the minor considerations.

Again, it has been asked. "Should we bleed if the attack of apoplexy comes on after a meal, when the stomach is charged with aliments?" Certainly. The presence of alimentary matter in the stomach might perhaps induce you to defer bleeding in cases of a trifling disorder, but in apoplexy, where the existence of the individual is so seriously compromised, we should not hesitate to have recourse at once, and on the spot, to this our fundamental means of treatment.

Having combatted the first effects of cerebral hemorrhage by a copious abstraction of blood from the arm, we must have recourse again and again to the same remedy, according to circumstances : we must keep it in reserve against those symptoms of congestion that manifest themselves at certain periods after effusion has been fully established; we must have recourse to it whenever the appearance of certain phenomena, which have been described in our former lecture, would lead us to conclude that the nervous pulp surrounding the apoplectic coagulum has been irritated by the presence of the lesion, and is about to pass into inflammation; there are no many indications that point out the inde sity of again opening a vein : however, in me remark, that you must proceed? with caution, and observe what may be called middle term in the practice of venescond that when we have to treat a patient who is labouring under the immediate effect of THE PARTY OF THE PARTY.

ing did not answer expectations; but after | ton abstraction of the vital fluid, in the one or two abstractions of blood, practised at a short interval, if the intelligence should still remain obliterated, if the pulse do not rise, if symptoms of reviving conscious-ness do not manifest themselves, beware how you persevere; the further abstraction of blood becomes dangerous, the loss of a few more ounces may rapidly aggravate all the amptoms; the come persists and be-comes more profound, convulsions appear, the breathing becomes stertorous, and your patient, from whom you have taken the slight chance of existence that remained to him, sinks rapidly from the abuse of a means, which, if managed with precaution would have been his safety.

I have more than once seen cares where the whole treatment consisted in the application of a few leeches behind the cars, or to the temples, with the administration of one or two irritating enemata to act as derivatives on the intestinal canal; yet with this simple medication, pursued for two or three days, the intellectual faculties were restored, the come was dissipated, and nothing remained of the cerebral hemorrhage but its almost constant attendant, paralysis of the limbs. These cases prove that nature alone is often sufficiently strong to combat with success the accidents of apoplexy, for we cannot attribute any great effect to the loss of blood abstracted by a few leeches. However, we would not conclude from these that sanguineous emissions are to be neglected; we would only draw your attention to the fact, that venesection may be pushed too far, and that repeated abstraction of blood, in cerebral hemorrhage as well as in various other diseases, may give rise to consequences far from being beneficial.

An excellent work (beau travail) might be composed on

The Abuse of Sanguineous Emission.

Had any of you the time, he would confer a benefit, not only on our science, but on humanity, by showing how injurious have been the effects of venesection when pushed beyond measure, even in the treatment of inflammatory disorders. He might prove that bleeding, when repeated too frequently, in cases of acute pneumonia, instead of cutting short the disease, has, on the contrary, shortened the existence of the patient, who lines mader the loss of blood injudiciously abstracted. We might pass in review the tory of all other affections, and prove the magiscumstance. Diseases, whether acute or chronic, have certain periods; certain is in vain that we would arrest the march mature, or turn her saide from the march she has chosen. The patient, on the other hand, requires a certain degree of force to carry him successively through these several tion of a circular ligature round the limbs; shares; and a successively through by a want it is not easy to see what heneficial affects

onset of disease, is only to leave him without resource at a later period, when it is most imperiously required. Hence, I say, take away a certain quantity of blood in the commencement of inflammation, or of other table for the commencement of inflammation, or of other table for the formation of the formati diseases which require venesection; this is good, this is rational; but if you pass this quantity, you transgress the bounds of a sage moderation, and you injure the patient instead of relieving him. To ascertain this wholesome medium is the difficulty: to decide when we have pushed renesection far enough is a point that requires all our skill, experience, and knowledge; but this is a consequence of the nature of the science we profess. Were it not the case, the practice of medicine would be an easy task, and the healing art accessible without difficulty to the first comer that presented himself.

Arteriotomy.

We have hitherto spoken of abstraction of blood from the nervous system only, but the temporal artery has been frequently opened in cases of cerebral disease, and many writers prefer this method of bloodletting to any other: they think a more powerful impression is made on the system when an artery has been opened. However, this opinion is not supported by a sufficient number of facts to make us abandon the practice of drawing blood from one of the large veius in the arm, a method which we consider preferable in several points of view. An American physician has even gone so far as to open the radial artery, but this is a bold practice, which we would not recommend you to imitate: all the necessary indications may be completely and satisfactorily fulfilled by opening a vein, without any of the inconveniences that obviously arise from arteriotomy.

Bleeding by Leeches.

When a sufficient quantity of blood has been drawn in this manner, we may second the effects of our first one or two bleedings, by applying leeches in greater or less numbers to the temples, behind the ears, to the cervical region, the anus, the inside of the thighs or the vulva in the female: each of these regions has been selected by different practitioners, according to their different ideas, and there are, perhaps, circum-stances under which one may be preferable to another. It is of importance that the patient's head should be constantly kept in an elevated position, and you may also follow up the application of leaches &c., by covering the head with cloths dipped in cold water, or with ice.

Revulsives and Emetics.

Some writers have advised the applica-

can be expected from such a proceeding be adopted in cases of ancient paralysis, but it is made received to have recourse, take care, gentlemen, how you have require as a secondary means of treatment, to re- to it rarbly in more recent cases; the use of valuives of various kinds; these may be stimulants will, under such circumstances. applied in the form of blisters, sinapsema, be calculated to determine a still greater for to various points of the cutaneous intogument; some prefer administering them intermilly: they may then be given by the month, or thrown up the rectum in the form of kritating enemata. Some writers, considerably far removed, we often and it especially the older ones, were in the habit highly advantageous to support the stilength of recommending emetics in cases of cerebral hemorrhage; you will find this, I say, frequently mentioned as an auxiliary in the older works; but must we point out the absurdity of such a practice? Emetics can absurdity of such a practice? Emetics can only be injurious when any determination of blood to the head exists; they are still more dangerous when effusion has actually taken place, and you can easily understand how the muscular efforts that accompany the act of vomiting are more likely to aggravate the patient's condition, than confer a

Treatment of the Paralysis.

We have now to consider the treatment proper to combat the effects of the hemorrhage of the nervous centres. Paralysis is the most frequent and remarkable of these phenomena. Can we oppose any remedy to the modification of movement? Can we hope to combat the paralysis with success? The greater part of the secondary phenomena, and the paralysis in particular, are nothing but mere symptoms; it is not to them that we must address ourselves, our means of treatment are here consequently unavailing. As long as the cerebral substance is compressed by a coagulum of blood, you can easily conceive that we can do nothing for the paralysis, which is its necessary and immediate consequence. Our first and main object must be to favour the removal of this clot, the cause of all the lesions which manifest themselves in sensation or motion. However, when we have reason to think the coagulum has been absorbed, or at least is nearly removed, we must not remain idle spectators of the helpless condition of our patient; we must do something. For this purpose we may apply stimulating sub-stances along the limbs; we may excite the sen administered internally with a good deal of advantage. When the paralysis is of tion of the nervous mass; this second class some benefit by stimulating the muscles, the stons, which we distinguish into hypertres-immediate organs of locomotion; they have pluy of the nervous centres, strophy. In some measure fergotten to act; they have ration, and softening, been enfeebled by long rest, by a forced inbeen enteebled by long rest, by a luroca in-activity, and require perhaps ently some ad-activity, and require perhaps ently some ad-ditional stimulus to restore their power.

which now rather lies dermant than com-spectrance of hypertrophy or ramplises-pactify againstance. This practice than many means; but in the activity and the science,

give rise to the most fatal results. In individuals labouring under the consequences of cerebral hemorrhage which dates at a period by the gentle administration of ferruginous preparations; by a light nourishing diet; by occasional use of mild bitters, &c. In this way we support the constitution under the struggle it has to make, and by aiding nature in her efforts to remove the material cause of the disease we obtain a final triumph.

المحدريس

As to the hygienic measures that should be observed during the course of cerebral hemorrhage, they are exactly similar to those proper for congestion of the brain; it is therefore unnecessary to recur to them on the present occasion. We may now ask Do we possess any

Means of preventing the Occurrence of Apoplery?

Authors have recommended the practice of abstracting a quantity of blood from time to time, in cases where this accident seems likely to occur. It is a good one whenever any of the indications of central hemorrhage present themselves with any degree of clearness; but unless these precursory symptoms exist, it is quite superfluous and unreasonable to abstract blood on the simple supposition that our patient may be attacked with the disease in question. The same remark holds good with respect to the use of the seton and several other means which are ordinarily employed as preventives of apoplexy.

Hypertrophy of the Brain.

We have now passed in review some of the principal maladies of the nervous centres, at least the principal of those maladies which are attended with an organic change of structure in the part. We have successively studied hyperemia of the cerebro-spinal axis, anemia, inflammation, and he-morrhage. We now arrive at a second class, nerves which supply the members, or the in which no organic lesion is found, in which nervous plexuses from which the nerves are given off. In these cases, nux vomics has trition, in a new arrangement of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internally with a market of the walk been administered internal with a market of the walk been administered in the walk been administered cules, without destruction or disors very old standing, it is reasonable to expect likewise comprehends four grand subdivi-

tion or not; hence we are justified in treating them apart. Indeed, for the interests of that are made in the pavement for thrawing the science, we are compelled to treat ramollissement apart from inflammation, for by pursuing an opposite course, we should be compelled to neglect or confound several most important facts. Go to the hospitals, observe diseases of the brain: follow the case of a patient who presents a certain ensemble of symptoms, and you will say that he has a ramollissement of the brain, and not an encephalitis. The former is associated with a train of phenomena with which you are familiar; the latter is not yet fixed in your first saw the patient there was some swellminds, and it is for that reason that we ing of the perineum, which became tender have considered it by itself in the present on pressure. Leeches and fomentations classification of cerebral maladies.

We shall next take up the second portion of our subject, hypertrophy of the spinal marrow. This is an affection which you should distinguish with great care from hyperemia; however, in many cases, as we shall have presently occasion to see, the substance of the chord is pale and bloodless, at the same time that it is hypertrophied. The increased nutrition may, and often does, coincide with increased vascularity, but in several other cases we find it is in connection with anemia. "What are the anatomical characters of hyperemia of the stricture of this rigid kind, is in constant spinal marrow?" This is a question, the danger. He is in great risk of urinary abanswer to which we must defer until our seess, and of extravasation occurring into next meeting.

NORTH-LONDON HOSPITAL.

CLINICAL LECTURES

ON CASES OF

STRICTURE OF THE URETHRA.

Delivered in the Session of 1836,

BY MR. LISTON.

LECTURE I.

GENTLEMEN,-You have had, during the last few mouths, many opportunities of observing the symptoms, consequences, and treatment, of strictures of the urethra, one of the most troublesome and dangerous disexies which the surgeon has to manage. ave had the opportunity of witnessing the cause, and I may even say the formation, of this disease, and of watching the development of the symptoms attendant upon obstinate contraction of the urinary passage of a most unmanageable form, viz., that following injury of the perineum.

we are unable to my whether the immediate years of age, who, while going to his work cause of these two conditions be inflamma- early in the morning, when it was darks slipped his foot into one of those apertures down coals. In some way or other ha struck his perineum on the edge of the opening, and so great a quantity of blood es-caped as to make him feel very faint. About seven hours afterwards he applied to the hospital, when, very properly, a catheter was introduced, or attempted to be introduced, but the instrument appears to have got entangled in some laceration, and a quantity of blood oozed out, although the greatest gentleness had been used. When I were applied, and he was discharged some two or three weeks afterwards, apparently very well. He returned, however, on the 25th of September, complaining of very great difficulty in passing urine, he having been dismissed on the 1st of that month. He was taken back as an out-patient. There was evident hardness of the perineum, and very great difficulty was experienced in passing the catheter; in fact he now suffered under a stricture of the very worst and most unmanageable kind.

Now a patient in such a situation, with scess, and of extravasation occurring into the cellular tissue. He is, from the least excess, liable to complete retention of urine in the bladder, and if that be not most properly and promptly treated, fatal consequences may ensue, or he may be reduced to such a state that his after life will be so embittered as to be scarcely worth retaining. There is, in fact, no disease in which a person. is more apt to be "bungled out of his life," than in retention of urine, whether from strictured arethra or any other cause. But even slight forms of the disease will bring upon the patient considerable suffering, mental and bodily, great irritability of temper, and serious interruptions to the complicated and important functions of the organs attacked, eren impotence, to some extent.

A great variety of disorders of function, and changes of structure, in the neighbouring parts, connected by sympathy or function with the urinary passage, have been supposed to depend on disease in that canal, and to be removeable by putting it into a sound condition. There is much truth in the doctrine, though the treatment must not stop short at that point. Many diseases are certainly engendered or kept up by a disordered and irritable urethra, and the removal of that state enables the surgeon to apply his other remedial means with double effect. Many affections of the CARE.—A man was admitted, J. D., 35 verge of the anus, can be much more readily

y; there is great swelling a of the scrotum and prepace, and ulcershout his glass penis, which for the tent forbid any attempts to introduce truments. He is passing much puriform matter with his urine, which is discharged with great difficulty, and frequently we shall find in such cases a very bad stricture to be causing all the mischief. The testicle is apt to suffer, often becoming swelled in consequence of irritation in the part; the prepuce thickens and contracts; and persons labouring under stricture have more or less uneasiness about the verge of the anus. There is a certain uncomfortable feeling, and a bearing down, great pain, and often difficulty, in passing the stools, and great exertion is called for on the part of the abdominal muscles to empty the bladder; you find also that the bowel is emptied at the same time, there is an evacuation of flatus. and very often of the more solid contents of the bowels. The patients, from the constant straining, are apt to have a determination of blood to the part, they labour under piles, and hemorrhoidal tumours internally and externally, and, very often, there is considetable falling down of the bowel. Other symptoms arise from irritation of the urethra, and among them many painful affections in the lower limbs. Neuralgie often hinge upon urethral derangement, and general and local treatment alike fail, together or combined, in affording relief, until this is looked to and remedien. I have now under treatment a man under thirty years of age, who had been actively treated during at least eighteen months before I saw him. He complained of violent and almost constant pain in the course of the left sacroischiatic nerve. He had been cupped many times, as often as four times a week; he had had blisters and sinapisms applied, and he had tried all sorts of drugs internally; indeed he must have had the stomach of an ostrich to have got quit of the mass of horridly poisonous stuff put into it in the shape of medicine, and he had nearly ruined himself by the purchase of expensive and fashionable drugs, without obtaining even temporary respite. From a highly respectable chemist who supplied the patient, I have a list of the remedies used at various times. It comprised delphinia, strychuia, veratria, aconitine, colchicum, Dover's powder, and, lastly, carbonate of iron in immoderate quantities, though he might, under the circumstances, have, I doubt not, swallowed the chain cable and best bower anchor of a first-rate to hoot, in the form of rust, without being one whit relieved. Such, at least, is my impression. The state of his urinary

matten to sure rate attended to. He labourate and had been up done no from before the neuralgic fitack, under difficulty in passing his water. It came away frequently in a small stream, and with much straining. In the space of fourteen days, and by a few introductions of proper-sized bougies, beginning with a very small one, the pains all but left him, and he is now rubbing in, and it will be with effect, an cintment containing these most valuable of external narcotics, the veratria and aconitine, in the form recommended by Dr. TURNBULL. This is another instance. if any were wanting, to convince you of what I am constantly insisting upon, namely, the necessity of inquiring for, and searching out, the cause of surgical disease, as the first and most effectual means of cure, and doing away with that, if possible, whatever it may be. Pains of a gouty nature in the lower extremities often disappear upon the removal of disease or disorder of the urethra, and many patients have expressed to me their astonishment at the exemption from their usual sufferings consequent upon dissipation and debauch, after their urinary organs had been put into a right condition,

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The remedy in such slight cases of stricture is readily applied, though, even there, skill and great caution are essential to the patient's well-being and safety. By rash, harsh, or frequent interference, the disorder of function may be increased instead of being alleviated, and in place of a trifting and easily remediable contraction, perhaps only a slight tenderness of some portion of the mucous lining, with irregular action of the surrounding muscles, a narrow and confined stricture may have its foundation baid. occasioning a contraction so tight, as to admit with difficulty and reluctance any instrument larger than a common probe, and surrounded by a substance almost as un-

vielding as fibro cartilage.

does not naturally follow all inflammations, otherwise the great majority of the male population would assuredly labour under this troublesome disease. There are a great many young men who have had gonorrhova, again and again, without experiencing the least difficulty after the cure has been completed, or, in the after period of life, in making wates. Many people are exceedingly liable to gonerrhova, and if they expose themselves to at much, they may peringual themselves to at much, they may peringual or twenty times. I have seen patients when have suffered under that inflictions does not have suffered under that, and still have had it as often as that, and still have not laboured under stricture. The inflam

Now stricture is produced in consequence

of inflammation of a violent character. It

the chain cable and best bower anchor of character; it is attended with a discharge, a first-rate to hoot, in the form of rust, with which gradually ambiddes; but if the ineutometric organical contains the state of his urinary cortain point, if it be excited in consequence organical had never been inquired into, or at of the discharge being suppressed suddenly

mation in these cases is not of a violent

by debauchery, or by the improper use of could have been wished an the path injections, or if it be excited by (excellent irritable, and sliftbulk to be manageremedies when judiciously and timeously was an exceedingly anythiding at employed) the introduction of instruments and there was for some time during the inflammation, -if a hough, for ground gained by the introduction of I instance, be introduced during genorrhos, gies. We were, you may recollect, an which is sometimes the case; and if that the necessity of leaching the perincum on hougie be introduced forcibly, the inflam- than once, of correcting the state of his dimation will run so high, that it will be followed by the deposition of lymph in the celthe lining membrane. But the worst cases hospital, but had not long been in it beof stricture are those which arise from ex- fore he was dismissed. He got doing ternal injury. They may occasionally be some mischief or other, and was discharged, attributable to internal injury. There is also but not before the introduction of No. 8 one case here, by-the-by, which shows recatheter had been effected. I believe when markably well the cause of stricture. Two he went away, he made water perfectly well, very strong reasons are seen, why the man the mucous discharge having ceased. As should have suffered from this disease. Two bad a case as I have ever seen, arose from very powerful exciting causes were applied. the laceration of the passage while the pa-The man was aged 47, and was admitted on the 17th of December 1834. About six years ago, when rigging a vessel, he fell from a height of about thirty feet, and came astride upon a boom. He complained of severe injury in the loins, which was removed the call to make water almost occurred by cupping, but had then no affection of the every half hour. I had him brought from urinary organs, excepting some hemorrhage the country, and most actively treat-from the passage. About four years ago, ed. When a boy at school, he was that was two years after the injury of the perineum, after being over-heated, and drinking a large quantity of cold beer, be was seized with retention of urine. He applied to a surgeon, who forced a large catheter into the bladder, and drew off the urine. This proceeding was also followed by profuse hemorrhage from the urethra. From that time he has complained of pain and difficulty in passing water. Now the cause of the retention no doubt was a stric- confirmed, very likely fresh causes were ture, occasioned by the bruise on the peri- applied, and the passage was inflamed again neum, which perhaps did not attract us actention very much, afterwards aggravated by the dehauch. While over-heated, he what additional causes existed for the stricture when in operation, an external matory swelling of the thickened part followed; then a fresh injury was inflicted upon the urethra, the nincous tissue was individual if nothing else happens, for somevery likely torn up extensively, and this times the symphysis pubis is separated, or was followed by fresh inflammation, which the bones are broken, or a portion of hone terminated in one of the most troublesome enters the bladder, an injury which is strictures I have encountered. He had a almost always fatal within the first 24 copious discharge of puriform matter from hours; and if the patient escapes from the the urethra, and retention of urine occa- dangers of effusion of blood in the cellular sionally supervened, but was relieved by tissue, and obstinate retention of urine, the fomentations. He had been twice under gratment, and derived considerable benefit laid. When I left the Infirmary at Edinburgh. from the measures that were then adopted. I had under treatment a man with very bad Distributes admission, some induration was stricture, the cure of which was materially the along the course of the urethra and retarded by an attack or eryspens or me perineum. The stream of urine was small, face, followed by inflammation of the upper and gave rise to combiderable smarting, part of the windpipe and the fauce, with and sometimes great pain. The urine was opaque, and was discharged, with a great quantity of mucus. A catheter was introduced on two different occasions, and the windpipe of the fauce, with the windpipe and the fauce, with a profuse discharge of purulent matter. (Mr. Coopers had a patient who died after quantity of mucus. A catheter was introduced on two different occasions, and the windpipe and the fauce, with the windpipe and the fauce, with

on will run so high, that it will be fol-by the deposition of lymph in the cel-tissue, or, perhaps, on the surface of the catheter. He get into the service of the catheter had been effected. I believe, when tient was yet a boy. I saw him labouring under dreadful difficulty in making water, and the urine was mixed up with an immense quantity of vitiated mucus. Sometimes the irritation was very violent, and seized with retention of urine in consequence of exposure to cold. The surgoon in the country had no proper instrument with him, and he endeavoured to relieve the patient by pushing in the handle of a spoon, with a small twisted old-fashioned handle, for helping sugar. This operation was followed, not by the evacuation of urine but of blood, and ever after that he had difficulty in passing urine. The stricture became and again. Perhaps he had again and again gonnorrhea. In fact there is no saying causes have been in operation, an external bruise, for instance, when it is lucky for the foundation of the worst kind of stricture is along the course of the urethra and retarded by an attack of erysinelas of the mined for some time, but not so long as and you may recollect that he showed you

ght I never should overto water passed only in drops. 1 a and again to intro ments. I get the catheter fined in the stricture, but by no possibility sould I get it through, and I had determined, as in the case of C. M., new is the house, to cut into the perinous, divide the weather behind the stricture, bring the knife forward, and expose the extremity of the extheter, intro-duced as a guide, and thus be able to pass the instrument into the bladder, and there keep it. He was placed on the table, and tied up as for lithotomy, when I found the stricture yield a little, and on persevering I succeeded in getting a very small catheter into the bladder, and then, so you are aware, the cure was in my power. So in C. M.'s case, by a little perseverance on the day on which I thought of cutting into the perineum, I accomplished my object, and a very rapid and satisfactory cure resulted. I had a young patient, who, before I took charge of the Edinburgh Hospital, had been operated upon there, in whom the stricture was occasioned by the kick of a horse in the perineum-an odd place, by the bye, for such an injury, for one cannot very well understand how the horse's hoof could reach the perineum. The scrotum was bruised, the part behind had also suffered. He richly deserved the punishment, for I believe he had put a furse bush under the horse's tail, and was tickling him in that tender region. He was afterwards further punished. for his perineum was cut into without any object being attained; when he came under my treatment, a catheter was passed, and retained for a short time. I sent him home again, but some hours after be was seized with retention of urine, and he was brought to me in great suffering and agony. A catheter was then re-introduced and retained until a profuse discharge took place, when the stricture yielded. The cure was completed, according to the method which I shall detall by-and-by.

Structure also arises in consequences the laceration of the passage in extracting the laceration of the passage in extracting forced Structure also arises in consequence of stones, or from large stones being force along by the impulse of the urine. We had a case, some little time ago, of false passage in the urethra, a fistalous sperture, through which the greater part of the urine was discharged, after the extraction of a stone. discharged, after the extraction of a stone, stone in pulse on the rectum, for the parts it appeared, from the history of the case, sympathize closely, and are acted upon that the boy had isboured under stricture, by the same muscles. If the stone cause or other. The stone had, When the stricture is pretty well confirmed, comes down from the bladder, and had the satisfact often supposing he has wholly suppose behind the stricture. He was ad-

ngs of this engenemos.) I mitted into an hospital; I shall not say where, as it is not my wish to offend an one (many in the prefession are uncom-monly thin skinned; the stone was on mile about an situh and a half boltind the original lies teak no great one of himself after that Buugles were introduced in order to overcome the stricture, but the opening could not be made to close again. He was admitted labouring under retention of urise, and relieved completely by the employme fomentations; the stricture was dilated; se that Nos. 5, 6, or 7 catheters were admitted readily. The boy did not submit to treatment very well; he was opposed to such means as would have removed the cause, which was the first object, because the abatement of the stricture was essential to the closing of the faise passage. Something more, however, would have been required. But it is very difficult to close up openings which are anterior to the scrotum. I do not know what the circumstances were that rendered an opening necessary, but if it had been possible to bring the stone through the orifice, and by introducing an instrument along the arethra, so as to divide the contraction, without injuring it from without; or, if it had been possible to push the stone back, no such bad consequences might have happened. I caution you against making an opening into the aute-rior part of the canal, for you will find it almost impossible to get the opening closed up again. Had the stone been thrust into the perincum, which it could have been without any risk, and cut out from thence, there would have been no fistulous aperture. I am not an advocate for dividing the stricture from within by the use of cutting catheters or other contrivances, but in a case where the stricture is near the orifice, shmost within sight, I do not think that any injury would result; and certainly an incicision into the perineum would be attended with less troublesome consequences than the incision anterior to the scrotum.

Having said so much to you about stricture, it is time that I should describe to you the symptoms. Slight stricture, especially after the parts have been excited, causes a frequent desire to make water, a scattering of the stream, and occasionally a discharge, a sort of gleet. The patient may apply for relief from some uneasiness in the perincum, or swelling of the testicle; when stricture is more confirmed, there can be very little doubt, from the symptoms its existence. Then the water is passed only in a very small stream, indeed, sometimes, only in drops, and with great straining, his strong impulse on the rectum, for the parts

water run off, in a minute or two afterwards. See, which, being opened, commutes a mixed probably with a quantity of viscial tity, of well-digested but their matter mixed. In state tity, changes take place in the urether, as matter awalling relations when the or well as in the binder. If the stricture and giant is seen through the early of a crimes, the muscular coat of the bladder here comes, the muscular coat of the bladder here comes, the muscular coat of the bladder here comes, mixed with matter of me placement of the place is diminished in capacity, and its mucous spriace is altered, and in the urethra, more especially behind the contrasted part, there is a distation, as may be seen in many pre-parations on the table. You find in a recent specimen the mucous cost always exceedblood. The muscular coat is four or five times thicker than it ought to be. The passage becomes very much dilated, generally speaking, behind the contraction, the necessary result of the stricture becoming tight. Sometimes great quantities of water collect in the pouch thus formed. Sometimes it is like a small bladder, and, not unfrequently, calculous matter collects in it; stones form in the perineum in this way, and it is from this pouch that the water cozes out after the calls to empty the bladder have gone off, and the patient has re-adjusted his habiliments; and if the patient be in the humbler ranks of life, and cannot constantly change his apparel, he is scarcely fit to be approached, for he smells as rank as a polecat.

The stricture, in the first instance, may involve but a very small part of the canal, presenting only such a contraction as might around the passage. But inflammation re--from injections, or from some injury of the parts, either from without or from within; or the urine being obstructed may be impelled against the part with great force, and cause inflammation. Fresh depositions of lymph thus take place, and. ultimately, the limited stricture extends until a hard cord can be felt surrounding the passage, and increasing the contraction perhaps to the extent of an inch, or even more. This hardness in the perineum is found to obstruct the catheter, and you can take hold of the cartilaginous mass in guiding the instrument through the unyielding tissue, and the introduction is only accomplished in many cases after a good deal of perseverance and pressure.

If means be not taken to relieve this direase, alceration is apt to eases in that per of the casal into which the urine is constantly impelled. If the ulceration be laufed, or sloughing occur, there is a risk of The wine being extensively infiltrated in the collular tissue; but, generally, if the urine be not completely retained in the bladder, it escapes, though in small quantities, through the urethra; the parts around the pect, that is, incision of the perincus, urethra become condensed and inflamed; division of the stricture from behind and shecese may come slowly to the sur- wards, when the water was still y

odonr. Often the greater part of the wall will come through this passage, and if the will come through this passage, and if stricture becomes more and more confirm the whole of the water may at last passeo. C patient now under treatment here is some-what in the condition described. C. M., aged 42, was admitted with a fistule in perinco, ingly thick, and loaded with dark-coloured through which the greater part, if not the whole, of the urine, was passed on admission, in the first instance, and that not very freely. When this is the case, the stricture very often yields in some measure. It is not so much excited, as the water is not impelled with such violence against it. This patient had been long under treatment, and at one time great progress was made towards a cure. But, latterly, through his own carelessness, a great aggravation of the complaint had occurred. It was, for months previous to his presenting himself here, found quite impracticable to reach the bladder, with any sort of instrument Caustics and cutting instruments from within had been employed, as is usual, without benefit. We occasionally meet with cases in which one abscess forms after another, and the scrotum is perforated by holes,-six, eight, or a dozen papille presenting in the scrotum and perincum, be produced by tying a firm small cord whole of the water coming through them. I have treated several such cases, external curs, from time to time, from various causes, injury or mismanagement having caused the passage to close entirely, not, however, without cicatrization of the surrounding tissues. Cases occasionally occur in which not a single drop of water has passed per vice naturales for several months. I had one case where nothing passed through the urethra for eighteen months, and I recollect another in which nothing was passed through the urethra for fifteen years. man positively declared that not a single drop of water had passed through the urethra for that period, though he was not very far advanced in life. How he could so long submit to such inconvenience and suffering I cannot comprehend.

What is necessary to be done under such circumstances? I believe that it is only in these cases,—when you cannot by any pos-sibility introduce the catheter,—that you should be under the necessity (excepting also in cases of extravasation) of making incisions into the perineum. I was, in the two cases to which I have alluded, very used afraid lest I should be obliged to put in practice an operation which is pretty aften had recourse to uninconsulty, I amthrough the until n, though in a very shab- violent efforts to pass water, the cavity of by way; but ultimately in both of them the that abscess, connected with the dilatation catheter was, by cantions and persevering efforts, got into the bladder, and a cure was then accomplished without difficulty or de-

I said that gradual ulceration frequently leads to abscess. Here is a very good specimen of it. Observe a ragged hole opening from the urethra into the cavity. specimen was obtained from the body of a very old man who died from the effects of extravasation. The ulceration was recent, and here you perceive is the cavity of the abscess. By the progressive ulceration the matter gradually came to the surface.

But where the urine is retained, and the stricture, from the inflammation within, is entirely closed, a different result follows. Retention of urine, I need not tell you, is very alarming, and very difficult for the patient to bear. The symptoms come on very speedily, where stricture is the cause. The bladder, though not so very much thickened, as in this remarkably beautiful specimen, is, almost uniformly, much contracted, and incapable of being dilated to any extent. It will sometimes contain six or eight ounces of urine, and sometimes not above half that quantity. The symptoms of retention, therefore, come on at a very early period, and consequently the danger is very great. In a few hours after the symptoms have commenced, the patient, perhaps, thinks he is relieved, he feels as if water dribbled away from him, he has a sensation of heat in the perineum, and he is speedily afterwards alarmed on finding a large swelling in the scrotum, urine having got into the cellular tissue in consequence of sloughing of the dilated part of the canal; or the cyst in the abscess having given away by the same process; or an abscess by rapid ulceration, perhaps, has been forming, in close connection with the urethra, by the compression of which the urine is prevented from passing along the canal. You see this happens now and then during the progress of gonorrhoes. An abscess forms and impedes completely the passage of the urine, without any contraction existing in the passage. I had once under treatment such a case of gonorrhoa, the abscess being very deeply seated, in which the urine was arrested in its flow for the best part of three weeks. It is not a good practice to introduce instruments in acute inflammation of the passage, but in that case it was necessary, for ten or twelve days before I saw him, to restored. Now where the patient makes nected with stricture, I shall then make up

behind a tight stricture, is filled with urine, as well as the posterior part of the conel, and the parietes of the abscess give way, so as to permit the escape of the fluid, containing much saline matter, and very acrid, into the cellular tissue. The cyst does not burst, as some writers assert, nor does the urethra; but they either slough or ulcorate. Some patients, with retention, get through by active and judicious management, but a great many are lost, from even slight extravasation of urine. Another very great risk, in all these cases, from such an occurrenceis, that a fatal termination takes place at a very early period, and without time being given for the destruction of the cellular tissue, the urine seeming to act on the constitution as a poison. It is rapidly effused, and attended by a secretion of putrid sanies, with a sinking of the powers of life, and a speedy termination in death.

I should have mentioned before, that we find stricture occurring at various parts of the passage-strictures from injury. The very worst kinds are generally met with in the posterior part of the canal corresponding to the parineum, in the widest part of the urethra; but the atrictures generally met with arise from acute inflammation, produced by the introduction of instruments. or the suppression of discharge. They generally occur in that part of the canal which is anterior to the sinus of the urethra. at three or four inches from the orifice. Strictures occur in the membranous portion of the canal, and they occur also, although not so often, very near the orifice. These are exceedingly unyielding, though why I cannot tell you, but contraction of one part often leads to contraction of another. that the passage is contracted behind, in the membranous portion, and the water does not come away in a full stream; the canal is never fully dilated. Naturally, one of the narrowest parts of the canal is at about three or four inches from the orifice. Here coarctation takes place, and also at the orifice, which is the tightest of all. The whole canal is, to a certain degree, diminished in caliber, and these parts more than any other. The disease very seldom exists singly. Other parts of the canal are generally affected, besides that which is first observed. In most cases you will he able to pass a catheter so far, say, through an obstruction at three inches from the introduce a catheter two or three times a orifice; but then an obstacle still exists day, to relieve the bladder. There was a forther back. Perhaps the commencement orifice; but then an obstacle still quist sort of chronic abscess formed down by the of the membranous portion of the arethra side of the rectum, and it was only when it as badly thickened as the anterior. Before it became apparent, and was evacuated by we next meet, I shall think on the subject incision upon my first visit, that the patient carefully, and if I have now forgotten any got relief, and had the functions of the parts of the symptoms or the circumstances con-

for it. I shall then speak of the treatment. You have seen many cases here, but many more cases are met with in private practice which are not admissible into hospitals, the danger is so very slight. Only the worst cases of stricture are admitted here. It is right that you should understand this, and you should be prepared to treat them scientifically. But there are a great many very difficult cases, for, indeed, many pa-tients labouring under this disease have been " bungled out of their lives " through ignorance and inattention. This drawing represents mortification of the scrotum from extravasation of urine. Patients do not often survive under such mischief, or until the parts become thus disorganized; some struggle through wonderfully, and if incisions be not made, as they ought to be, very early and very freely, the scrotum or the penis is often left uncovered and unprotected.

I should mention that occasionally the passage ulcerates towards the corpus spongiosum, and the urine is admitted into the vascular network, the penis becoming black in consequence. It is not into the body of the penis, but into the corpus spongiosum, that the infiltration occurs. The outer surface of the glans, as you are aware, communicates freely with the spongy body, is, in fact, a prolongation of that tissue. When the glans becomes black, and sloughs, it is about one of the most alarming and fatal signs which we meet with, and many are alarming enough in the disease. This is not a very common occurrence, but Sir Benthree cases in which he noticed it, and in all, the patients, I believe, perished. I have seen the appearance also more than once, but in one of the instances a fatal termination did not happen. The urine may in this way be admitted at once into the blood, and he returned by the veins into the mass of circulating fluid, and thus you can account for the bad consequences which almost invariably follow, but still a fatal result does not uniformly take place.

CURR OF ULCERS.—Dr. Cramer recommends for the treatment of ulcers, that a piece of lint, imband with the discharge, should be dipped in an impalpable powder of the intrate of ailver, and then reapplied to the sec. This he repeats every day, or very other day, and by his enforcing a quiet its applied to head to be a second of the member, he mentions his having stooded to healing the most obstinate ulcers in a period of six or eight weeks. He has fikewise employed the same powder with admittage to the granular conjunctive.—Head State of the second of the same powder with admittage to the granular conjunctive.—Head State of the second of the same powder with admittage to the granular conjunctive.—Head State of the second of the same powder with admittage to the granular conjunctive.—Head State of the second of the same powder with a second of the second of the

JERVIS-STREET HOSPITAL, DUBLIN.

CLINICAL REMARKS

BY

DR. WALLACE.

PRACTURES OF THE JAW.

JANUARY 19, 1836 .- Ward No. 4 .- Here. gentlemen, is a case of fractured jaw in a woman; let us compare it with the one in the man in the ward No. 2: the comparison will be useful. What are the relative situations of the fractures in these two cases? You saw that the man's fracture was situated just at the right side of the symphysis, that it passed between the first and second incisors. And here let me remark, that fractures of the jaw, although they are said to occur at the symphysis, never do take place in that situation, not really in it. This is what you might expect, when you reflect that the symphysis is much stronger than the part of the bone just connected with it, or at the side of it. You remark, that this woman has a fracture on the right side in precisely the same situation as that of the man, but you see she has got a second fracture; the bone is broken on the left side also, immediately in front of its angle. This renders her case far more serious than that of the man. Observe what a difference there is between them. You saw that the man appeared to suffer very little, and there was scarcely any deformity. See how much the fragments are here displaced; remark how this woman appears to suffer, what agonizing pain she seems to experience about the fractured angle, how the least motion of the head annoys her, and how she grasps her occiput with her hand to keep her head steady. She discharges abundantly saliva from the mouth, and is almost quite unable to articulate, whereas the man could speak very distinctly. What is the cause of this great difference in these two cases? I have often observed many of the distressing symptoms which you see in this woman, to arise when the jaw was fractured far back; and I have always supposed them to be owing to the injury of the trunk of the sub-maxillary nerve, which you know enters the bone near its angle, and is, therefore, much ex-posed to injury in such cases as the present, that is, when a fracture exists near the angle. There is also another reason why the double fracture in this woman should produce much more serious consequences than the single fracture in the man. The depressors of the jaw are almost all attached to the middle fragment, while the elevators are connected with the two posterior portions of the jaw; bence great displacement must arise by the different parts of the jaw. You also remark what pain is given, jaw being pulled by their muscles in differ-ent directions. The middle portion is depressed, and the posterior portions are raised, and this displacement is greatly facilitated by the direction of the fractures, which is parallel to the line of direction in which the depressing muscles act, that is, from above downwards, and from before backwards. But in the man's case, the elevating muscles being connected with both fractured portions, the action of the depressors, which are connected with the large fragment, are greatly moderated, and hence there is little displacement.

Now how have these fractures been produced? How has the fracture in the man been produced? By a fall from a ladder on the chin. How has it been produced in the woman's case? By a blow on the left side of the jaw. You can easily conceive, that the mechanism of the forces which caused the fractures in these two cases near the symphysis was different, that is, the force did not act in the one case, as it did in the other. In the man's case, the tendency of the force was to straighten the jaw by pressing the convexity of the chin inwards and backwards, and the solution of continuity close to the symphysis commenced in the inside of the jaw, and extended outwards. In this woman's case, the force being applied to the side of the jaw, the tendeucy of its must have commenced externally, and passed inwards, and most probably the second fracture occurred subsequently to the first, but by a continuance of the same force.

What difference of treatment must be adopted in these two cases? You have observed that the man seems to be very comfortable under his injury; and all that hus been done has been to retain, by a bandage passed under the chin and over the head, cork being previously interposed between the teeth at each side. The same treatment has been adopted, you observe, in this wo-man's case, where there is a double fracture, but you see it does not answer. You see how much she suffers. Now we shall give her great case by adopting the proper mode of treating such cases. The plan is to inthe weight of the unsupported fragment of affects, after a time, either mastication or

whenever I attempt to raise this depressed portion into contact with the upper jaw, or to a level with the other portion. You see she will not allow this to be done; you cannot, in fact, by acting in this manner, either bring or retain the bones in their proper situation, and even if no pain were produced, the mechanism of the parts, and the direc-tion in which the displacing muscle act, would soon render your endeavours unavailing. Welt! what should be done? You must, as I have said, depress the raised part, you must bring it down to a level with the broken fragment; and you do this by interposing a cork between the upper jaw and the raised side, proportioning its thickness to the degree of displacement. You thus depress the raised side, and make it meet the depressed side. I shall now put in this cork at the raised side. See what relief it affords; I shall next pass this in at the other side. You remark she cannot bear it; I must remove it. Now I shall apply a hand-age, as we did in the man's case. This, then, is the mode of treating these fractures. In the one case, you apply a cork at both sides; in the other, you apply it at one side only, and you see how admirably the difference of treatment is suited to the two cases. I should mention to you, that it will sometimes happen, that it will be useful in cases of double fracture to apply a second cork; action was to increase the natural curve of for example, in the present instance we the jaw, and the fracture near the symphysis might apply a cork between the posterior teeth at the left side, not as it was applied between the upper jaw and the depressed fragment, but between the upper jaw and the posterior and left fragment of the lower, which is, as well as the right side of the jaw, kept raised by the elevator muscles. This would keep this portion of the jaw down to a level with the posterior end of the depressed middle fragment. I generally, however, find that this second cork is not nethe lower jaw against the upper; bits of cessary, for there is not in this part so much displacement as anteriorly. The cause of this you will easily comprehend, when you consider the attachment of the depressor muscles.

Let me make another remark to you. You might suppose that as a fractured jaw is subject to constant motion in speaking or deglutition, its reunion would not be easy. terpose a grooved cork at one side only, that The reverse is, however, in general, the is, at the side that is elevated, and then case, and I have often been surprised at the gently apply a bandage under the base of rapidity and satisfactory mode in which fracthe jaw, so as to raise as much as possible tures of this bone unite, even in cases the depressed side. Now let me explain to where from the carelessness and garrality of you the principles of this practice. Look, the patient you might augur the worst. It first, at the state in which the bones are, is really very remarkable how admirably You remark that the portion of the jaw in- nature often works out her object in these terposed between the two fractures is much cases: yet, I have sometimes seen these depressed. This depression is caused, as I fractures remain ununited, and have them have already explained to you, by the con-had occasion to verify the remark of Boyen, traction of the depressing muscles, and by that it is surprising how little the disunion enunciation. Dr. Physick, of Philadelphia, interesting case 4 see what as alteration in succeeded in causing reunion in a case of his countenance, the last when last admitted, he this kind, by the seton. I have also ob- only a few days: when last admitted, he served, on some occasions, union to have etaken place with deformity. Hence, in saying that these cases turn out well, al-though little attention he paid to them, I am making only a general remark, and this must not induce you to pay a lax attention to them

Wast No. 8.—Oh, another fractured jaw! How was this caused? (The house-surgeon replied "that she had been thrown down last night by a carriage in the street, that she was brought into the hospital in a state of insensibility, and that it was supposed a wheel had passed over her head.") Although there is, gentlemen, considerable swelling and tenderness in the fractured side of the jaw, and about the parotid, there does not appear so much injury as would probably have been caused had a wheel passed over the jaw. The fracture may have been produced by a simple fall on the jaw. Let us see where the fracture is: you remark that it is not in the situation of the fractures in cither of the other cases; it is a single fracture, and corresponds to the interval of the first and second incisor of the left side: you also remark the nature of the displacement: the left or smaller portion is drawn outwards, and the larger inwards and backwards. There is scarcely any perpendicular displacement; this is owing to there being elevator muscles attached to each fragment. You remark that she has much more pain than the man in Ward No. 2, but less than the woman in No. 4. You see I can easily replace the parts in their proper position, by pulling outwards the left or smaller portion of the jaw, and by pressing backwards the right portion.

You may suppose, from the facility with which the fractures of the jaw in these three cases have been detected, that their diagnosis is always very easy; so it is if care be taken. You are, however, aware, that only a few days since, a man who had been discharged from prison, came to the Dispensary with an injury of his jaw, and when I told him that his jaw was fractured, he replied that he had himself told Surgeon that his jaw was broke, but that he desired him to go about his business, that there was nothing the matter with his jaw. You see, therefore, that attention is requisite, and upon some occasions considerable attention is necessary, to detect a fracture of he law; for it may happen that there is no applacement whatever, and a crepitus may scarcely be detected by another person.

only a few days: when first admitted, he kept the ward awake all night, as I was in-formed, by his coaring out with the agentizing pains of his hones, and particularly of his shins. He says he now rests most com-fortably: his shins were, on his admission, so uniformly swelled, from the knee to the ancie, that no defined prominences could be felt along the tibis, and the soft parts covering these bones were so tender, that he could not suffer the least pressure to be made on them. You see this is not now the case; there are a number of projections or exostoses, to be felt, and although the whole tibie are still much larger than natural, they feel vastly smaller than they did four days ago. These changes in the form of his legs have resulted from the subsiding of the great tumefaction of the soft parts; all tenderness seems also to have subsided. You see he allows me to make pressure all along his shin. Again, look at his skin; you remark that the groups of shining, scaly tubercles, which were scattered over the surface of his body, and on his temples, have shrunk to a level with the surrounding skin; and two of those which had ulcerated, one on his back, and the other on his breast, have healed. Now what has caused all these remarkable changes in the space of four days? Two drachms of the hydriodate of potash. He has taken half a drachm of this salt daily for the last four days. This is precisely one of those cases of syphilis in which mercury acts as a poison; and this man was half poisoned by mercury before he applied here. The employment of the hydydriodate of potash in such cases as this, is the greatest improvement which has taken place in medical surgery in modera times. This case makes the one hundred and twenty-fourth of secondary syphilis which I have so treated and carefully noted. Two years and a half have now passed since I commenced the investigation, and I have collected as great a body of facts as have ever perhaps been collected, respecting the treatment of any one chronic disease by a particular remedy. I am, I assure you, arranging, whenever I have a moment to spare, these cases, and will commence, before this month is out, to fulfil the promise, which I have long given you, of making them the subject of a series of clinical lectures on syphilis.

DISORGANIZATION OF TISSUES OF THE CALF.

Ward No. 3 .- There is a disease, gentle-Ward No. 6.—You are, I am sure, gentlemen, attending closely to this man's most

ple call, a "flag;" that the skin has a slight | muscles of the trunk of the body, as it were, and leaves a hele so large sometimes, that you could bury an orange in it. We had a similar case in Ward No. 4, a short time ago, in the person of a woman. She had been treated before she came under my care, as this boy has been treated, with poultices, and leeches, and stupes, and was not bene-sted, nor has this boy been benefited by a similar treatment. This affection yields rapidly to mercury, and, as far as I know, to moreousy alone. The woman was materially relieved, just as soon as her guns were affected; and so will this boy be relieved as soon as the slightest action of mercury is perceptible. You see how poor and delicate a looking creature he is: you would say from his appearance that he had improving. The thirst is less pain in head a very bad habit. The woman presented diminished, but the state of lassitude perthe same character of constitution, yet she bore the mercury well, and was extremely benefited by it. I may conjecture, but I do not pretend to say, what the disease is. I have told you its characters, and the manner in which you can cure it.

CASE OF

BMALL-POX COMPLICATED WITH HYSTERIA.

To the Editor of THE LANCET.

Six,-If you consider the following case merits a place in your truly independent and widely-circulated Journal, I shall feel much obliged by its insertion. I have the honour to be, Sir, your obedient servant,

JOHN J. KELSO, M.D. Lisburn, Jan. 20, 1836.

CASE .- J. F., stat. 19, of a stout make and sanguine temperament, enjoying up to the present attack, for the most part, unin-terrupted good health." Dec. 18, 1835, I saw her, and found that three or four days since she commenced ailing, but considering her complaint as only a cold, no treatment was resorted to. She was lying on her right side, in a listless, stupid state, not caring to execute any motion, and apparently unconscious of what was passing around her. Has entirely lost the power of articulation, but appears quite sensible (in the intervals of frequent fits of delirium) of the nature of questions put to her, which she endeavours to respond to by efforts in which the whole | Bemerks, The case just detailed I some

parplish colours. The lag is bent on the become roused into action, accompanied thigh, he cannot straighten it. There is with a deep and powerful inspiration, to be shen much puts in this disease, particularly instantly succeeded by a loud, protracted, when the person stands or attempts to walk, but rather modulated shout. These efforts and unless treated in one particular way, it at pronunciation are evidently teasing, if is remarkably tedious, and often ends in the not actually painful, as she requires to be death of the hardened tissue, which falls out, frequently interrogated before making them. Has severe headache, as evinced by the frequent application of her hands to the forehead; face flushed; skin hot and dig. and there appear a few specks on the chest. probably the eruption of small-pox. Tongue coated with a brown fur; pulse about 100, not full; stomach irritable, rejecting the ingesta, which is chiefly fluid, as there is considerable thirst; bowels constipated. The catamenia has been absent for these last two months. She was ordered a cooling mix-

ture, with a common laxative powder.

22. The eruption of small-pox fully developed, the pustules being distinct, and rather few in number. Irritability of stomuch has disappeared, and the appetite is sists, with a disinclination either to make the efforts at speaking, or to move herself. in bed. Towards the evening there is a feverish access, and the nights are restless. Bowels preserved relaxed by cooling medicine.

26. The articulation is returning, the words, which are very imperfectly spoken. being wholly unintelligible to me, but not so to her immediate attendants. Complains of severe pain in the lumbar region, shooting round to either groin, with a sense of heaviness in the hypogastrium. Face still keeps flushed, and the headache is occasionally violent. Tongue remains coated, but the appetite is unusually keen. Pulse about 90, rather weak. There is globus hystericus, and she cries and laughs alternately,-phenomena which set in a few days back. Habeat emplastr. lytta nuchæ.

back. Habeat emplastr. lyttæ nuchæ.
29. The pronunciation is becoming gradually more distinct and intelligible, the words being uttered at the top of an hysterical cry. There is present some debility, notwithstanding the keenness of her appetite. Sumat Tinet. Lytte gtt. xv ter in die. Vesicat. parv. dextr. mamme; hip-paths.

Jan. 5, 1836. The debility has increased. Bowels have been purged from a dose of the pil sloet, co., which she had taken. The sense of hearing is remarkably soute, and the nervous system generally in a state of considerable excitement. Nights are will restless. Has been taking bitters, wi carb, of iron, &c., for some time.

14. She is gradually, but rather slowly convalencing; some hysterical symptoms still persisting. The catamenia has not yet been restored. The tonic remedies &c. are to be continued.



sider as worthy of relation, by its affording quently observed as an anti-course, where interpeting instruction, especially on two vaccination was according to the course of the course points. First, it evidences a rare example of the supervention of bysteria on the constitutional disturbance that ushers in variols. The violence of the hysteria may be judged from the fact of the complete suspension of the power of speech for the period of six days, and from its slow but gradual return to its wonted state of perfection, which it has now nearly regained. That the occurrence of this phenomenon was owing to the hysterical affection will hardly be questioned, since the existence of the latter was both then, and subsequently, unequivocally demonstrated by other phenomena that could not be mistaken; such as the wild, loud, and hysterical cry, with which she attempted to speak, the alternate crying and laughing, oftentimes immoderately, the exalted excitement of the nervous system generally, as evinced by a marked acuteness of hearing, amounting even to pain when words were uttered rather louder than usual, and an especial sensitiveness of the whole surface of the body, with globus, &c. But the question here occurs, whether the development of the hysteria is to be attributed to the pyrexia of the small-pox, or to the amenorrhoes, which, as has been seen, had existed for a period of two months. That the hysteria did not at least immediately originate in irregularity of menstruation is pretty evident, from the circumstance of the derangement of the uterine function persisting during even established convalescence. Its development may rather be referred to the fever, the system possibly having previously taken on the predisposition from the above, in conjunction, perhaps, with other causes. But although the vast importance attached to deranged uterine action as an exclusive, or even a chief, origin of hysteria, is justly exploded, it may still be considered as acting, to say the least, not altogether an unimportant part in its excitement as a predisponent cause. Hence its regulation, if possible, in all systems of treatment, should form, as it has formed with all enlightened practitioners, an indication, in every case, of primary moment.

Next, it adds another instance to the too many that are already on record, that vaccinia does not ensure a complete exemption to the system from a subsequent attack of variols. In proof of the genuineness of e variola in this case, notwithstanding the presence of a distinct vaccine indentathe on one of her arms, I may simply enuon that ushered in the eruption, the regularity of the progress of the latter to maturity and decline, coupled with the fact of each vesicle exhibiting the characteristic central desensive and distinct, cases are not unfre- on the living economy.

vaccination was never

It may not here be out of place to state, that for the last year, and better, small-pox has prevailed spidemically, so an alarming extent, in Lisburn, and in the country for many miles around it, attacking indiscrimi-nately the vaccinated and the unvaccinated, the old and the young. It exhibited itself chiefly under the confinent form, and the number of fatal cases were uncommonly large, occurring, principally, as they did, in those who had never undergone vaccination. It was observable, too, that in all the cas which were vaccinated, and were afterwards attacked by variols,—and these were a considerable number, -it ran its course both more mildly and speedily, the mortality being comparatively trifling, the vesicles still presenting their distinguishing characteristics. But from the fact of vaccinia being thus found inefficient, in all cases, as a preventive to infection, the common people have considered the having recourse to vaccination as useless, and the opinion has extended, and is extending, propagated as it is, in particular places, by some of its officious, if not influential members, that safety alone resides in inoculating with the variolous virus. Thus in some parts inoculation has been practised rather extensively; and although, generally speaking, the result is more favourable, the disease passing through its course more mildly, yet instances of a more fatal termination are by no means rare. Besides, the practice cannot be too much reprehended, as it not only tends to abuse the public mind against what yet must be considered as a valuable substitute. but operates injuriously on society, by the propagation of a dreadful, and we would fain have hoped, a banished scourge. Viewing, however, as I do, vaccinia as an admirable and still efficient security against variolous infection, under particular circumstances, it may not be improper to mention what those circumstances are; and in doing so I only reiterate an opinion, subject, so far as my experience goes, to no exception, not lately advanced, and which has, of late, become rather popular, that when considerable febrile commotion is excited in the system, with inflammation in the course of the absorbent vessels and glands, in the in-oculated extremity, and the evolution of pustules, either round the original vaccine one, or on other parts of the body, (phenomena which fully demonstrate that the systen has been influenced by the vaccine lymph.) the most implicit reliance may be placed on its adequacy as a preventive mean against all subsequent infection. It were useless to search after any other sufficiently pression. Although it must be confessed that valid test of the geneineness of vaccine in this case the cruption was not very ex-lymph, than its demonstrable tangible effects

744 MR SAMUEL ON GONORRHEAL RHEUMATISM.—DR. FERGUSSON

With regard to the treatment of the case, there is little worthy of remark agound the fact that, as no remedies of an active nature, for combatting the hysteris, could be had recourse to during the progress of the small-post, it was left to take for a time its own post, it was see to take our a require own course. This was the more to be regretted, on account of the mallimina appearing when the cruption was about beginning to decline, as this would have been the proper time for reacting to those remedies best calculated to click the catamenial discharge, the ac-complishment of which would have proved, doubtless, an important preliminary step towards a core; but the taking advantage of nature's effort, at that time, by any active treatment, would hardly have been justifiable. Subsequently, considerable debility set in which demanded a tonic system of treatment; and as the restoring the healthy tone to the system was considered the best emmenagogue, few remedies portaining to this class were resorted to. The practice of irritating the mamme, recently so much owing to the debility then present perhaps it had not a fair trial.

RHEUMATISM FOLLOWING GONORRHŒA.

To the Editor .- SIR, my attention having been drawn to a statement published in THE LANCET of Saturday, January 16th, respecting gonorrhoeal rheumatism, I bog to say that I think this disease does not in all cases arise from the administration of copaiba. There is at present a man in the North-London Hospital labouring under this dis-case, and who has been there for the last two or three weeks, and on my questioning him, he strongly denies ever having taken any of the above medicine. The treatment adopted by Dr. Elliotson in this case, consists in the exhibition of hydriodate of potassa, with manifest advantage. The most peculiar symptom in this case is a severe pain in the soles of the feet. The following is a short account of the symptoms peculiar to this form of disease, extracted from some rough notes taken at Dr. Elliotson's lectures at the University, when on the subject of rheumatism. "Rheumatism is very much predisposed to by gonorrhea. This sort of rheumatism always affects the feet. It may affect the knees and hips also. It is also a very obstinate form. With this rheumatism there are generally attacks of superficial inflammation of one or both eyes. It is not iritis, and it is not purulent, but it is attended by copions watery secretion. Some persons never have gonorrhom without this secretion."

There have been several other cases of this form of disease in the hospital during the last year, all of which have been successfully treated by the hydriodate of potassa. Should any other cases occur, I shall not fail to make inquiries, the result of which I will forward. I am, Sir, your obedient ser-Vant

J. B. SAMURL, Bendent N. L. H. Vanzhali, Jan. 23, 1836. a

MEDICAL AID FOR THE SICK POOR. PROPOSAL FOR ITS SUPPLY ON EQUITABLE PRINCIPLES.

To the Editor of THE LANCET.

Sta,-Having been lately requested to sign a protest of the general practitioners in medicine of this part of the country, against the misrepresentations of the Poor-law lauded as an important means of eliciting Commissioners, -which, although in no way the menses, through its acting sympatheti- interested, except as the advocate of justice cally on the uterus, proved ineffectual; but and humanity, I had great pleasure in do-at the same time it is right to state, that ing; and having for many months must listing; and having for many months past list-ened to endless discussions, and read an infinity of remonstrances, and letters, and complaints on the subject, I still think that the main points and strength of the case have been overlooked, and therefore should you think this letter of an impartial bystander worth publication, I beg you will give it a place in the first spare corner of THE LANCET.

Every one will admit that our Government must have been actuated by the laudable desire of ensuring proper medical attendance to the sick poor of the country, and it remains to be seen whether their agents. the Poor-law Commissioners, have adopted the proper steps for effecting that national object, or whether they have not, on the contrary, sought to slur over the calls of true humanity, and, as I shall presently show, by practising on the fears of the established inedical officer, driven bargains with him, and, on degrading terms, exacted an amount of duty which never can be rendered with the effect sought to be obtained, because in their rage for union and centralization, they have in many instances removed the sick poor as effectually beyond his eye, and out of his reach, as if the object had been to deny them all medical assistance whatever.

It has ever been easy to be charitable at the expense of others, and the game has too often been played of seeking populty ap-plause, to the prejudice of justice. When the Poor - law Commissioners therefore claimed credit for economical reform, by advertising for the lowest tenders, and calling up the inexperienced needy adventurer from the schools, in want of a place, to un-

derbid the established practitioner who had I tion which its enactment would afford. I do long been in charge, they handed over the sick poor to serve the purpose of the former's unprincipled speculation, or held him up in terrorem over the latter, with the view of imposing conditions upon him which he never could execute in fairness either to the unfortunate paupers or himself, but which, in order to preserve the practice on which he subsisted, he found himself chilged to submit.

This surely was intimidation and not justice -far less could it come under the denomination either of charity or humanity, and as it must be the aim of every parental government to protect all classes of its subjects, the numerous medical practitioners throughout the land have a right to invoke its protecting shield against their present oppressors, and this can be extended to them effectually, only in the way of a national enactment, providing medical attendance in every parish for all the paupers, whether sick or well, in the list, on equitable terms, at so much annual cost per head, and then the Commissioners, by selecting and appointing the best, instead of advertising for the worst, may exercise, and under proper regulations enforce, that humanity to which they were so falsely laying claim

As a contract, take it in what way you will, always implies eventual gain to the contractor, every system of tender and underbidding must be bad, and in the long run the sick poor must be the only sufferers. The system I advocate, were it fairly entertained by the legislature, would be national, humane, and just to all parties. It has for ages, under certain modifications, been practised in the army and navy. It was, as I have witnessed, executed with the test effect amongst all communities of negroes throughout the West Indies, and I can conceive no good reason why, midatis iautandis, it may not be brought into operation amongst the pauper population of Great Britain. One mighty advantage would be the simplification of accounts, of regulation, and of duty. All would be comprehended, without confusion or dispute, under one principle of action; and if the reciprocity of compensation and duty be justly poised, the sick poor would be duly cared for, and the medical attendant not degradingly, because not unjustly, rewarded. Any other plan than this must be fraudulent, as laving claim to charity, and that too without effecting the object, at the expense of the medical profession, while it cannot to involve the members of this last in perual contest with the poor-law authorities; they are seeking to impose, and the other to avoid, impossible duties, and all to the prejudice of the poor. This would be clear and intelligible to every one, and should it appear so to the profession, I hope

not here enter into details to prove the foregoing, or to show first the h est established practitioner of every parish, from his know-ledge of the pauper's character, and the responsibility for his own, must ever be the fittest in the first instance, and should never be employed out of its bounds, or at beyond his best, for the sick poor require to be protected signing neglect, as much as their doctor against oppression; but I see ready to do so should my statements be dis-

Having, of late, avoided the topic, and ceased to read upon this tiresome subj (for nothing is so tiresome as the reiterated language of unredressed grievance), I really cannot tell whether the above proposal may not already have been laid before the public through some other channel; if it has, this letter will be superfluous; but if otherwise, its publication in THE LANCET may probably, in some degree, serve the cause of the profession. I have the honour to remain, Sir, your most obedient servant,

W. FERGUSSON, M.D., Impector-General of Hospitals, H.P. Windsor, Jan. 20, 1836.

MEDICAL POOR-LAW CONTRACTS.

LETTER FROM MR. RUMSEY.

To the Editor of THE LANCET.

Sin,-I have perused the leading article in THE LANCET of Saturday last relative to the mode of making medical contracts in the Poor Law Unions, and beg, in reply, to assure you that much as I should rejoice to see some decisive step taken to bring the present state of parochial medical attendance under the notice and investigation of Parliament, I should not feel justified in coming forward as you propose, to call a public meeting of the profession in London.

My reasons are as follow :-

1st. In my official capacity, as Secretary to a Committee consisting of eleven members of the Provincial Medical Association (residing in eight different counties of England and Wales). I could, of course, do nothing without their joint approbation and direction.

2nd. I am quite uncertain whether their. approbation to such a measure would be obtained, or whether they would consider themselves authorised to act in a manner not at all contemplated in their original appointment, which was for a specific object, viz. to report on this matter at the next anniversary of the Association.

3rd. It is also very doubtful whether a public meeting in the metropolis would they will arise, as one man, to seek the protec- ascertain the feeling of the great body of country practitioners, very few of whom indentures were returned to me, and I im-could attend, and still fewer could remain mediately left the table. Thus, having pregenough to enter fully into the subject, Which requires a particularly careful and calm discussion.

My own opinion with regard to the best course to be pursued on the occasion is, that I have ascertained that their indentures associations of medical practitioners should forthwith be formed in every county or district, similar to those in Berkshire, Buckinghamshire, Sussex, the Wealds of Kent, and East Kent,-that meetings should be held by each association, for collecting evidence relative to the working of the present system; for devising the most effectual means for a remedy; and for taking immediate measures to bring their views before the consideration of Parliament, either by petition, or by direct communication with their local representatives. It might also be desirable for each association to appoint one or two deputies, who might meet thrown out be milibratorily refuted by Mr. in London, and who, being fully prepared Smith himself, and the certainly ought to nofor the discussion, might agree, with affect, tice it, it will warrant the charge that his re-

However, as I am desirous that your recommendation should have full weight, I from our consultation worthy of your knowledge, I shall not fail, with your permission, affair. I am, Sir, your obedient servant, speedily to inform you of it.

As the appeal to me was public, perhaps my reply should likewise be so. I have the honour to be, Sir, your very obedient servant.

H. W. RUMSEY.

Chesham, Feb. 1st, 1836.

CONDUCT OF THE APOTHECARY EXAMINERS OF MR. SMITH.

To the Editor of THE LANCET.

Six.- I trust the interest which you have always shown in the cause of medical students generally, and in the case of a late rejected candidate for the apothecaries' license, especially, will extend to an early insertion of this letter, as it touches very materially upon one point in the report of his case.

It was stated by the Chairman at the meeting at the Crown and Anchor, and again reported in your journal, that in the course of the examination of Mr. Smith, the indentures of the candidate were produced by the Secretary, Mr. Watson. I presented myself on the same evening as the gentleman alluded to. The proceedings commenced by each signing his name, testifying that all the certificates he had produced were correct. After this, and previous to the commence-After this, and previous to the commence- and I certainly ought to have commented upon the ment of any one of the examinations, my statement at the meeting.

ceded Mr. Smith, I did not see whether his were returned to him; but from others who have passed the Hall, and, among those, one who presented himself on the same evening. were returned after the same manner as mine. Now in my case, as in others, my examiner could not have perused my indentures a second time, unless I had voluntarily produced them, or Mr. Watson or some one else had picked my pocket while my attention was so very auxiously engaged; and in that case one or two circumstances must have taken place: either the candidate or his foster tutor, Mr. Meade, has made an incorrect statement, or the indentures must have been retained specially for the purpose of their production in the manner described. If the array auggestion which I have thrown out be satisfactorily refuted by Mr. on some plan to be submitted to the Legis- Section was premeditated, and that animosity was entertained towards him by the examiners, ending in an act of foul injustice. If Mr. Smith vouches for the truth of the statehave written to all my colleagues on the ment, the Secretary to the Society of Aposubject, and if anything should transpire thecaries will afford, as a matter of course, an explanation of this most extraordinary

INVESTIGATOR. London, Jan. 28th, 1836.

MEDICAL MAGISTRATES.

Sin,-As the champion of the general practitioner, I address myself to you on a subject which interests our profession. I understand that the Lord Lieutenant of this county refuses, most peremptorily, to hear of any application made to him on the part of any member of the medical profession, for an appointment as magistrate. Has his Grace's elevation precluded him from knowing that this class of his Majesty's subjects is as well educated and more generally informed than most others, and that their conduct, their habits, and their means of acquiring a knowledge of mankind, are not excelled by those of any other? Upon what ground, then, does his Grace object to the medical practitioner? We know, for we have had many examples, that any illiterate retail trader whose success in business has enabled him to become possessed of a freehold property of the value of 100%. per annum. professing Tory principles, has no difficulty of mounting the bench.

The latter gentleman has been engaged as private thor sofficiently long to be well aware that the pro-duction of the indentures could be only computable with great leregularity in the customs of the court,

San Branch Land

Angold law which excused medical men from serving on juries, and performing the duties of parochial offices &c., and which was then intended as a boon, has of late years been converted into a reproach by the ignorant. The office of coroner was formerly frequently held by the medical practitioner.

I am very happy to see by the late municipal returns that many of the towns have appointed medical men as councillors; and I trust that, ere long, our body will take that station in society, and assume that importance, to which its intelligence and moral character entitle it. I am, Sir, yours &c. MEDICUS.

London, Jan. 23, 1836.

PETITION FOR REMUMERATION AT CORONERS' ENQUESTS.

To the Editor of THE LANCET.

Sir,-I take the earliest opportunity to inform you that at a Committee meeting of the Berkshire Medical Association, held this day at the Reading Dimensary, the following petition was prepared for presentation to the House of Commons. I am directed to request that Robert Palmer, Esq., will do us the honour to present it, and also to furnish a copy to all the members in the county, with an carnest solicitation of their support. I have the honour to be, Sir, your obedient servant,

GEORGE MAY.

Reading, Feb. 2, 1836.

To the Honourable the Commons, &c.

The Petition of the undersigned Medical Practitioners resident in Reading and its vicinity, and in other towns and villages in the county of Berks,

Humbly showeth,

That your Petitioners have been at all times willing to further the due administration of justice in their attendance on Coroners' Inquests.

That the duties which thus devolve on your Petitioners are highly important and responsible, requiring the possession of extensive knowledge, and the devotion of much time and anxious labour.

That your Petitioners are advised and believe, that the law in its present state does provide a remuneration for their services at

Coroners' Inquests.

Sec. 3.

Pret your Petitioners respectfully appresel your Honourable House, with the temperate but earnest language of complaint and remonstrance, humbly beseeching you to supply a remedy against the injustice which they thus suffer, and to enact the award of such equitable remuneration as in your wisdom may seem meet.

And your Petitioners will ever pray, &c.

ALDERSGATE SCHOOL OF MEDICINE.

LETTER FROM DR. CUMMIN.

To the Editor of THE LANCET.

Str.—My name having been very un-ceremoniously introduced into your last number by a writer signing himself "An Attendant at the Aldersgate-street School," you will perhaps allow me to set this person. right with respect at least to his principal misstatement.

The fact is this. When I quitted the theatre on Wednesday last, after lecture, found in the museum a student who said he wanted to put a question to me, and hoped would answer it. I assented. Upon which, to my surprise, he began with, "Understanding, Dr. Cummin, that you are part editor of the Medical Gazette, in which an article has appeared "———. I at once cut short has appeared "---the speaker to demand what right he had to address me in that form; I pointed out to him the impropriety of his conduct, and added that it was highly impertinent in him or anybody else to impute to me the authorship of any article appearing without any signature in the Medical Gezette.

Such was the whole amount of what passed; Mr. Skey and Mr. Furley, who were present, can vouch for the truth of what I state. The latter part, consequently, of your anonymous correspondent's letter, beginning with, "It is but just to Dr. Cummin," &c., is totally unfounded—pure and gratuitous fiction. I am, Sir, your obedient W. CUMMIN.

servant,

February 1st, 1836; 21, Great Russell Street, Bloomsbury.

Dr. Cummin having submitted to our perusal the preceding letter, we can guarantee the perfect correctness of the statement which it contains.

F. C. SKEY. EDWARD FURLEY. Aldersgate School of Medicine; February 1st, 1836.

THE LANCET.

London, Saturday, February 6, 1836.

Two or three weeks since we were instructed to believe, by the hirelings of the corruptionists, that the draft of the charter of the new Metropolitan University was in a state of forward preparation, and, moreover, that the preliminary labour had thus | verified, and they may now, perchance, if for been executed by the exemise of medical they be not totally blind, discover, that in reform. The charter was to be out in a few the very hesitation of the executive, is to a partisans of the two chief medical corpora- ciently evident that the advisers of the no person beyond the precincts of the Privy may have been the number of snares set for Council Chamber, who can obtain a glimpse their discomfiture and betraval. ter had been left to be settled quietly in hourers in the work. Even if their evil charter long since would have received the their plans, we can assure them, will not be sign manual of the King, and a precious adopted, so that neither from their heads nor charter in all probability it would have their hands will any auxiliary aid be sobeen. Not that the Ministers have no de- licited or obtained. sire to do justice to the public in this transtution was designed to effect.

the intellect prevailed on this subject in the studied silence, experience having but too Cabinet, we insisted on the production of a long proved that arrangements in medical draft of the intended instrument, and we government which were suited to the feelnow unhesitatingly contend that the prero- ings and practices of our two detested gative of the Crown with respect to char- medical colleges, would at once be spurned ters, is grossly abused, and brought into with indignation by nineteen twentieths of public odium, when it is exercised accretly, the profession. A popular liberal governin consummating measures which affect ment would hardly trust, in so important an the general interests of the people. If undertaking as that of founding a new nothing wrong be intended, whence the University, the rump of that most intolerant necessity for concealment? But the mere faction, which, even now, by its prejudices endeavour to carry on the work secretly is and higoted conduct, is daily throwing an proof, a priori, that something wrong is in-additional burden of degradation on the tended. If Charters are to be privately governing councils of the Colleges of Phyconstructed, why also are not Acts of sicians and Surgeons. Throughout the pro-Parliament? In both cases there is an gress of the discussion on the new project, equal reference to the principles of legisla- we have not for a moment doubted the intion, as well as to the details by which the tegrity of the CHANCELLOR of the Exlaws are to be executed.

sorely perplexed on finding that the predic- wholesome advice. It was imagined that tions of their hirsling tools have not been they would start the new institution with

days, and its machinery was to be set in ac- be found one of the best proofs of the tive motion by the wily fabricators, and the bonesty of the Ministers. It is now suffitions. Yet there is no charter, and there is Crown have not been entrapped, whatever of such a document. Let us hope, then, events, it will be found, ultimately, we apthat discussion, exposition, and a little salu- prehend, that the opponents of instituting tary agitation, have been productive of some a liberal University in this metropolis, will advantages to the community. If this mat- not have the misfortune to be the chief laholes and corners by the intriguers, the genius have been consulted in the design.

Although we were told, again and again, action, but because it is quite clear, from that the charter was near its completion, what has already transpired, that they were yet no hint was given of what would be its not acquainted with, or had not sufficiently conditions, and the friends of the new ininvestigated, the laws which the new insti- stitution were exposed to the incessant torture of conjecturing its contents. There Anticipating that some such obscurity of was much of discretion manifested in this CHEQUER and his colleagues. But it oc-The monopolists of our colleges must be curred to us that they stood in need of some

precipitancy, - that a simister influence his honesty of purpose, that there exists on might establish and work out the governing the part of the executive authority an erdent principle, and the dangers were magnified love for the diffusion of knowledge, said; in in our view by supposing that the well-the pursuance of that great and divine obmeaning founders commanded but a very imperfect knowledge of medical law, and of of contempt and defiance towards every inthe multifarious circumstances which are connected with the existing chartered corporations. The contrivers in this instance, on both sides of the question, have appeared to imagine that it is as easy to manufacture and set in motion a new metropolitan University, as to puff out a soap-bubble, and float it in the air. The minds of these persons, bowever, it is evident, have not been applied to the most intricate or weighty parts of the subject, or, possibly, the most active of the advisers of the CHANCELLOR of the Excuequen have consisted of two descriptions of persons,one anxious that the institution should be imperfectly founded, in order that it might experience a speedy downfall,-the other, less anxious regarding the general interests of science and the community, than for the success of one or two favourite institutions. Placed between the clashing views of individuals whose minds were thus biassed, the Ministers have not had an easy duty to discharge. The delay, therefore, which has occurred in executing it, must induce every unprejudiced person to believe that they would not willingly lend themselves to forward the sinister schemes of either faction. We still hope and believe, therefore, that the advisers of the Crown will go straight forward in their undertaking, fearlessly, boldly; disregarding the threats of enemies on the one hand, and the interested entreaties of friends on the other. A more glorious opportunity for founding a national institution, dedicated to literature and the sciences, even offered itself to a body of enlightened statesmen, and as the enemies of reform have conceded a principle, difficulties there can be none where there is found comprebuttelveness and vigour of intellect.

We are presuming, however, that there

ject, that there shall be manifested a display dividual who presumes to occupy a position which is detrimental to the hopes and prosnects of the majority of the nation. If the new institution be based upon just principles, it will not so much be the University of London as the University of the Empire, whose inviting portals will receive without distinction the sons of genius and intellectual industry. If it be designed to give an impetus to the progress of knowledge, why, we ask for the hundredth time, should its utility be lessened, its splendour be clouded, by the imposition on students belonging to certain schools, of a peremptory curriculum? The system of education should remain as free as the air; and the certificate system, as it is at present carried into operation between the schools and the colleges, ought to be annihilated for ever. What is it, in fact, but a tax which operates probibitory of honours, of fame, and of fortune, against the natural talents and prospects of the poorer members of society? This question should be answered unrestrainedly by every advocate of the certificate system, and if the answer contain no refutation of the principle for which we contend, let us have an institution which shall be devoted to the interests of the nation, and not dedicated to the sordid interests of a monied aristocracy.

IN THE LANCET of last week, we inserted a note at page 727, signed " An Attendant at the Aldersgate-Street School," in which reference was made to the alleged disclaimer of a Dr. Cummin, that he was in any way connected with the trashy thing printed every week, called " The Medical Gazette." A note will be found, on the same subject. in the present Number of Pair Laucer, from Dr. W. Comment himself. In this last production, there is a contradiction of a spectable names, which were attached in the nortion of the statement which was con- pages of THE LANCET to many of the best tained in the one first published. But what is to be inferred from the remainder of the printed in the English language. In the epistle? We put the question, in order that it may be answered by the party who is most deeply interested in the affair. Be-. fore, however, any reply can reach us from that individual, it is our bounden duty to inform Dr. W. CUMMIN, that it has repeatedly been stated to us that he is the BRODIE, he treated general practitioners as condutor of MacLEOD in printing the at- a "subordinate" class of men, and-not tacks which systematically appear in "The stopping there,-with a malignant coward-Medical Gazette" against the general prac- ice never equalled in the annals of literary titioners of this country. Out of mere or controversial turnitude, finding that he mercy to Dr. W. Cummin, and from a was incapable of coping, in arguments and dread of subjecting ourselves to the re- statements of facts, with the advocateproach consequent on giving currency to many years the only advocate-of general an incorrect accusation of so serious a cha- practitioners, the writer of the editorial racter, we have hitherto refrained from articles in "The Medical Gazette" became coupling the name of CUMMIN with that of a moral assassin, and insinuated a charge . MACLEOD in the work of slandering-perse- against the character of the advocate of the veringly and systematically calumniating,- | general practitioner, which a malignant and the general practitioners of medicine in this cowardly spirit would not allow him to make empire. Every man of honourable feeling openly, and under circumstances of just and would shrink, instinctively, on hearing that it | honourable responsibility. There continued had been rumoured that he was the writer of the despicable slanderer, whoever he may the articles in, or was in any way connected have been, behind the shield of, as he hoped, with, the editorial department of so infa- an impenetrable ambush. The disgust and mous a work as "The Medical Gazette." indignation, however, of the maligned ma-Even MacLEON, it will be recollected, sent, jority of the profession, took a direction whiningly and cringingly, to the Editor of which prompted Rodenick MacLEGO to THE LANCET, protesting that he had ceased assert that he was no longer editor of "The to be the hack of the booksellers in Pater- Gazette." In a moment of virtuous regret. noster Row. Even RODERICK MACLEOD or of Scottish prudence, he tried to escape hastened to rid his pure character from the from the responsibility of the connection. imputation of being the fabricator of a jour- Suddenly struck with horror at his position in nal, in which, at the command of employ- society, he retreated from the bar of pubers attached to the "recognised" hospitals, lie scorn, with as much precipitancy and attempts had so long been made to hold up rapidity as he flew to the Police Magistrates to derision and scorn the professional cha- of Marlborough-street, from the horsewhip racter of the great body of English medical of Mr. MACHRISTIK. Whether, in denypractitioners. MacLEOD knew, and had long ing his connection with " The Metal been made to feel, that he had, on many occasions, contrasted the "eminent names" of writers who had figured in the columns necessary, from that period, to make his of the subscription journal, with the com- conduct and character the subject of more paratively "unknown," but not less re- than an occasional cursory remark. Who

medical productions that had ever been eyes of the Editor of "The Medical Gazette" (the poor devil was whipped to his work), a knowledge of the science of medicine and surgery was confined to " hospital" physicians and "hospital" surgeons. Like his friend and colleague BENJAMIN Gazette," the statement of RODERICK MAC-LEOD was true or false, it has not been

ever may have been the writer of "The the stain which still lodges upon his repu-Gazette," whoever may have been guilty of the baseness and cowardice of attacking the private character of the Editor of THE LANCET, because that Journal was strenuous and persevering in support of the rights of thousands of English surgeons against the encroachments of the Colleges, and the insults offered to them by the functionaries of the Hospitals, the slanderer succeeded in destroying his own; at any rate, of causing the bare suspicion that any man could be the author of so much infamy, to be converted into the means of his own professional ruin. When Rope-RICK MACLEOD ceased to be the Editor of "The Medical Gazette," we know not; but we believe that the most that can be said of him at present is, that he has the opportunity of administering " bread pills " to some of the patients of St. George's Hospital. He is one of the sufferers in that establishment. His fate is redolent with instructive warning.

But to return to Dr. W. CUMMIN. The contents of his note, we tell him frankly, are of a suspicious description. He has taken a step which requires that he should advance farther, or sink back at once into the abyss of odium in which the report of his being connected with "The Medical Gazette" had thrown him in the minds of the students. There is no escaping from the dilemma but by making an unqualified declaration that he has no official connection with the editorial department of that production. Unless he be in a condition to publish such a disclaimer, he will probably spare himself many years of anxiety and fruitless toil, by at once taking his departure from this metropolis, and returning to his native country. Neither the soil of England, nor the feelings of the bulk of his professional brethren, will be found at all congenial with his professional pursuits and interests. We trust, therefore, imputations which are thrown out against that the next communication of Dr. W. the purity of that gentleman's motives in CUMMIN will be sufficiently expurgatory of attending the meeting, is one which charges

tation. Already he seems sensible that the bare suspicion of his connection with the editorial office of "The Medical Gazette," demands the substantiation of a contradiction offered under his own name, by the testimony of two witnesses. He has already made a true estimate of what must be the certain consequences of a connection with the pestiferous and odious journal in the pages of which the signs of cowardice, falsehood, and malignity, have been regularly traced by the pen of a concealed lowminded slanderer.

In the notices which have appeared in the journal so frequently named in the course of the foregoing remarks, of the great meeting of medical students held at the Crown and Anchor, the consistency of that work, in its love of calumny, is strikingly apparent. Not content with falsifying the conduct of the gentleman whose temperate and admirable behaviour conferred a dignity on the deliberations of that assembly, which could not have been adequately derived from any other source, the maligner of the students, the defender of the unjust conduct of the Apothecaries' Company, the systematic advocate of the abuses of our hospitals, and the corruption of our corporations,-this contemptible slanderer of the bulk of the English medical profession. must necessarily display his vinerous poison in making an attack upon Mr. Liston, only because that distinguished surgeon was present at the meeting, and, by his presence there, showed that he sympathized with the insulted students, and was desirous that their privileges should be placed upon a just and secure footing. In taking part with the students, Mr. Liston has committed a heinous offence, and he must therefore be made the subject of a certain portion of vituperation. Accordingly, amongst the

hist with having been actuated by a follow doubt can be extertained of his perfect facility with one of the aggricular parties capability to undergo a fair and impartial "Wis there," says the slanders, "any gramination. Nay, we can prove that one " kindred grievance to be complained of ? of the Examiners at the College of Surgeons. "Had there been a recent rejection, a who was present on the occasion in ques-" double one, of a candidate in Lincoln's tion, has since declared that the young gen-"inn-fields, to irritate the feelings of the tleman "had fairly mastered his examina-" celebrated surgeon of the North, and all tion." Yet he was subjected to the pain " at once to drive him into the ranks of and mortification of a rejection. If the " medical reform?" In the outpouring of examiner who was the author of the cruelty. his envy and malignity, the hired scribe has be exulting in his success, we tell him that forgotten that the meeting did not concern the termination of his triumph will be the a "recent rejection" in Lincoln's-inn-infliction of a lasting disgrace on his chafields, but one at Rhubarb-hall. And from whom did he obtain his information relative ing for the rejected student a public examito the "rejection" at the College of Sur- nation before an impartial public tribunal. meons? Why does he conceal the facts? Such a scruting is now claimed by Why! Because a simple statement of them would overwhelm his employers with disgrace. True, a student was lately rejected at the College of Surgeons, after two pretended examinations. And under what circumstances? The young gentleman had been upwards of six years in the profession, and his time had been thus bestowed;-

He was five years the private pupil of a distinguished hospital-surgeon in Edinburgh.

He had been nine months dresser in the Royal Infirmary of Edinburgh.

During nine months he was the clinical clerk of the surgeons of the Royal Infirmary.

During eighteen months he was physician's clerk in the same institution.

He regularly attended all the medical classes in Edinburgh, and constantly dissected during long periods in Edinburgh and London.

This contleman was rejected. Because he was not qualified? No. But, as we be-Heve, and probably as the profession will believe, because he had been the private

racter, if he be not instrumental in procur-THE CANDIDATE, AND WE ARE AUTHOR-IZED TO MAKE THE DEMAND PUBLIC. The candidate is ready, willing, and solicitous of proving that he has been the victim of injustice, and all eyes will now be directed towards the parties who are stigmatized with being his persecutors. Had the young gentleman been a private pupil of any one of the surgeons either of St. Bartholomew's Hospital, St. Thomas's Hospital, or Guy's Hospital, had he been clinical clerk to either of those surgeons, or had he produced an enormous roll of "certificates" from the surgeons of either of those hospitale, who can or will believe that he would have been rejected? Had he been placed under the circumstances just stated, some eight or ten very simple and ordinary questions would have been asked, and there the scrutiny would have terminated; but in the case of this young gentleman, a thrust was to be made at Mr. Liston, whose appearance in the metropolis has disturbed the nerves of the whole of our "consulting" surgeons, with the exception, probably, of Sir ABTLEY COOPER and Mr. WARDEDS. pupil of Mr. Liston, and thus the perse. The fame of Mr. Liston has already excuted student was made the medium of tended throughout Europe, as an operator attacking the character and reputation of and a pathologist, and, placed as he was, at the teacher. The pre-eminent qualifier the moment of his arrival in this metropolis, tions of the candidate are well known. No by his previously established fame, in one of

the most prominent places in the first man language of the states the sanction of his profession, no art, no contrivance, no of his doper to some of his nonsensical hymisrepresentation, of which the menonolists can be the authors or the inventors, can have the effect of checking the course of his brilliant and successful career. On the confrary, the attack which has been directed against him in the person of his pupil, is an acknowledgment of his reputation and power. It is a concession which the force of genius has extorted from prejudiced and tainted minds, and were it not for evidence of this undoubted and unquestionable character, we might be incapable of judging to what extent or to what purposes the minds of the hospital surgeons of this metropolis had been excited by the honourable appointment of Mr. LISTON to the office of surgeon in the hospital of the "University of London."

In publishing the lotter of Mr. Rumsey, (page 747) we have only to remark that his plan would be perfectly unexceptionable were there time for carrying it into execuadvocates of the system. One of them tion. We hope, therefore, even yet, that cither himself, Mr. YRATMAN, or some other taneous affection, from adopting the treatgentleman who has devoted his attention to the subject, will act upon the suggestion! in the last number of THE LANCET. It is quite certain that there is not now sufficient time to form county associations, whose opinions could be brought to bear with sufficient effect on the decisions of Parliament. If the meeting were convened in the metropolis, Mr. Rumsey would find that many hundreds of medical practitioners would be present. It is a question in which the entire medical body takes a deep interest.

The disciples of HAHNEMAN are becoming as numerous in this metropolis as, and not EDWARD IRVING, and, apparently, from the same cause, that is to say,

potherer, through first seducing their assent to some common-place principles which all admit to be incontrovertible. Whatever is new in the homosopathic system evidently is not true; and whatever is true, may be found in medical writings from the days of Hyppo-CRATES to those of SYDENHAM, or from the time of Sydenham to that of Cullen.

Since writing the above remarks we have received the following statements from one of our reporters. We beg those members of the profession who may think the matter worth a moment's consideration, to remember that the "new" light is not that of Acmecopathy simply. The proper name for the mania is HAHNEMANISM.

The discussion at two of the metropolitan medical societies at their last meetings have ended with remarks on the subject of Hahnemanism, Dr. Uwins bringing it forward in the Westminster, and Mr. Kingpon in the London Medical Society. Both those gentlemen seemed to think that it would be well for the profession to inquire into the merits of the new doctrine, particularly as "a number of influential merchants and had lately experienced some relief in a cument of a German doctor, and had wholly dispensed with the attendance of the surgeon to the family, because that gentleman which was submitted to the profession declined to treat the children on the homeopathic principle!" Mr. KINGDON related other cases of a similar kind. He certainly considered, he said, that it would be proper, from the influence the system had obtained over the minds of many very intelligent men in this metropolis, to prove its merits. We have heard that "the new system" is a subject of common talk "on 'Change." Dr. Uwins states that he was convinced that Dr. Quin, one of the Hahnemanists, was not likely to he led away by imagination or charlatanic views. He was also in consultation with Dr. DARLING a short time since, when that gentleman ordered three minims of the liquor ammonia acetatis in a mixture for a child, asserting at the time that he had found it exert more diaphoretic power in such doses than in larger.

It was also stated by a Member of the London Medical Society that several of his more so than, those of the late wild-headed patients had placed themselves under Hahnemanists, and that he knew two physicians of eminence who, after being unshocessful the in the treatment of several cases, recom-

A Manuel of Experiments liberrative of Chemical Science, systematically arranged, &c. By John Munaar, F.S.A., P.L.S., F.H.S., F.G.S., &c. 3rd Edit. London. Highley, 1836.

THE author of this little work is a kind of admirable Crichton in his way; there is no article of the encyclopædia that he has not written upon. Appended to the volume before us are notices of not less than fifteen treatises by the same author on subjects London Hospital, Whisechapel, an association relating to chemistry, natural history, ckperimental philosophy, medicine, navigation, theology, and the inferior mechanical

The opusculum itself is an epitomized epitome of chemistry, a selection of the plums from the pudding, a means by which, without the pains of thinking, any idle fellow may attain a sufficient modicum of practical chemistry to astonish young ladies and little boys. Every mamma, happy in clothing before they can leave the Instituthe possession of a son with an uncommon genius for the explosion of squibs and crackers, and the ignition of prosphorus, cannot do better than present him with this important volume.

, NEW OPERATION TABLE .- Those who are familiar with the scenes of confusion. and know the want of system, which daily prevail in the majority of the operating Theatres of the Metropolitan Hospitals, will feel much gratified by inspecting an apparatus, which has been contrived by Dr. Verren, a model of which is now at the Admiralty. In conducting surgical operations, we generally observe either a most ostentations and ill-timed display of instruments, or an affectation of simplicity of means for accomplishing the intended purposes, so that when any unforeseen accident occurs during an operation, the requisite instruments are not at hand. The ingenious contrivances of Dr. VEITCH obviate space not only a Table which is well adapted for all surgical operations, but having un-the day. Dr., or rather Mr. Faraday (for demeath the table, and invisible to the patient, a set of compartments sufficient to fere with the full acceptance of the Oxford

coops | contain every kind of surgical instrument. The table is so contrivad that the head of the patient can be elevated to any angle, and its length may be altered according to the height of the patient. The compart-ments are each marked with their particular contents, so that any assistant can at once supply the operating surgeon with whatever instrument he may require. Although Dr. VEITCH, who is an experienced Navy Surgeon, has designed this admirable table for the use of surgeons of the Navy and Army, yet it is equally applicable to all public Hospitals, and may be most advantageously possessed by all medical gentlemen in extensive general practice.

HOSPITAL SAMARITAN SOCIETY.

"There has existed for many years at the of extreme utility, most highly creditable to the projectors, styled the Samaritan Society. Its object is the relief of circumstances of distress in persons presenting themselves at the hospital, which cannot be provided by the Institution itself. For instance; domestics who have been obliged, by sickness or accident, to quit their places, when discharged from the hospital, are frequently without the means of support until other places can be procured. Many patients are so destitute as to require partial tion. Many are natives of distant parts, and, without assistance, would be unable to reach their parishes. Immmerable inducements exist for the formation of a society of the like nature, in connection with the North-London Hospital. Time, however, has not been afforded to organize a plan, though a subscription for the purpose was set on foot soon after the opening of the bospital, the disbursement of which has been judiciously attended to by the Matron (Mrs. Hunt), to whom, until the Society is formed, it is respectfully requested that contributions (most acceptable, however small the amount) may be forwarded." We add. our most cordial recommendation of the object, to the humane.

ROYAL INSTITUTION.

Friday, January 22, 1836.

BILICIPICATION OF PLANTS.

This was the first meeting, for this season, of the members in conversazione. all those difficulties, combining in a small observed amongst the visitors many of the most distinguished literati and illuminati of diploma by this gentleman), selected for the could not macerate, or, in any other way subject of this evening's lecture, the changes illustrate, the organic versuable dirange effected in fossil plants, which process he, ment, without in area. in common with Dr. M'Colloch, has called the efficification of plants.

Siles or silica, or, in common parlance, flint, as the professor said, is one of the most common of substances; it abounds in sand, in clay, in crystal, and in various earths; it also circulates in, and is secreted by, hiving plants, as, for example, the grasses. The properties of this substance are very suitable to so general a constituent of nature; it is insipid, inodorous, and resists the action of ordinary reagents. It also resists, to a greater degree than any other compound substance, the influence of heat. Mr. Faraday has never succeeded in reducing it to a gaseous form, and is disposed to think the experiment quoted by Dr. M'Culloch as fallacious. As Dr. M'C. succeeded in only one instance in sublimating the silica, probably the presence of calcareous matters might account for the deposition on the surface of the receiver. Silica may be reduced to a very fine powder, and the lecturer exhibited a quantity in a state of extremely minute division. It is, as already intimated, union with a common alkali; when thus fles our curiosity. united, it is soluble in water, and it may be precipitated in the form of gelatine, by the wood were kindly furnished for the occasion addition of an acid. This gelatine contracts by Mr. Brown, the celebrated naturalist, in dimension as it solidifies. The proper and Sir Francis Chantrey, the distinguished subject of the lecture was the silicification of sculptor. plants, or that delicate and unexplained process by which the original matter is removed, and supplemed by siliceous deposit. This process of substitution has nothing similar to it amongst any of the phenomena of nature;

finitely greater degree. Several examples are extant of fossilized woods, both of the endiganous and exogenous classes. are proserved in all stages of growth. the germ to the mature tree, and in all d grees of decay, even to the most fragile touchwood. What is remarkable, is the conservation, not only of the actual solid, but of the area of the vessels, which are filled up with white, or semi-transparent agate. In the decayed woods, the deficient parts are also represented by the same kind of agate. Dr. Turner has formed an hypothesis for the solution of this interesting process. He supposes these fossils to be formed in such situations as are exposed to the action of silica, dissolved in the alkalized streams of water, which are sometimes met with. Many considerations are opposed to this supposition. These fossils are al-ways produced deep under the surface of the earth, away from the influence of air and water; the theory of infiltration will not account for the fossilization of such very tender and perishable parts as the seminal ministe division. It is, as an easy moments permane parties as the same a compound body, consisting of an element leaves of a plant. The infiltration of these called silicon, and oxygen. This silicon is a plants would, as far as our present know-brown metalline body, not acted upon by ledge of physics intimates, require many water,-a circumstance in which it differs years for its completion,-a circumstance infrom other bases of earths. Silica, with the consistent with the accurate preservation of exception of calx, is the most general con- evanescent structures. Mr. Faraday is of stituent of nature; it constitutes almost the opinion, that we have no knowledge whatentire of flint, agate, calcedony, amethyst, soever of the nature of this process. He and each crystal. Flint is discovered in thinks our only mode of inquiry must be great abundance in the fissures of the confined to an examination of silica, in chalky strata, being distributed in lamina, order to an exposure of some of its occult which lie occasionally parallel to those of properties. A careful search also may detie chalk, and occasionally dissect them at velop some specimen of fossilization, where various angles, entring up the chalk into nature has been impeded in her proceedrude squares, rhomboids, and other matherings, and her nostrum betrayed, the change matical forms. Nodules of silica, in the form being exhibited as it were in transitu. The of agate, are found in the middle of other instances of recent fossilization, which have stones, where it exhibits a beautifully crystalline disposition. In calcedony, a form are mere incrustations of calcareous or even of silex familiar to many, the soft character of siliceous matter, where there has been no of the outline shows the substance to have preservation of organic forms, none of that been once plastic. One character is pecu- beautiful and incomprehensible substitution, liar to silica, that of forming glass when in which, while it excites our admiration, baf-

Several splendid specimens of fossilized

LONDON INFIRMARY FOR DISEASES OF THE SKIN.

(From a Correspondent.) - A public meetit is so particularly delicate, that the botanic ing of the friends of the above-named insticharacter of the plant is perfectly preserved, tation, in aid of its funds, was held on Mon-all the vessels, fibres, &c., being in form and day evening last at the Committee Room, colour an exact transcript of the original 51, Great Ormond Street, C. Carpue structure. The most skilful manipulation Esq., F.R.S., in the chair. The venerable obsirmed appeal the business of the meet- scalp. She was however, discharged, quite ing with the able address, explaining the ob- well, on the 22nd of Jan. 1835, and remained jects of the institution, and exercestly in- in good health until the evening of the ture, since its revival, having been hitherto defraved by the medical officers. He stated his expectations, that if well supported by the public, it might, ere long, equal in public utility the great hespital of St. Louis in Paris,—and mentioned the researches which had been lately made by Dr. Litchfield, and some of his colleagues, on the itch insect, the existence of which had been fully demonstrated by him.

The secretary, Mr. BRENT, then read a report on the state of the charity, which had been the means of relieving a great number of patients, in many of whose cases a complete cure had been effected. He stated that he had great hopes of public support in behalf of the infirmary, and that the attention he had received in his canvaes in the immediate neighbourhood, and the interest its re-establishment had excited there, had greatly exceeded his expectations. He read letters which had been addressed to him from the Duchess of Kent and the King of the Belgians, who have been graciously pleased to extend to it their patronuge, and also one from Sir John Conroy, announcing his assent to become a vice-president, agreeably to the request of the Committee.

A number of gentlemen added their names to the list of subscribers, and it was determined that the present meeting should be only preparatory to one on a much larger scale, to be held shortly at the Thatched-House Tavers, or some other public room, at which the president, or one of the vice-presidents, should be invited to take the chair.

NORTH-LONDON HOSPITAL.

ERYSIPELAS OF THE HEAD,-REMARKABLE EFFECTS OF THE EXTRACT OF BELLA-DONNA

MARY PROES, aged 32, was admitted under the care of Mr. LISTON, on the 21st of January, labouring under severe erysipelas of the head and face. The patient was admitted into the hospital on the 30th of October, last year, for a similar attack, affecting the same parts; she was then very successfully treated with tartarized antimony, incisions, and fomentations. The attack was probably not more severe than the present one, in the first instance, but it had been allowed to proceed for four days without the administration of any remedy. The convalencence was rendered rather tedions, from collections of matter forming in various parts of the stated that she had fallen on the point of

viting its friends to come forward promptly 20th of Jan. 1836, when having left the house in its aid, almost the whole of the expendivery thinly clad, she suffered considerably from the cold. During the same night she was seized with rigors, which were succeeded by heat, pain, and tingling of the head and face: on the following morning her face was so much swollen that she could not see. On being brought to the hospital on file afternoon of the 21st, her whole face and scalp were enormously puffed. and very tense; her eyes] were completely closed, the pulse 110, the tongue covered with a thick yellow fur, bowels open from medicine. She was wild and restless, and her hearing appeared to be morbidly sensible; she answered questions put to her, in a vague and hurried manner. Fomentations were applied, and a quarter of a grain of tartarized autimous in some saline mixture was given every hour.

22nd. Has passed a restless night, complains of the pain being more smarting; pulse 100; tongue still furred but moist, She was now ordered a mixture containing one grain of the extract of belladonna in sixteen ounces of water, of which two tablespoonfuls were given every three hours. The eyelids to be freely punctured, and to continue the fomentations. A ring of the nitrate of silver was drawn around the neck.

23. Very much improved, has passed a good night; the swelling and redness are greatly diminished, the surface appearing wrinkled; pulse 96; tongue still furred; bowels open. The patient says she is very much better. A small quantity of pue, which had collected over the right parietal bone, was evacuated.

24. Rapidly improving; swelling and redness nearly gone; pulse 96; bowels not open; to have a dose of house-medicine. Convalescent; discontinue the mixture.

In going round Mr. LISTON remarked that this was one of the most satisfactory and successful cures of erysipelas he had ever seen, the disease entirely, though not suddenly, disappearing in the course of a very few days. He was inclined to attribute this to the treatment, both local and general, which had been adopted, but more particularly to the administration of belladonna. This, the students might be aware, was given ; on the homeopathic principle, the doses only being somewhat increased. They had all probably seen the good effects of the aconite, and some of the other remedies employed by the advocates of homeopathy.

DISLOCATION OF THE HUMERUS ON THE DORSUM SCAPULA.

This rather unusual accident lately occurred at this hospital, to a woman, who he right shoulder. The humerus was disocated on to the dorsum of the scapule.

The following symptoms presented themhe following symptoms presented themnelves:—A hollow underneath the accountes,
and a large firm tumour, resembling a small'
range, on the dorsum acspulse, beneath the
spine of the bone, and which moved on rosating the humerus. The arm fell nearly
perpendicularly, the elbow pretty close to
the side. Mr. Moaron, the house-surgeon
reduced the dislocation, by an assistant fixang the scapula and grasping it with both
ands. Extension was then made by Mr.
M., from the hand with the arm held out at
ight angles with the lody. The head of
the bone returned with a very audible snap.
The arm was then slung, and fomentations
were applied to the joint.

To the Editor .- Sta,-Having been absent for some weeks in the country, my attention has only been lately directed to a paragraph in your journal, referring to the note of mine which you did me the favour to insert. You may remember that the note in question related to the numbers of the pupils in attendance at the new anatomical school in Kinnerton.street. I stated that there were 42 bona-fide pupils, independently of others to whom the lecturers, had given tickets. It appears that you have received several letters impugning this statement, and implying that the number of bona-fide pupils is not so great as I represented. Now, Sir, I repeat, upon my word of honour, that what I stated is strictly correct, and that the number of gentlemen who have actually paid their money for their tickets does amount to forty two. Besides these gentlemen, twenty-three others are in attendance, making in all sixty-five. As my accuracy has been called in question, you will, I am sure, permit me thus publicly to repeat my assertions, and again to refer to the books which lie on the museum table, as evidence of the correctness of my statements. I am, Sir, your obedient servant,

JAMES EVETT. Kinnerton-street, Jan. 27, 1836.

ERRATUM.—To the Editor.—Sir.,—I have observed an error of the press in my letter which appeared in the last number of your journal. The last few lines of the second sentence ought to have been as follows:—Because they have not like himself been sedgeed into attendance there," and have not gratified by an "exorbitant fee" the fraudulent extortionacy of its "governors or functionaries." The words between inverted commas are, as nearly as I can now recollect, those used in the letter to which mine was written as an answer.

I should feel very greatly abliged by your noticing the above defect. I am, Sir, yours obediently,

Rosser Davier.

King's College, Peb. 3rd.

The letter we believe was printed as written.

CORRESPONDENTS.

THE session of Parliament having commenced, it is earnestly requested that all communications to Mr. Warley may be addressed to him at his residence, 35, Bunroad Square.

In a notice of "Andral's Clinique" a short time since, we stated that the price of Dr. Spillan's translation, published by Renshaw, acarcely exceeded that of the original work. The following correction of this observation should have been made in the ensuing number: The French edition is published at forty france, and is sold in London at forty shillings; the Brussels edition is sold in London at thirty shillings; br. Spillan's translation, when complete, will sell at twenty-five shillings, being five shillings less than the foreign edition.

A Non-Professional.—The prevalence of such an "opinion" is news to us. As a matter of form, perhaps, the custom is abating. Its uses are numerous.

One of the Meeting.—The proposal would be right enough, but the parties would, unfortunately, have to struggle against the law by its adoption.

A Medical Apprentice.—Conformity with the custom ought not to be rendered compulsory, and then, whenever voluntary compliance is yielded, the terms of a proper agreement would unquestionably be obeyed. Doubtless a change will be made in the law.

We have found it impossible to insert this week the letter of Mr. Prater, and in order to give the whole of the St. George's Hospital proceedings at once, we must again defer our report from the board-room of that institution.

We will insert the letters of A Suffolk Practitioner, Mr. Bedingfield, and K.

The letter of Mr. Carmichael appeared at page 714 of our number for January 30. The very earliest opportunity was taken for giving it insertion.

We are requested to point attention to an advertisement on the cover of this week's Lancer announcing the first meeting of the attend.

Mr. JAMES BAKER (whose letter was not received until a very late hour) wishes us to draw attention to an advertisement on the cover of THE LANCET, containing some particulars of a petition which he has prepared to be presented to the House of Commons, praying for the enactment of a law charles, it was very natural for him to be both on-which shall award a just proportion of remuneration to medical men for devoting from all participation in his proceedings, and to actheir time and services in the elucidation of ke facts at coroners' inquests.

Mr. Sorwith, in a reply to the letter of Mr. Way, " must distinctly states that Mr. Way did not, at their first interview. distiaim any authority as a member of the Commitfor the course he was pursning, but that on Mr. Sopwith's refeast to comply with his request being clearly given, Mr. Way did use the threat stated in Mr. Sopwith's last letter, and," Mr. Sopinformed, that he is entitled by law to make the
with adds, "in a tone of voice which was evidently claim in question, but there is no law which enables intended to convey more meaning than the words ex- him to support it.

med. To show Mr. Way," Mr. Supwith precent that neither the prospect of exclusion from all for a sanifical meetings, nor the denial of priffusions when meeded, would induce me to forget the coin me, but that gentleman was too far lings of chaptin at my cool refus tween the morive which induce twalfy to thank him, and that expression of which is meant to convey a sense of obligations real favour conferred. That Mr. W. much surprised at my referring to his conduct the whole of his professional prethren, I call the Whote of me provisional metairen, a can reading believe, for, hergeting the had overstepped the lies prudence in his capacity of committeeman, and caractly expecting that a practitioner of only two mouths standing in the place, would presume to re-quest an explanation of his conduct before the nonsowledge that he had acted upon his own responsibility alone. With such an explanation the members of the Association were of course satisfied, hav-ing nothing to do with Mr. Way's private motives or actions as unconnected with them."

Mr. Sopwith's letter is dated Jan. 20th, but we have not before been able to secure room for any portion of it, a circumstance which has caused as regret. The insertion of several reports and communications is unavoidably postponed for a week.

A Constant Reader of THE LANCET is

METEOROLOGICAL REPORT.

(Extract from a Meteorological Journal kept at High Wycombe.)

Days.	Thermometer.		Barometer.		Rain.	Wind.	Weather.
	Highest.	Lonest.	Highest.	Lowest.	ins. Dela,	}	
Jan. 11 12 13 14 15 16 17	34.75 31.50 36. 45.50 38.75 35.75 39.50	21.75 23.50 37.50 37.50 23.25	29.03 29.34 29.65 29.65 29.53 30. 30.08	28.94 29.16 29.56 29.44 29.19 29.55 29.99	0.80625	S.E. S.W. S.W. S.W. N.W. N.W. N.W.	Cold and damp in the early part of the Week,—Lightning on the 11th, commencing at six p.m. General thaw began on the 14th. Very fine on the 16th and 17th.
Jan. 19 19 20 21 23 23	38.25 35.50 39. 38.50 44.50 49.50	40.75	29.98 30.08 30.02 29.63 29.34 29.55 29.86	29.98 29.85 29.43 29.28 29.17	0.00625	S.W. E. S. S.E. S. S.W. S.W.	The week generally du!!, with the exception of the 19th, 22nd, and 23rd, which were very fine for the season.
Jam. 25 26 27 28 39 30 31	44.75 43.25 45.45.45.60 42.50 29.	35. 36. 36.75 30.50 31.50	30.13 29.95 29.82 29.53 29.27 29.32 29.19	30.06 29.85 29.63 29.10 28.72 28.78 28.97	0.0625	8. 8. 8. 8. W. 8. N.W.	Early part of the week fine.— Rain on the 28th and remain- ing days, with snow on the 29th.

LANCE

Vot. I.)

LONDON, SATURDAY, FEBRUARY 13, 1836.

f1835-36.

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

BITY OF PARIS.

By M. ANDRAL,

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculte de Médecine of Paris.

LECTURE XI.

HYPERTROPHY OF THE NERVOUS CENTRES.

Gentlemen.-We have now to enter upon the study of a class of nervous discases different from those which have hitherto occupied our attention. We have to lay before you the history of hypertrophy of the cerebro-spinal axis, of its atrophy, of ramollissement, and, finally, of induration; after having completed the history of these four lesions, we shall occupy ourselves with lesions of secretion.

Let us commence with hypertrophy of the nervous centres. This lesion may be scated in any one point of the cerebrospinal axis, in the cerebrum, in the cerebellum, the medulla oblongata, or any portion of the spinal chord; however, we shall take for our type hypertrophy of the cerebral hemispheres, and describe the anatomical characters of that lesion, observed in this part of the nervous system, as applicable to the whole.

Hypertrophy of the hemispheres of the cerebrum is distinguished by the following

Anatomical Characters.

The nervous substance is firm and dense, and opposes unusual resistance to traction; its colour is, in general, more pale than common, and the hypertrophied tissue does not contain any considerable quantity of blood. DANCE was one of the first who wrote The lerion may occupy the whole mass of the upon this subject : you will find an excellent hemispheres, or it may be partial, occupying

memoir of his on the history of hypertrophy of the brain in the Repertoire d'Anatomie, published by M. BRESCHET, vol. 5, where the pathological anatomy of this disease is described with great minuteness and fidelity. The nervous tissue, as we have just said, scems to contain less blood than natural, and when you divide the cerebral substance into slices, you observe but few of those small reddish points which are ordinarily disseminated through the nervous mass when in a normal condition. Thus hypertrophy may exist without hyperemy. It is not an excess of blood which forces the nervous molecules to occupy a greater space than is natural, but the increased bulk depends on an augmentation in the number of those molecules themselves.

When you divide the substance of the brain, the cut gives a dry even surface, which does not present that humid aspect natural to the brain. The same appearance is observed externally; the superficies of the brain is in like manner dry, and it would seem that the normal exudation of fluid which takes place from the arachnoid and pia mater, has been either diminished or suspended. The convolutions are flattened, and approximate together; there does not seem to exist any space between: the latter circumstance is readily explained by the pressure exercised in consequence of hypertrophy. The membranes are closely applied to the cerebral surface, and seem as if they were too tight for the organ which they envelop. The ventricles are, as it were, effaced, and we observe no tendency whatever to effusion within their cavities. The nervous mass, developed beyond measure, seems to occupy the place left, by all the compressible parts yielding to make room for it.

We may now follow the lesion which we have just briefly described, through the different portions of the cerebro-spinal axis. Examples of hypertrophy have been observed in the cerebral hemispheres, in the cere-bellum, in the spinal marrow. We propose to study the lesion in each of these portions of the nervous system, apart; and lat for

Hypertrophy of the Cerebral Hemispheres.

No. 650.

but a small portion of the nervous tissue. | the causes of the Icsion now under consider-We shall put on one side the latter species, to consider it at the end of our lecture, and occupy ourselves exclusively at present with general hypertrophy of the hemi-spheres of the brain. When the augmentation of volume thus comprises the totality of the cerebral mass, two cases may present themselves, which it is important to distinguish, depending on the relative proportions of the hypertrophied nervous substance, and the osseous case in which it is enclosed and supported.

In the first of these two cases, at the same time that the brain, in becoming hypertrophied, tends to occupy a greater space, the osseous parietes surrounding it are equally developed, and we may form an exact estimation of the size of the brain from the magnitude of the cranium. In the second case the brain is hypertrophied, as in the former, but the osseous cavity does not show any tendency to develop itself; the dimensions of the skull are normal, while the relative size of the brain is greatly increased. It is necessary to distinguish carefully these two cases; for, in the first, we may have no accidents which betray the abnormal augmentation of volume in the brain; the skull being developed in the same proportion as the cerebral mass, we can have no compression, and the case may go on for a great length of time, or even to troubled in a notable manner.

In the second case, which observation has shown to be much more frequent than the first, the osscous parietes do not follow the exaggerated volume of the nervous tissue; hence the brain is necessarily subjected to an habitual compression, and various accidents may ensue; instead of the symptoms of compression, we may have those of irritation or congestion, and their numerous accompanying phenomena, all depending on the greater or less degree of disproportion between the containing and contained parts, between the cranium and brain. So much for the pathological anatomy of hypertrophy of the cerebral hemispheres. You see how it gives a key to many of the symptoms of this affection, and you will not fail to observe the utility of the arrangement we are accustomed to follow in this and our other courses, in which a description of the morbid appearances preceding the history of the disease, and its symptoms, leads you naturally to anticipate a great number of points connected with it, or at least prepares you to understand more perfectly the history of its march, phenomena, and terminations.

Can we ascend to a knowledge of

The Causes which favour Hypertrophy of the Cerebral Hemispheres?

We are compelled to acknowledge that trouble in the economy.

ation are completely, absolutely, unknown. Congestion of the brain has been mentioned as one of the exciting causes of hypertrophy; this may be the case, but we are not in a condition to prove it; in theory, we might admit that the frequent repetition of hyperemia is calculated to produce an hypertrophy of the cerebral substance, but, on the one hand, remember how paleness is one of the anatomical characters of this alteration; while, on the other hand, we have not observed any trace of hypertrophy in a great number of individuals who for a long time had been subject to cerebral congestion. It has also been affirmed, that long-continued and energetic action of the brain, particularly exercise of the intellectual faculties, may give rise to the development of hypertrophy of the cerebral hemispheres. Some writers assert, that on examining the heads of intellectual persons, of individuals remarkable for some great intellectual faculty which they possess in a high degree, the organ of the brain corresponding to this faculty or power exhibits an excess of development, a true species of hypertrophy. This may be the case; it is even probable; but truth compels us to say that it has not yet been demonstrated. We have the more difficulty in admitting the rapid development of any cerebral organ in connection with its activity, as physiology the end, without any of the functions being teaches us that nutrition goes on much more slowly in the nervous pulp than in the osscous or muscular tissues, and that we cannot in any way establish an analogy between what takes place in this latter system, as a consequence of long-continued exercise, and the development of the brain, or any portion of the brain, in persons accustomed to laborious mental occupations.

Hypertrophy of the nervous centres is not a disease common to all

Periods of Life.

Thus we are not as yet acquainted with a single case of this lesion observed in an individual who has passed the age of 35. All the cases recorded in the annals of the science, refer to persons below the age just mentioned: it has been seen at from 30 to 20 years, and even at a much earlier period of life; in one case recorded, the patient was a child five years of age. Let us now study

The Symptoms

which accompany hypertrophy of the cerebral hemispheres. In the first place we have to remark that this lesion is sometimes unaccompanied by any symptom whatever's this happens when the osseous parietes are developed at the same time, and equally, with the brain. Here compression does not exist; we have no irritation, no cause of congestion, and the abnormal development of the brain does not produce any notable

communicated to us by M. Scouterten; you will find it in the Archives Générales de Médecine, t. 7, p. 31. It was that of a child five years old, whose head had acquired a degree of magnitude equal to that of an adult. This augmentation of the skull had taken place gradually: however, the intellectual faculties were not at all troubled; the child did not differ from others of the same age: there was no modification of sensibility or motility worth mentioning. This child died from acute inflammation of the bowels. After death the head was examined; the substance of the brain was found considerably exaggerated, especially in the nervous mass situated above the ventricles, and the parietes of the skull, a little thinner than usual, were developed to a size corresponding with the increased bulk of the brain. Here then is a case where the lesion of which we treat was not announced by any symptom.

Lesions of Intelligence from Hypertrophy.

Whenever hypertrophy of the nervous centres is not accompanied by a proportionate development of the cranium, we have a series of accidents produced that may reasonably be referred to irritation or compression of the nervous substance. These accidents may be distinguished into lesions of intelligence, of sensation, and of motion. When the hypertrophy is established in a gradual and slow manner, the intellectual faculties become dull and obtuse. In all the cases which are cited by authors, and in those I have had occasion to observe myself, this diminution of the intelligence existed. Several patients were reduced to a perfect intelligence, but preserved it in a weakened form, and fell from time to time into a transitory state of imbecility. In other cases we find a perversion of the intelligence: the patient becomes delirious, or sinks into alienation of the mind, and mania. Thus you see how variously the intellectual faculties may be modified or perverted in cases of hypertrophy of the brain, when the skull does not keep pace with the development of the nervous substance. The troubles of intelligence just enumerated may be prolonged with different degrees of intensity, or they may terminate, more rapidly, in delirium, followed by come and the death of the individual. This is what we have to remark in connection with the intelligence, and the phenomena which it may exhibit. Now for sensibility; what accidents do we sterve in connection with the scusibility?

Is Sensibility Modified in Cases of Cerebral Hypertrophy?

Yes. Observation shows that in most cases the modification of sensibility manifests itself by an habitual headache: this, becom- hypertrophy. In other cases we observe

...

A remarkable case of this kind has been | ing exasperated at certain intervals, and attacking the patient most violently under the form of intermittent cephalalgia, is sometimes a symptom of cerebral hypertrophy. In the first case mentioned by Dance, it was the predominant symptom: we can easily understand how this modification of the sensibility shows itself in headache. The brain is more or less compressed in an osseous case too small to contain it, and must therefore necessarily suffer in proportion to the degree of violence it has to undergo. Several patients experience vertigo, giddiness, &c., as if affected with simple congestion of the brain, and the sensibility in general is modified. In some cases the loss of sensibility is gradual and slow; but in others, after having remained a certain time intact, it is sud-denly abolished: this latter circumstance is remarkable, and we would briefly direct your attention to it. Here is a sudden loss of sensibility produced by a chronic alteration of the brain. How do we explain this? Why should the sensation remain perfect up to a certain moment, and then suddenly disappear? It is not easy to find a reason for this phenomenon, although we have frequently occasion to remark the same thing in other organs, where a chronic disease may exist for a considerable time without producing some one of the principal symptoms which it ought from its nature to develop. Yet at a period when we least expect it, without any change in the march of the disease, or in the condition of the patient, this symptom, so long in abeyance, suddenly makes its appearance.

Lesions of Motility.

The disorders observed in connection with state of idiocy: others had not lost their the faculty of motion are various, and may he specially comprised under the following heads. In many cases we find convulsions, either appearing with little intensity, or coming on at certain intervals. This modification of motility is chiefly seen in children and infants, for it is a general principle, abundantly confirmed by experience, that whenever the nervous centres are troubled in persons of a tender age, this lesion manifests itself in the form of convulsions. In some cases we observe nothing but simple convulsive movements, repeated from time to time : in others the convulsions assume a more grave form, and present themselves with all the characters of epilepsy, terminating in the patient's death: it is a fact now incontestable, that epilepsy may depend on hypertrophy of the brain. We have had occasion to examine a few cases of this kind, and the only lesion which existed,-but it was one that was most evident, impossible to be overlooked,—was an hypertrophy of the hemispheres of the brain. Here then you have examples of excitation of the locomotive powers in connection with cerebral

somens of quite in opposite actors; The different symptoms which depend on the partients are affected with a gradual hypertrophy of the nervous centres, group bandon of motility. This weakness of themselves together in such a manner as to plete and general paralysis. It has also riods. In the first, it presents sets with all been observed that the loss of movement the characteristics of a chronic affection. Then follows the second period. The disaviolent secess of convolutions. In all we case is now acute, it marches rapidly, and have now said, you see confirmed a principle that we laid down in the lecture introductory to the present course. You here found recorded in authors, this succession of see that lesions identical in nature, -for we have treated all along of hypertrophyidentical in its seat,-for we have as yet spoken of the cerebral hemispheres only,may produce not only various, but even opis to arrive at the real cause of disease when the phenomena upon which we have to found our judgment are so diversified and contradictory. Finally, you will observe, that these sources of difficulty, common in a certain respect to all the systems, present themselves more frequently and with more obstinacy, if we may use the term, in the study of diseases of the nervous system.

Respiration, Digestion, and Circulation.

The functions of organic life also present some modifications in cases of hypertrophy of the cerebral hemispheres, but in general we may lay it down as a principle that they are not affected. The respiratory functions are not compromised unless the disease has produced a profound impression on the motility; it then becomes embarrassed and difficult, merely because the mechanical agents which dilate and contract the chest, have lost their power of acting. The digestion is not affected during the course of the disease. As to the circulation, it very rarely presents any modifications worthy of notice; in most cases the pulse beats with its ordinary degree of frequency; in one case only do we remember to have observed a disturbance of this function. The pulse is here more accelerated than natural, but as the case is solitary, it must be regarded as exceptional, and we conclude for the circulation as we have done for the respiration, that it is not implicated amongst the disorders of hypertrophy of the brain. Whenever any excess of frequency is observed, it prohably depends upon some complication of the disease, not on the cerebral lesion itself. In all the cases we have seen, except the one already mentioned, there was complete apyrexia; indeed the pulse has on the contrary a tendency sometimes to full below the natural standard. In one case the number of pulsations was seen so low as forty-five in the minute; but this also must be considered as exceptional, or perhaps it was the natural standard of the pulse in the individual who formed the subject of observation.

Becomes more and more degree a certain march to the disease, and as length perminates in com- distinguish is into two distinct forms or pecase is now acute, it marches rapidly, and the patient succumbs. In almost all the cases which we have observed ourselves or periods exists. The malady commences in a chronic form, and after having pursued its course for a certain length of time, it terminates with symptoms of an acute nature. During

The Chronic Period

we see appear successively all the phonomena that have been already noticed, except delirium; such as various troubles of the intelligence, headache, convulsive motions, and, finally, epilepsy. These different symptoms may manifest themselves smalltaneously in the same patient, or exist singly, in an isolated manner. When this chronic stage has passed through a variable period of time, the acute stage commences, and then we find various symptoms, different forms of disease. In some cases, the predominant symptom is a violent access of convulsions, in the midst of which the patient dies.

The Acute Period.

In other cases, acute hypertrophy of the cerebral bemispheres gives rise to a set of phenomena that are closely allied to cerebral congestion. These may simulate various diseases of the nervous system, and, in particular, cause disturbances very characteristic of acute hydrocephalus. I had occasion to observe at the Maison Royale de Santé a case which fully establishes the truth of this latter observation; the patient was brought into the establishment with delirium, and other signs of inflammation within the cavity of the cranium; he fell rapidly into coma, and was agitated by some convalsive motions; the breathing became embarrassed and stertorous, and the patient died. Before death, we had regarded the case as one of acute hydrocephalus, but on the autopsy what did we find? No trace of meningitis; no effusion whatever of serous fluid into the ventricles. On the coutrary, the brain presented all the characters which we have described as constituting hypertrophy of the nervous substance. This . case was a very remarkable one. The sym, toms had the strongest resemblance to those which ordinarily attend acute hydrocephalus, and might have deceived say physician.

Varieties of Cerebral Hypothrophy. In a disease where the cases that have

been observed are rare, it is useful to draw to pathology. All we can say at preyour attention to particular observations. Thus, we cannot conclude this part of our subject, without noticing the case published by DANCE, in which the patient died as suddenly as if he had been struck by a violent attack of apoplexy, although the disease had not passed beyond its chronic period. The individual, who had laboured for some time ander a violent headache, went to one of the warm-baths in the hospital; he remained about three quarters of an hour in the bath, and on coming out was seized with a fainting fit; this continued for a quarter of an hour, but consciousness never returned. At the expiration of that short period the patient was no more.

Treatment of Cerebral Hypertrophy.

We have now concluded a brief sketch of the history of hypertrophy of the cerebral hemispheres; what shall we say of its treat-It is obvious that we possess no ment? special means of combating the material cause of the disease, the abnormal development of the nervous pulp; our efforts must, therefore, be confined simply to palliate the different symptoms as they present themselves; and the means to be employed for this end are so simple, they follow so naturally from the description we have given of the accidents attending hypertrophy, that we think it superfluous to insist on them at present. We shall, therefore, pass at once to the study of

Partial Hypertrophy of the Brain.

The lesion which now occupies our attention, when confined, as it sometimes is, to a particular region of the brain, may occupy either the deep-scated or the superficial parts. In the deep-seated parts its occurrence is much more rare; however, we have seen examples of this species of hypertrophy. We can affirm with certainty that we have seen cases in which the augmentation of the nervous tissue was confined to the corpora striata; to the corpora ammonis, or the optic thalami; hence we are compelled to admit, on the evidence of our own senses, the existence of partial hypertrophy in the deep-seated portions of the cerebral hemispheres. Now for hypertrophy of the circumference of the brain.

Were I to attempt to lay before you a complete history of partial development of the combral organs, we should find ourselves at cace involved in the grand question of the rel on the relation which exists between the development of certain moral or intellectual faculties, and the corresponding hypertrophy of centain portions of the brain which he regards as the special organs of these faculties or propensities; it is impos-tible for us to enter upon this interesting journal of the Phrenological Society of Paris, No. 1, deback; it belongs rather to physiology than 1835.—En. L.

that as it touches certain parts of pathology, we shall take an opportunity of recurring to it when speaking of mental alienation.

Hypertrophy of the Cerebellum, and its Influence on the Genitals.

We have said that hypertrophy of the nervous pulp may exist in certain portions of the cerebro-spinal axis besides the cerebrum; examples have been seen in the cerebellum. When this part of the nervous centre is hypertrophied, the disease presents itself with the anatomical characters which have been assigned to hypertrophy of the cerebral hemispheres. unnecessary to repeat their description here; it may occur without any appearance of development in the cranium, or the hypertrophy may, in other cases, be attended by a corresponding augmentation in the diameters of the osseous cavity which encloses the cerebellum. Here, again, a highly interesting question presents itself. What influence does this exaggerated nutrition of the cerebellum exercise on the generative organs? Do we find the natural impulse of reproduction elevated with that development of the organ to which some physiologists attribute it? We cannot now enter into an examination of this question, which would be foreign to our purpose; however, we cannot avoid mentioning one or two particulars that seem to throw light on the connection existing between the cerebellum as an organ, and the impulse to reproduction as a function. In the year 1828, M. Felix Voisin paid a visit to the galleys of Toulon, with the express object of determining whether certain predominant faculties are accompanied by certain external signs, the indications of development in certain portions of the brain; he chose, as a test of this doctrine, the reproductive impulse; he examined and measured the heads of 372 individuals confined in the galleys, proposing to select those who had been confined for the crime of rape; the number of these individuals amounted to twenty-two. M. Voisin, without any other indication than that which he drew from an examination of the occipital region, pointed out twenty-two amongst the 372 as the persons condemned for the crime just mentioned. On comparing his list with the returns of the prison, he found that of the twenty-two so selected by him, thirteen had really been confined for rape, or attempt upon female chastity; a great many of the remaining individuals were marked as convicts of bad morals, men whose propensities in a certain way required the strictest watch over them."

Here is a curious coincidence of facts,

and, remark, that if M. Potests the movements and excessive mastufation. where all the individuals confined for the This state of passion continued unabated up crime of supp. this is no wall edjection to the sage of seventeen, when she died sud. against the proposition which he wished to e many men are led to the perious dictates of nature, not to satisfy an a portion of the cerebellum enormously actual animal want or desire, but under the developed, had projected through a deliinfluence of imagination, revenge, and vari- cleacy in the osecous case of the cranium. out other motives of a similar kind.

In some cases of hypertrophy of the torebellum, the organ seems to encroach on the lum may exercise on the gonital organs, mutritions materials of its osseous parietes. These are the principal facts that which it takes to itself to appropriate to its know in connection with the subject now development. Here a portion of the skull before us; but a great deal yet remains to is absent, and the nervous substance forms be done before we can clear up the masteheraia externally, projecting more or rious question of the relation between our less beyond the walls of the cranium. M. faculties and certain portions of the brain LALLEMAND cites an example of hernia of and their development. There is, then, a the cerebellum, although he does not say splendid field open for observation and exspecifically that the nervous substance was periment; you might collect materials for a hypertrophied. Another case, published by curious history, if you were to take all the Dr. BERNET, may be found in the Gazette cerebells you meet with, weigh and mea-Medicale for 1834, No. 42, p. 667. This is sure them accurately, and thus endeavour to a very curious example, and deserves to be ascertain what relation may exist between cited at some length: - The subject of this different conditions of this organ, and the observation was born in the year 1815, and feelings, habits, or propensities of the indiat the time of birth presented no abnormal viduals from whom they were taken, appearance; however, about four weeks; after birth, a small tumour was noticed near the right mastoid process, projecting is the next subject for our examination: it about half an inch beyond the surface of the, may be either general or partial; the latter bone. The tumour remained nearly in the form has not been frequently observed. In same condition for two years, when Mr. one case that we saw, the lesion was con-BENNET, then a student in medicine, at fined to the cervical portion of the chord, tempted to remove it; but the first incision which had acquired so considerable a degree was scarcely practised, when a medullary of bulk as to fill completely the cavity of the substance escaped, and the child sank into vertebral canal. M. OLIVIER affirms, that a state of insensibility. The wound was when the spinal marrow is compressed at closed at once, and the infant recovered after any one point, it acquires an increased voa lapse of six or eight weeks; a second tu- lume immediately above the scat of commour now appeared on the opposite side, pression. This is a curious fact. Does the and both commenced to grow by degrees, until at length they were limited by one large hase; at the age of six years the united tumour was as large as a hen's egg; it was now evident that a portion of the cerebellum projected through an opening in the cranial parietes. Whenever a slight pressure was exercised on the projecting mass, the child immediately lost consciousness, and on recovering, complained as if she had been struck roughly on the head. Up to this period she enjoyed perfect health; the intellectual and other faculties were developed in a regular manner. There was no modification whatever of the sensibility or of motility; however, another phenomenon was observed; at the age of eleven, the first symptoms of venereal passion showed themselves. The girl was seized with a furious desire for the male sex, and all the efforts brain. In the second species we do not find of her mother were unable to prevent her any malformation of the brain, but the spinal from giving herself up to the most unre-chord, enlarged throughout its whole extent, etrained libertinage. When confined to the as LARNNEC has observed, and firm in sub-

dealy, in consequence of having carried a , became many men are led to the heavy weight on the head. The examina-ion of this crims, not from the lun-liciates of nature, not to satisfy an a portion of the cerebellum, enormously Hers, then, we have a manifest proof of the influence which hypertrophy of the cerebel-

These are the principal facts that we

Hypertrophy of the Spinal Marrow

medullary substance in these cases really take on an increased nutrition, and present the phenomena of an artery above the point of ligature?

Hypertrophy of the spinal marrow may be general, and then we observe two sorts or species: in the first, the chord has been found more voluminous in children who are born with various malformations of the body, and deficiency in the brain; there is a want of balance in the development of the cerebrospinal axis, and the chord seems to have assumed to itself the deficiency of instriction in the brain. A case of the first description has been published by M. LANCERNET, in the Archives Generales de Médecine, t. 5. The disease is congenital in these cases, and, as we have remarked, the hypertrophy of the chord is a supplement to the atrophy of the chord, enlarged throughout its whole extent, house, the imperious desire by which she stance, alls the vertebral sanal, and it are twas tormented, declared itself in abandoned by applied against its osseous paristing. The Symptoms of Hypertrophy of the Spinal Marrow

are not, in general, marked with any degree of clearness; on the side of the intellectual faculties nothing has been observed; in one case, where the augmentation of volume was confined to the cervical region, the patient, an infant, was subject to epileptic fits; how-ever, we cannot say if this lesion were the cause of the disease or not, although the former is probably the fact. The absence of any striking symptoms depends perhaps on the circumstance that the chord, in this respect unlike the brain, has sufficient room to increase in its osseous case, without suffering compression, and does not give rise to any trouble of the great functions, unless congestion adds its influence to the operation of the original disease.

NORTH-LONDON HOSPITAL.

CLINICAL LECTURES

ON CASES OF

DISEASE OF THE URINARY ORGANS.

Delivered in the Session of 1836. BY MR. LISTON.

LECTURE II.

Abscess with Stricture .- State of the Bladder.

GENTLEMEN,-The last time I had the pleasure of meeting you here, I endeavoured to explain to you, and to make you understand, the symptoms of stricture of the urethrn, and some of the consequences arising from that disease, and I illustrated these remarks by reference to cases ander treatment: I detailed to you the pathological changes which occur, the alterations that take place in the urethra itself, the manner in which the contraction is formed, the state of the passage, both anteriorly to the stricture and behind it. I explained how abscess formed behind the stricture, coming on sometimes very slowly, and ultimately bursting, with yery great relief to the patient, a con-siderable part of the water, after a few days, heing discharged through the opening, either. in the perineum or in the scrotum,—some-where thereabouts. Occasionally the ab-scess bursts into the rectum, giving rise to very unpleasant symptoms, and complicating the case considerably. This occurrence substance of the kidney itself becomes disin general follows after severe injury of the organized, diminishes in bulk, is softened, perineum. I have seen it happen in two or and, in some cases, almost entirely disapthree patients who had been bruised se-pears, presenting marrely a sort of bag, wenely about the polyic region from hanks formed by the anlargement of its pelvis,

of earth, for hestance, falling upon them, though occasionally abscess forms far back in the canal in consequence of stricback in the canal in consequence of stric-ture, and bursts into the rectum, the greater part of the water being discharged through that channel. I stated to you also the changes that take place as regards the bladder. The balance is such case is lost, or, as the parase is, there is a want of con-sent between the expalling and the retain-ing powers of that visues, which becomes contracted, dissinated resy much in size, and its coats are remarkably thickened, in consequence of the resistance that is offered by the narrowing of the massers. I nointed by the narrowing of the passage. I pointed out to you some specimens in which the muscular coat of the bladder was remarkably thickened, in which, in fact, the parietes resembled more those of the left side of the heart, than those of the bladder in its normal state. The mucous cost undergoes some alteration, and becomes more thick-ened and vascular, the mucous coat, occasionally, being found to protrude between the meshes of the muscular cost. Pouches are thus formed which often attain a very large size. I have in my collection some preparations, which, however, are rather bulky, and not convenient to remove, with several pouches so large as to be capable of containing a small orange. These pouches sometimes attain even a larger size, and seem to resemble almost another bladder. When the opening of the pouch is narrowed, the fluid is first evacuated (whether by the catheter or by the natural efforts) from the bladder itself, after which it comes away from the emptying of those sacs. Those appendages occasionally contain a considerable accumulation of viscid and acrid mucus, and there is no doubt that the abscesses connected with the bladder, which occasionally burst above the pubis, sometimes have their origin in this protrusion of the mucous coat through the muscular marietes.

But the mischief is not confined to the urethra and bladder only, for you find that in cases of stricture, sooner or later, the ure-ters and the kidneys suffer. You find, more especially when the patients have laboured under retention several times, that the ureters are immensely enlarged, and present a very wide caliber, almost resembling the small intestines; their parietes also are thickened; the pelvis of the kidney is enlarged, in consequence of the sort of valvnlar arrangement of the opening from the urster into the bladder being obliterated. If a patient suffers frequently under retention, the ursters and the pelves

with very little secreting substance at all. | panied or not by a discharge, and, perhaps, In cases of retention of arms, you can with some uneasy symptoms about the easily satisfy yourselves, from the symptoms, that the kidneys are more or less affected. When retention has existed for a considerable time, the bladder becomes dis-tended, to a certain extent, and then the secretions are suspended in a great measure but after the bladder is relieved (the pressure probably being taken from the secreting substance of the kidney), the secretion is re-established with great vigour, and the bladder is filled, in the course of an hour or two, to as great an extent as in the first instance. When the kidneys and ureters, more especially the kidneys, are disorganized, from this or from any other cause, the patient may be relieved for a time, the symptoms may be palliated, but his ultimate recovery cannot be expected. He is then in a very precarious condition.

The Treatment of Stricture

demands your closest attention. It is a disease the management of which requires a great deal of skill and derterity. I do not speak of the strictures which are usually met with-slight contractions of the passage, the mere spasmodic contraction, which is attendant upon thickening and irritability of the mucous lining of the canal, accom-

* Mr. Liston exhibited at the commencement of the following lecture a very remarkable and beautiful specimen, illustrative of this pathological change in the bladder; it was obtained from the body of very young patient, under three years of age. This child, very delicate, was somehow seized with retention of urine, labouring under it unrelieved for several days. At last a catheter was used. It was found necessary to continue the introduction of the instrument twice a day for many weeks, the power of expelling the contents of the bladder having been lost. The patient was sent to the Hospital, under the supposition that he laboured under calculus vesicæ. No stone could be detected. All means were employed to palliate the symptoms; but the child, labouring under mesenteric disease. greatly emaciated, at length succumbed. The bladder is capacious; the surface rough and fasciculated. In the posterior fundus is an opening with rounded edges, of the size of a half-crown piece, leading to a cavity formed by a protrusion of the mucous cost, and capable of containing at least 5 or 6 ounces of fluid. The urcters are amazingly enlarged, and thickened in their coats, they resemble the small gut of a child; and the pelves of both kidneys, especially the right, are immensely expanded, the cortical and secreting part of the gland being spread out and attenuated,—Rep. L. parts. That is very easily got rid of by the occasional introduction of a proper instrument. There are before you a great variety of

Instruments used to Dilate and Examine the Urethral Passage.

All sorts of flexible and soft instruments are employed for the management of these diseases; but great objections may be offered to the majority of them. They are apt, unless very cautiously and properly used, to turn up, and bend, in the canal, They come out in a form like a hook, by being pressed against the stricture. or, again, if their points are entangled in the stricture, and efforts are made to press them on by turning and twisting them about, they come out like a cork-screw, well bathed in blood. You can never de-pend upon getting a bougie of this sort through a stricture of the urethra possessing any degree of tightness and clasticity. You are apt to do a great deal of barm with them. If you do insist on employing such tools for ascertaining the existence of a contraction, or for exploring its nature, seat, and extent, they must be used with very great caution indeed. It has been proposed to examine the passage with silver balls of different sizes mounted on wires, but these are scarcely ever employed now. The best instrument for the purpose, I believe, is a metallic bougie, such as I now show you, and you require to have them of different sizes, from below this size to considerably above it. Those, I think, are the best which are made of solid and firm metal, and plated over. You may have them of silver, if you will, but they answer the purpose perfectly well if their surface be smooth. You know exactly where the point of an instrument such as this is, is resting. You can direct it in any way you think proper, by a slight move-ment of the hand. Pressure makes the point obey your will, and you can overcome every difficulty with the greatest facility. But in most cases, in trifling strictures, there is no obstacle. A great deal has been said about the lacung of the urethra entangling and obstructing the passage of the bougie. A very small flexible instrument may be so arrested. The contraction of the muscles may, occasionally, also, prevent, for a little time, the

Introduction of the Instrument but by using an instrument of proper form and size, and by slightly diverting the attention of the patient, these difficulties are, in general, easily got over. I have frequently seen, where there has been slight obstruction from this latter cause, that by

turning the patient's attention in another direction, by diverting him by some trifling observation, or maucuvre, the instrument bas passed in immediately without any difficulty whatever. The muscles surrounding the bulb of the urethra, and the membranons portion, are those muscles which, by irregular and spasmodic action, may offer opposition, but by a little perseverance all these obstacles are to be got over. These muscles are sometimes thrown into powerful, and, in a measure, involuntary ac-tion, in consequence of the instrument coming in contact with the disordered and excitable portion of the lining membrane; the further progress of the bongic is thus opposed and prevented unless unjustifiable pressure is made and continued. Upon the pressure, which should be on all occasions gentle, being relaxed, the bougie is forthwith extruded; this is sometimes followed by the escape of a small quantity of blood, which shows the degree of tenderness of the mucous lining, and congestion of its vessels. The instrument is to be passed, if the patient be in the erect position, with the convex portion towards the abdomen. It is allowed to fall in by its own weight, by a tour-de-maitre, as it is called. You bring the concavity upwards, and then by degrasping, a slight tightness of the passage from the action of the muscular apparatus supporting and surrounding it. That is very specify overcome by gentle perseverance.

Object of the Introduction.

The introduction of an instrument thus gently, affords relief to the patient by diminishing the irritability of the passage, and, if there be any thickening, by promoting the absorption of that thickening. You are aware that the application of mechanical or chemical stimuli, from time to time, to any surface which is naturally irritable, or which has become so from disease, exhausts and diminishes the excitability or the irritability of the part. You introduce the instrument with that view, and allow all the effect of the introduction to pass over before you attempt to introduce it again. You perhaps introduce the instrument when the patient applies to you, allowing four or five or six days to clapse before you attempt it again, and upon the second occasion you will probably get the instrument through the contraction with greater ease; there is, per-haps less irritability, you withdraw it again, and you are enabled to pass one of two or three sizes larger; and in this way you steal a march on the disease, and the patient in a few days is relieved from all his unpleasant symptoms, both as regards the urethra itself, the parts surrounding it, and those parts, also, which have sympathized with it.

Now, in cases of this kind, slight and trifling strictures, as I have called them,there is no use in any other mode of proceeding,-no necessity for having recourse to caustic, which was at one time very extensively used, and used in cases of all kinds -in real and in supposed strictures. People were made to believe, when they applied on account of any uneasiness in this quarter, that they had stricture, and a course of

Caustic Bounies

was then entered upon. A great many people were humbugged in that way, and, as I said before, were even "bungled out of their lives" in the end. DARAN was amongst the first, I believe, who thought of these bougies. The soft bougies are made of wax and resin, or ingredients of that kind, spread upon slips of cloth, and rolled up with a machine; and into this composition Armenian bole, red precipitate, and things of that sort, were wont to be incorporated, in order that the instrument might have a more powerful effect on the contraction of the passage, from whatever cause that contraction arose. DARAN thought there was a sort of wart or caruncle in the passage, and he introduced these escharotic substances, in order that they might act upon, pressing it very gently, you get over every and dry up, or corrode, the warty exobstacle. You may find, perhaps in the crescences. Mr. John Hunter took up membranous portion a little resistance and this subject, and he substituted for the escharotics in use, the nitrate of silver, which, however, he did not use very extensively. He, again, was succeeded by Sir EVERARD HOME, who made a very good job of it. He long enjoyed a great practice in this line, and he made a point of treating almost every stricture in this manner, Mr. HUNTER used his caustic to the anterior and the straighter part of the urethra, by means of such an instrument as I now show you, by means of what was called a "porte caustic,"-a canula, with a wire sliding in it, and a sort of contrivance for containing the caustic at its further end. Sir EVERARD Home, again, fitted the caustic into plaster bongies, such as you here see. Here are a lot of bougies [exhibiting an immense number], for I began to study when the caustic bougies were in great vogue, and with these I provided myself, although I cannot say that I ever used them very frequently. The caustic is inserted into the end of the bougie. Copious directions were given as to how it is to be put in safely, and so on. It seems that the position of the stricture was first ascertained by a soft wax bougie, whether white or black is of little consequence, and then a mark was made on the canstic bougie, corresponding with that on the other; the caustic or "armed" one, as it is denominated, was then slipped down, and held in contact with what opposed it, for a minute or less, according to the determination of the patient or the operator.



This practice has been again revived by lightly; in fact he seems to give it the go-by. Ducamp, Lazamann, and others. What I here, again, show you, are some of the instruments which have been invented lately dred and two times. In another year it was, for the purpose. They consist of a straight applied one hundred and forty-eight times, or a bent canula, with porte caustics, which are to be passed through the stricture, so that the caustic may be applied to one side or the other. There are little cavities in which part is pushed through it. The caustic is thus applied to whatever side of the canal is supposed to be most diseased. Here are others, for taking an impression of the part previously. This is just a return to the oldfashioned absurdity of measuring to ascertain the site of the stricture, getting a mould of it, and then pretending to burn it out,—a capital way of picking people's pockets you may depend upon it. This caustic did, undoubtedly, sometimes do good, because when nitrate of silver is applied it will diminish the irritability of the part, and sometimes the patients passed their water easier, and the bougie slipped more readily through the stricture afterwards. The remedy was all very well when employed in this way, lightly and seldom, so as to diminish the irritability of the canel; but when it was applied with a view to drive a mine through the part, to destroy the living stricture, why then it did a great deal of harm. I don't mean to read all the books to you which I have here, but I have brought them in order to let you see the sort of practice that was pursued when I began to study. Here is

One of Sir Everard Home's Caustic Bounie Cases.

for an example, and if no great good was done to the patient by this practice, depend upon it it was very advantageous to the practitioner. The case is one of many of which the book is made up. The patient, a gentleman, had had a clap when sixteen years of age; the inflammation was very severe, and lasted nine or ten months; then a gleet came on; he used astringent injections; the discharge stopped, and the urine was voided with difficulty. The gentleman then applied to Sir EVERARD HOME, who examined the urethra with a bougle, and applied the caustic. Up to a certain time the caustic was applied fifty-one times; then, causic was applied inty-one times; then, that have recommended and ten times; then the patient went into the country, and which is called a "lanewas applied one hundred and ten times; then the patient went into the country, and which can be made to protrude at its point, had it applied thirty-eight times. This is lit is a very dangerous sort of tool. Indeed related in a book which Sir Benjamin it do not know who would choose to have Broder recommends as a very valuable and this introduced into his urether. It must be excellent work! I do not know whether a highly dangerous proceeding in the hands

a pretty source of revenue at a guinea a time, I should think. From November to the end of June forty times. In all four hundred and eighty-nine times in this one the caustic is put. One part of the apparatuse! But there are some other, cases tus is carried down to the obstacle, and that equally good, if not better. This patient continued free for some time from any relapse, but he was still under the necessity of passing a bougie daily into the urethra, and leaving it in the canal for half an hour at a time, to keep the canal in a state of freedom. Now who will be bold enough to call this a cure? Why, after all the four hundred and eighty-nine applications of caustic, he was under the necessity of using a bougie from day to day! A pretty account this, from the surgeon's own mouth, of the success of the practice which he recom-mends. Yet for years such proceedings were lauded, and nothing would go down but treatment by caustic bougies.

But this has given way to another piece of nonsense, I can call it nothing else,-the cutting of the strictures from within, the using of

Cutting Catheters,

which are not a whit better, or more safe, than the caustic, depend upon it. This practice has been recommended by various surgeons, and I now put before you the various apparatus of those different people. Here, in the first place, is that of AMUSSAT: it is composed of a straight silver bougie, in two parts, joined by a screw. This is passed through the stricture first. (You know very well, that when we can get an instrument like this through the stricture, we consider the cure to be all but complete.) Then the canula, with cutting edges at its extremity, is pushed over, the penis being grasped and pulled forwards, so as to put the urethral canal apon the stretch. The instrument is constructed to cut the internal parts, in the same; way as a stricture in the rectum has sometimes been cut when it is unyielding. It is no bad notion, but still it may prove injurious, and it is a practice which is not required. This instrument I had from Amussar himself, and is one which I saw him use. Here, again, is another contrihe recommends the practice now or not. He used at one time to talk in commend-tion of it, if I mistake not, but on his own is small catheter is to be passed, with the wire book he passes over the subject rather in it; the catheter is then withdrawn, she

wire being left; the wire is then carried whistle, scooping it out as you would the through the centre of this cutting instru-ieve of a poisso. It might be called the ment, and is intended to serve as a guide to it. It would be all very well if you had any means of fixing the farther and of this wire. and made a fuss about. Some of you may ment, and is intended to serve as a guide to If you could but put your fingers in any way into the bladder, and lay hold of the wire, then the conductor would be perfect, and you could push the double lancet down, and divide the parts safely enough. There are other machines of the same fashion; here is one of LALLEMAND's, and I think it is safer than most of the others. A little lancet is protruded, and the stricture is cut, either by pushing the instrument forward, or in withdrawing it,—all very pretty things to look at, and very useful to the instrument-makers, who of course approve of them; but not so to the patient, as he finds, in the end, by sad experience.

Now in slight cases of stricture, none of these plans by caustic or by cutting can by any possibility be required; and in had cases no good can result from them. If you could succeed in boring a hole with caustic through a contraction,-and you might do so, were you to use the kali purum, the infernal stone, as it has been called, and which has even been recommended by some innovators and schemers, you would not benefit the patient,-you would certainly leave the patient after great suffering, in a worse state than you found him. Great and imminent dangers arise from the use of any caustic. There is risk of hemorrhage, of rigors, of false passages, and I cannot tell you what else.

But even if you could succeed in passing through the obstacle, you would leave a large internal sore behind, and what are you to expect from the cicatrization of that? Why a worse contraction than existed before. The same observation might be applied to the employment of the cutting in-struments. No good can result in a very tight stricture, by dabbling at the near end or commencement of the contraction, with any of them. You would no doubt make a breach of surface in the membrane lining the passage, but you would not succeed in getting through such strictures, as you see in these specimens or drawings, - such as those which patients in the hospital labour under-strictures involving an inch or more of the trethra. You produce, perhaps, a solution of continuity in the inner surface of the cand, and you must have a cicatrization and contraction, in consequence, in that pagt. Moreover, your patient will very soon labour under a worse stricture, one more tight, confirmed, and unyielding, than you first found him with. I am astonished that some of the clever people who have turned

take the hint and publish a book on the subject. The name is at your service, and you might get a good deal by it.

Now these bougies for burning and cutting you are certainly not warranted in employing in ordinary cases of stricture, and in cases of tight stricture, and all cases of stricture involving a considerable nortion of the canal, they cannot possibly he applied with any advantage whatever. What are you to do then? I would have you proceed in the way you have seen cases managed in this hospital. Some of them have, I am sure, been turned out cured after a very short process. I would have you attempt to get an instrument through the contraction, and if you succeed in your object, however small the instrument may be, you will ultimately have but little difficulty in overcoming the disease. I am talking of bad strictures now, such as I showed you preparations of the other day; such contractions as you see in some of the preparations in muscums in which punctures above the pubes, and punctures in different parts of the bladder, have been resorted to. I have none such in my collection. You are, however, to try to pass an instrument, and if you succeed, as I have said, in getting one through, however small the instrument may be, the cure is completely within your grasu. A great deal of care and caution is necessary in the introduction of instruments in such cases. Sometimes you may be foiled in passing an instrument in the first instance, but if any water come through at all, if the bladder be capable of relieving itself in any way, you are not to be disappointed; at least, if you have gone about it gently, in general no had effect can result. You will attempt the introduction at another time, and perhaps succeed at last in getting one through, and there you would retain it.

Proper Catheters .- Mode of Use.

The instruments which I should recommend to you in tight and bad stricture, are catheters, such as I now hold in my band, pretty firm and well tempered, which will not bend and yield readily. You may use them of any curve you please, the less bent the better. These are good old-fashioned catheters with large metal rings, by which you have quite a sufficient hold. They are far to be preferred to the new-fangled tools with wooden handles, well furrowed, in using which you lose the advantage of that delicacy of touch by which alone you can guide the their attention to this subject should not point of the instrument certainly and safely have thought of employing a "punch," as to its destination. I must say I do not fancy it is called, on the end of the catheter, and any instrument whatever with a rough taking a bit out of the canal, as clean as a handle, and far less sounds, staffs, and ca-

theters, which are intended to be passed into deep hidden parts, and the sale conduct of difficulty in passing a Catheter which depends upon the malious of the than when the bladder is capable of reliev fingers, regulated by the feelings commu- ing itself, because then there is a straining and perhaps that there is a second contract [Air. Hay, one of the very many diligent put in great safety pass forward the eatheter, because you are uncertain whether the resistance is offered by the grasping of the first stricture, or whether it is owing to the considerable time before he came in, and impression, that the patient had not for a first stricture, or whether it is owing to the considerable time passed any water at all opposition of the second one. You retain the catheter for a little while. If you are by perseverance the catheter was at last got any stricture, and it is an chieft to get the cat list to blockler. anxious, and it is an object to get the ca- into the bladder. I have before me the notes theter into the bladder at that time, you may of a somewhat similar case, written by the withdraw the first instrument, and then try patient himself, in which he says, that in one of half the size. That will not be held the latter end of 1826 he had a stricture. by the first stricture, and you will then probably get it readily through the second, and
loige it in the bladder. But you will recollect that there is a dilatation always behind
the stricture, and you must be exceedingly
cautious in passing it through the prostatic
portion of the urethra. The ducts are alportion of the urethra. The ducts are alportion of the urethra wise and if you do not
according to the prostatic processory. intention of enabling you to ascertain exactly what direction it is taking. You withdraw the catheter a little, and pass it on again, if there be a resistance, until you passing of the water of course affords evidence that all is right.

Now, as I said before, you may find it impossible to pass the instrument in the first instance, but you are to try it again and again, and at last you ought to succeed. so ill on his voyage, that for the last nineurethra, although it may be in a very shabby where water was passing away, been very serious local mischief would have taken much afraid, lest I should be called upon to place, and that other bad consequences did cut into the urethra behind the stricture. not occur is astonishing. A swelling formed You may be called upon to do so in cases behind the acrotum, and burst; an abscess where you have been foiled in passing the had formed in the perineum, and he was instrument through the urethra. But I relieved. Upon his arrival in this country think that

nicated through their nerves. In looking of the bladder. The urethra behind is conover the stores of instrument makers, one siderably distended and colarged, and there would be led to suppose that the different is less difficulty in finding the canal behind cutting and boring machines had been continuous the stricture, than there is when there is trived by some very nervous and shaky retention of urine. I should say, that some gentleman who was obliged to hold on like times, even where no water has passed at grim death, lest his finger and instrument all, for a long period, through the natural in his excessive agitation should part company. You must begin with a small one, theter through. I have had to treat some You will pass it down, and probably get it very had cases at one time and another. I through the first contraction, by which you mentioned to you a case the other day, that willfind it firmly embraced. You may over- of Martin, who stated that he had passed no come the resistance thus occasioned, and water for some time before he came here. find perhaps that there is a second contrac- Mr. Hay, one of the very many diligent puby the first stricture, and you will then pro- He went to a warm climate, and a short ways increased in size, and if you do not again, but became so bad in 1835, that none take care, the catheter may get entangled in of the medical men could pass the smallest one of these, and if you persevere in press-bougie, and his water came away merely by ing it forward, you may do a mighty deal of drops, with the most excruciating agony, harm. You should pass your finger into the rectum as a guide, not with a view of minutes. From the external opening of the changing the position of the point of the in- urethra to the entrance into the bladder, strument; that you cannot do; but with the the parts, he says, were swollen enormously. He was told that he laboured under disease of the prostate. Indeed, it is astonishing how many practitioners fall into the blunder of supposing that young men are laboursucceed in lodging it in the cavity. The ingunder that affection, for it is only in old age that the sort of hypertrophy, or enlargement of the prostate, takes place. There is no disease of the prostate gland in young men; the obstacle is generally situated far-ther forward. He was sent home, and was If any water comes away at all through the teen days in August, he states that he could not make a single drop of water, and superway,—by mere drops,—you ought to succeed in getting the instrument into the bladder. I have, in two or three cases, neys must have been suspended, otherwise he applied to medical men in his neighbour-

hood, but they could not pass any bougie, and for two months before he came to me, not a single drop of water had passed through the urethra. He could not retain Ms water; it was running from him at all times, and occasionally violent spasms came on, of the most excruciating kind; there was violent straining of the bladder, and of the muscles that are concerned in emptying it. In that case a catheter was got through the firstestricture with no very great difficulty. I could not succeed in passing it to the bladder at first, but I assured him that every thing would go on well, and begged of him to retain it in half an hour; I returned and withdrew it, and at the same time took the liberty of passing one, a little less in size, through the second contraction, into the bladder. This catheter was retained for forty-eight hours. That was taken out, and one of about double the size was introduced. The day after, a full-sized catheter was passed into the bladder without difficulty. It was withdrawn, and he was allowed to rest. In two days the catheter was reintroduced readily. Since then it has been passed four or five times, with an interval of five or six days, and having regained his health and strength, he now walks about Delivered in his Course on Hygeine, at the Lecture and amuses himself, having completely recovered all the functions of the parts; the openings have nearly healed up, and he will soon be perfectly well. As regards the fistulous tracts and openings in the perincum and scrotum, the removal of their cause (the obstruction of the passage in the great majority of cases), suffices for their cure-they gradually cease to give exit to urine; it passes slowly, then in drops, as the stream through the natural passage improves, and, finally, both that and the purplent secretion cease entirely; the hardness gradually disappears. It may be now and then necessary to dilate the openings a little, to foment, and enjoin rest, if, after the introduction of a bougle, pain or swelling should supervene. In some few cases, when perhaps the whole of the urine has found an exit for months through a false passage, and when that does not close after the urethra is put into good order, you may be called upon to employ means to promote and hasten the closure of the sinus. In those cases, in which a communication has been formed with the bowel, also, further proceedings are called for than a "course of bougies." You may have to retain a catheter for some time, though, occasionally, ulceration is proleved or kept up by a foreign body in the rathra. The means most effectual, and by nucle in to be depended upon than real or supposed caustics, is the application of a reated wire, and that is almost the only s I apprehend, the actual cautery can be sent conception of the essential principles satisfiably employed. We can when some he taught? His words are on some of our

would have recourse to its use, attain our object more specific and effectually by less painful and much less appalling methods. Here, however, the extent of the easterization on be more certainly regulated, and the contraction which follows is more complete than that which follows any potential cautery. If a repetition of the application is called for, a sufficient interval most be allowed to elapse betwixt the operations. The contraction must be allowed to go as far as it will do after one touch of the wire, before it is repeated. As yet we have had no trouble with those cases of fistula in perineo which you have seen treated in this hospital, and these have not been few since it has been opened for the reception of pa-

(To be concluded.)

LECTURE

ON THE

HISTORY OF HYGEINE.

Room, 8, Grafton Street, Fituroy Square,

By WILLIAM FARR, Esq.

Travels of Hippocrates .- Philosophy of Life and Death .- Defects in the Ancient Medical Classics .- Climate of Greece .- Epidemics. — Cases reported by Hippocrates. — Criscs of Diseases; real Signification of this Ductrine .- Diseases have a determined Duration .- Diseases terminate naturally in Recovery .- Philosophy of Diet .- Relation between Diet and Exercise. - First Signs of Excess in Food .- Adaptation of Diet to the Seasons .- Influence of Climate on Man. physiological and pathological.-Changer of Climate advantageous. - Influence of Social Institutions .- Proofs that the Hygeinic Department of Medicine, cultivated with so much care by Hippocrates, may exercise more Influence on the Health of Mankind than Drugs.

GENTLEMEN, - The architecture of the Greeks, their poetry, history, and philosophy, have been understood in this country, and are regarded with reverence by their equal and natural judges; but how do we regard the medicine of the Greeks? Are we as well acquainted with the works of Hippocrates as the artist is with the creations of Grecian sculpture? We know his name; the cyclopedists trace many fantastic ase in surgery,-those false passages about doctrines to his works; a quotation now and he male or female organs, - in which, so far then crosses our path; but what is our prelips, but is the philosophical physician's and health and death, are but states of matching the death and physic therefore in our hunge; Among the that the birth of one hody is the death another; that the composition of one had a member of the Council of the College of Surgeons, in his evidence before Parliament, and,—"I believe that neither Hippocrates, Gelen, nor Caissa, would obtain our diploma: they would all be turned back in five minutes by either the College of Surgeons in the same than a community of the same thing—combination and decomposition of the same three same that the same three same thre geons or the Apothecaries' Company." the same thing,—combination and decom-Dunces, you know, are sometimes kept up position, changes of form. Men their that half an hour in Lincoln's lan-fields; but what springs from invisibility into light is the insufficiency of Hippocrates would be created, that what passes from light to darkapparent in five minutes. He would in-ness, perishes; but we must believe the evi-evitably be "turned back." This was spoken dence of our own eyes rather than uneviby a gentleman of "infinite jest;" yet it is denced opinions. All things buman underprobably soher truth, and shows how great go metamorphoses, increase and decline to men may be treated with contempt where their maximum and minimum, as the sun their greatness is forgotten. A good English translation of the works of Hippocrates. a better knowledge of Greece, and a higher tone of thinking, will, no doubt, in the end necessity. place the medicine of the Greeks in the same advantageous position as their other arts.

In inviting you to examine with me the doctrines of Hippocrates, in whose mind the hygeine of civilization first assumed a consistent form, it is not from any desire to enforce them by a superstitious regard to antiquity or authority; but in the hope of being able, after familiarizing our minds with great and accurate thoughts, to apply with greater success to the investigation of

Nature.

HIPPOCRATES, born in Cos, a small island on the luxuriant coast of Asia Minor, was Hippocratic writings, -particularly on anathe second of that name, and inherited all the accumulated wisdom of an ancient family of the Asclepiadæ. His career commenced 460 years before the birth of JESUS CHRIST. He travelled through several states of Greece, spending his time chiefly in Athens, Thessaly, Thrace, and the island of Thasos; he visited many of the neighbouring people, and after attaining great glory in that country and among his disciples, retired to Cos, to devote himself to his writings. In this island, or at Lurissa, he died, aged eighty-three years. It was the time of the Peloponnesian war,-the age of Pk-RICLES Buil SOCRATES.

HIPPOCRATES was not the author of all the works now printed under his name; he wrote but few himself; others were committed to writing and extended by his followers, or they were the productions of his family. I proceed to develop his views of hygeine from the more authentic documents, as they form a more enlarged system of health than has ever been conceived by any other man. In general I have followed the admirable Coray in the translations, but if I have in any cases mistaken the sense, I shall thank any one who may be a good Hellenist to put me right.

HIPPOCRATES, as the basis of his philosophy, lays down that life and organization, of the temperate zone, surrounded by the

what springs from invisibility into light is and moon, as light and darkness. In its changes, everything, great or small, fulfils its fate, willingly or unwillingly, by divine

In examining the doctrines of Hirro-CRATES, we must never forget-although the anticipations of his genius sometimes tempt us to forget-that he was the first who devoted himself exclusively to the study of physiology, and to the cultivation of medicine. The nature of man, his organization, his relation to the external world, and the causes and remedies of his multitudinous diseases, when first opened to investigation, revealed questions enough to overwhelm the mind with confusion. Should we, then, he astonished to find errors in the tomy, and on subjects which the prejudices of the Greeks and the want of instruments prevented him from examining? His discriminating genius is discoverable in the direction of his mind to objects within reach, and of most pressing interest to humanity; the imperfection and uncertainty of his principles resulted from the want of instruments for measuring phenomena. He had no barometer, no thermometer, no hygrometer, so that all his observations on tourperature and moisture are indeterminate; be did not employ enumeration to measure the duration of life and disease, the proportion of sickness, the various forms of discase, and the deaths in all ages and under all circumstances; yet in a great many in-stances he has predicted what calculation will prove to be correct; he has measured the evil in his mind, and foretold the remedy.

Every form of malady and death may happen to men of all races, of all ages, and at all seasons, - but the relative proportion occurring in these various circumstances is very different. Greece is situated between the 36° and 40° of N. latitude; it is traversed by the Isothermal line, 181", centigrade; more than nine mouths in the year the temperature is higher than that of spring in England. Placed on the tropical border Mediterranean, bathed by the hot winds of tions were recorded, it was easy to accer-Africa extrated over the sea, chilled by talk the periodical changes and the course the north-east winds of the continent, or of a disease. He did not reckon by days of gefreshed by the life-giving west, Greece, the month, as is done in the present day, from its multitudinous shores to its lofty but by days of the diverse, dating from the mountains, some of which rise 7000 feet, onset; he does not say on the 3rd, the 6th, presents all the fruits of the tropics, intermingled with the corn and flocks of England. Many districts have no direct outlet place; or the malady terminated. One of to the sea, and the shores are marshy, which, with the heat of autumn, produces the fevers of the tropics. In January, the pulmonary affections of England prevail. Out of 15,191 diseases occurring among the English troops in the Ionian islands (1816-1821), 5721 were common, remittent, or intermittent fevers; and it was observed that while the fevers of the troops were remittent, those of the natives were intermittent. The same class of diseases, and the same difference, were observed by the French in the Morca, during their last expedition.

In the books of Epidemics (ext upon 8 nuos the people) HIPPOCRATES attempted, and in part realized, the great undertaking of presenting all the diseases of a people in connection with the natural phenomena of the seasons. The constitutions of the years are determined; the winds, the heat and cold. the moisture and dryness, and the order of their succession, then the reigning morbid constitution, the mortality and the duration of diseases, the ages, sexes, and occupations most afflicted; while illustrative individual

cases follow.

24

The term epidemic now designates one widely prevailing form of malady. Epidemic, in its present sense, is the reigning disease of Hippocrates, to which he did not confine his attention, but took into consideration, and described, all the contemporaneous types of sickness. In the late dethat statistical writers in England. Gerselves almost exclusively to reporting the deaths from cholers, and sometimes the cases. Now the total deaths or cases out of the living at each age, and the deaths from the epidemic, compared with the deaths from other causes, were the most essential and interesting elements of the problem which they sought to solve,-elements which they overlooked, and which HIPPOCRATES especially regarded.

In reporting cases, his choice was influenced by the character of the disease they were intended to represent. He neither re-ported merely fatal cases, as is too often done by the French pathologists, nor did he confine his relations to cures—the rock on which we often split in England. Boyce somewhere censures Hippochates for narrating so many unfavourable cases, but this scientific candour was an element of the on these than on other days; and this may great observer's immortality.

&c., of the month, but on the 3rd, the 8th, &c., of the disease, such a change took the shortest cases will make this clear :-

Eighth Patient.—A young man, who slept in the market-place of Liars (Athens), was seized with fever from fatigue, labour, and unusual walking. 1st day. Stools bilious, thin, abundant; urine thin, dark-coloured; no sleep; thirst. 2nd day. General exacerhation; purging frequent, excessive; no sleep. The mind agitated; perspired a little. 3rd day. Malaise; thirst; loathing; great restlessness; despair; disturbance of mind. The extremities livid and cold. Precordia swollen, softish. 4th day. Had not slept; growing worse. 7th day. Died. Aged 20.

By forming a table of such cases-perhaps without doing this-it would be easy to perceive whether the crises occurred on any particular day, or in any definite time. The crises of some fevers, it is said, happened on the fifth or sixth day; in others, no crisis took place before the 20th, 40th, or 80th day; some never came to a crisis. Fevers, in which life is destroyed or saved, terminated in the same number of days. Relative to the crisis, some days are called " remarkable" (περισσός), which was translated into Latin by imper (odd, unequal); but means, according to good Hellenists, unequalled, superior. The chief critical days were the 4th, 7th, 11th, 14th, 17th, 20th.

Diseases were divided into three stages. In the first the crude morbid elements existed, in the second the morbid product was scriptions of epidemic cholera, you will find formed, in the third it was expelled, and this coincided with the termination of the mormany, and France, have restricted them- bid revolution. The crisis was synonymous with termination, whether by recovery or death; but it was sometimes applied to a single symptom.

HIPPOCRATES appears to have been misunderstood with regard to the doctrine of critical days; for instance, Crisus misstates and combats that doctrine on erroneous grounds. Some appear to think that HIPPOCRATES imagined that diseases came to their crisis, or, in other words, termi-nated, only on the critical days; how incorrectly, the following forty-one cases, recorded in the first and third books of " Epidemics," will make manifest.

Here the crises are distributed very unequally, because they are few, and they are not confined to the critical days. It could, consequently, only be meant to affirm that, on the average, fevers ended more frequently be more obvious in the intermittent diseases From the manner in which his observa- of the Mediterranean than in this country.

Taxia 1.—Crism of 41 Union of Discon, younged by Harrocantas in the first and third Books of "Apidemies;" showing the days on or before which they terminated by either Duth or Recovery.

Day.	Crises.	Day.	Crises.
2 3	1	17	3
	1 1	20	3
4	3	20 21	1
5	4	24	2
6	4 3 3	27	1
7	3	24 27 34	2
10	1 1	40	3
11		80	3
Î4	3 2	120	2

But there is another sense in which the Hippocratic doctrine may be understood. He may have divided acute diseases into periods, in order to predicate when the ma-jority of crises occurred, although the oh servations were not numerous. And this sense is supported in the book of " Criscs," where it is said that the mildest fevers terminate on or before (wpouder) the 4th day; the most deadly destroy on or before the 4th day. So the first access (foodes) ends. The second extends to the 7th, the 3rd to the 11th, &c. I therefore think we may admit that acute diseases were divided into weekly periods, and that these were subdivided into intervals of four and three days, as half a week could not be expressed in entire days (Shais quipais). The foregoing forty-one cases, thus arranged, would justify us in saying concisely, that the crises took place on or before the 7th day, and that the diseases in question were judged by the 20th, as ten cases ended in the second period (προσθεσιε), and only thirteen out of fortyone remained at the end of the third week.

Table 2.—Weekly and Half-weekly Crises of the preceding 41 Cases; 24 of which were by Death, 17 by Recovery.

Week,	Between Days.	Half-weekly Crises.	Weekly Crises,
1	{ 0−4 4−7	5 10 }	15
2	7-11 11-14	4 }	6
3	14-17 17-21	3 }	7
4	\$21-24 24-27	2	3
5	34	1	2

The eight remaining cares terminated on or before the 40th, 80th, or 130th day.

Whatever the Hippocratic doctrine may be, it is certain that is this country, in France, and in Germany, few disease terribinate des justicular days, or at one period; but I shall be able to show you, that the termination or crisis of several, and probably of every disease, takes place according to a determined law, which may be at any time deduced, when the observations are sufficiently exact and numerous. Dr. LATHAM has reported 297 cases of typius fever, to refute the Hippocratic motion of critical periods,—to show that the crisis of that disease is irregular, and subject to no law. When properly arranged, they prove exactly the reverse grant of the critical periods.—The state of the critical periods.—The state of the critical periods.—The provement of the critical periods.—The critical periods of the critical periods.—The provement of the critical periods.—The provement of the critical periods.—The provement of the critical periods of the critical periods.—The provement of the critical periods of the critical periods.—The provement of the critical periods of the critical periods of the critical periods.—The provement of the critical periods of the critical periods of the critical periods.—The provement of the critical periods of t

TABLE 3.—Crises of 17 per Pener reported by Dr. LATEAN; we have not state how many digd or recovered.

Day	Crises			Day	Crises.
5	2	24	10	42	4
6	3	25	6	43	2 3
8	3	26	4	44	3
9	2 3 3 6	27	.7	45	1
19	3	28	8	46	4
11	12	29	4	47	1
12	13	30	111	48	1
13	12	31	11	49	8
14	8	32	6	50	1
15	9	33	8 1	51	1
16	14	34	6	53	2
17	12	35	5	55	2
18	16	36	1	56	1
19	8	37	- 1	57	2
20	9	38	3	59	1
21	8	39	5	60	1
22		40	8	62	1
23	7 9	41	3	65	1
		<u>'</u>		<u> </u>	

In looking over this table, it may be supposed that the 11th, 12th, 13th, 18th, 24th, 30th, 31st, and 49th, were critical days, as the great number of cases terminated on those days; but this irregularity is owing to the small number of facts being divided into a great many sections. If the cases were more numerous they would terminate regularly, as in Table 4; where longer spaces of time are employed:—

TABLE 4 .- Showing the Weekly Crises of

29h Cases	o <i>j reve</i> r.	
Week.	Crises.	
1	5	
2	57	
3	76	
4	51	•
5	51	
6		
7		
	7	
9		
3 , , , , , , ,		

Mean duration 34 weeks.

jority of patients recover from disease; that the unifority of fevers, inflammations, and other severe malsdies, seldom destroy more than a fraction of those attacked, when left to pursue their unobstructed course. In Corfu, where the annual denths were 27.4 per 1000, only 23 died out of 1000 attacks from disease of all kinds, sufficiently severe to send the soldier to the hospital. I never saw this calculation made for England; but I think it furnishes an approximation to the general truth. The patients were treated, and the deaths were no doubt considerably diminished by medicine; but without any diminished by medicine; but without any treatment. If 42 out of 43 had not survived, the great manufactual have recovered. The natures of diseases are the best physicians (Neisser poores myos): wherefore Ilprocurates scrupiously abserved their natural evolution, all the things, and the increased excretions where manufactured excretions where male where molecular accidents on the natural threatened the extinction of life; a opposed them, by endea-toning to induce the natural crises—to vonring to induce the natural crises,-to bring cases, precipitated by something into a fatal route, back to the natural course of those ending in recovery.

The Hippocratic doctrines of diet present a philosophical outline of that department of hygeine. A writer on the diet of man, it is observed, should be acquainted with the nature of the whole body, its organs, and the subordination of its powers; should be acquainted with the qualities of all food and drink in the natural and in the prepared states; should know the way to dilute strong things, and to make the weak stronger, by art, as occasion may arise. Nor is this enough; for a man cannot be healthy unless he works as well as eats. Food and lahour are opposite forces, which, when in accord one with the other, constitute health; for health is perfect when the clements of the body exist in due quantity, power, and composition (crasis). Labour consumes the principles supplied by food; therefore it behaves us to determine the force of labour, both natural and violent,such as gives, and such as takes away flesh; also the relation of labour to the quantity of food, to the constitution of men, to the size and age of the body; to the seasons, the winds, the site of the country in which they live; to the prevalent type and to all the causes of disease. He who could discover an exact measure of the relation between labour and food, would detect the secret of haman health. But this is impossible; they f dannet be made symmetrical; yet, as when one is a little defective, the other force runs into excess, there are means of detecting the excess of either, before the slowly-accumulating disease bursts into a flame.

In the application of bygeine it is of the utmost importance to be able to distinguish

HIPFOCRATES was well aware that the ma- is the first abstractions from health: these are rity of patients recover from disease; that leminously treated, probably from observate unifority of fevers, inflammations, and tion in the gymnasta. The first signs of disease from repletion are, I. A stuffing in the nose after dinner, with a secretion of mucus and saliva on the following morning; heaviness of the eyes, paleness, and loss of appetite. 2. Long and agreeable sleep, sleep in the day, followed subsequently by troubled dreams. 3. Lassitude; pains of the whole body, or of parts of the body Heaviness and headache; the eyelids dropping after dinner, and convulsed in sleep heat, and sometimes costiveness. 5. Flatulence, voiding the aliment soon after eating, which seems to yield relief, but is soon followed by heat, and diarrhoea, or dysentery. 6. Crude, but not acid eructations; scanty stools compared with the food, yet really copious, with no internal pain. 7. Pallor and acid cructations shortly after eating. 8. Acid eractations on the following day. 9. Profuse perspiration in the first sleep, suffication, heat, vomiting. 10. Liquid steels, without pain; wasting. 11. The food passing away undigested, but not putrid; wasting. 12. Watery putrid stools, without other inconvenience. 13. A dry, and in process of time, a bitter mouth, confined bowels, hard dry stools, ending in stercoraceons vomiting. - Exercise is excessive where headaches and shivering come on after the morning walks. Some shiver in the gymnasium, from the time they strip till they begin their exercise, and on cooling, their teeth chatter; they are sleepy, and when awoke they feel giddy; their eyes are heavy; malignant fever supervenes. Labour has exceeded food.

The regulations respecting seasons hold still in Greece, and require little modification in England. In WINTER eat once a day; lunch very moderately. The food should be dry, rich, heating. Do not go through a gymnastic training in winter; the trees which have not wintered hear no fruit, nor are they healthy. Warm the body with labour, to promote perspiration. Day is short, night long, and this teaches us that labour should be neither long nor excessive. -String. When Arcturus arises, when the south winds blow, and the swallow comes, food, drink, and labour, should be more varied, milder, and lighter. As about the equinox (March) the days are lengthened, the nights shortened, the season is warm and dry, diet should be nutritious and rich. The trees, devoid of reason, provide themselves in this season with increase and shadow, against summer; so should rational man preparc a healthy accession of flesh. In Sua-MER the food should be softer and more sparing; drinks mild and diluted; luncheon moderate, and the siesta brief; excess in meat or drinks as slight as possible. Sexual intercourse should not be indulted. Tenid bathing may be used. Avoid the sun, and

the cold morning and evening rapours, diet, and temperature, are alone perfectly crimining from threets, lakes, and shows. At such: In the mild, equable climate of Asia, the hummer solidice take no dry, hot, rich every thing grew in greater size and beauty things. Average—From the equitox (September 1). tember) guard against extremes of heat and cold by thick clothing; walk out on warm days; use tepid ablutions; warm and dry food.

Many of the aphorisms are useful general guides in diet, such as, " Beware of sudden changes in living:" "The hungry should not work:" " Those who feed fast and suddealy, may be suddenly reduced:" " Those who waste slowly, are restored slowly: "The more that unsound bodies are fed, the more they are injured:" "There is more danger in living on a weak and strict, than on a rather full, diet:" " A high state of

gymnastic training is dangerous.

The atmospheric origin of some diseases was recognised by HIPPOCRATES: the nature of man cannot always resist the power of the universe; and certain conditions, constitutions, and climates, impress a peculiar form, not only on disease, but on the entire organization and character of the human family. These are treated of in the book of "Winds, Waters, and Places," presenting a physiological view of the principal races of men observed by him in Asia and Europe, developing their innate energies, such as they were fashioned by the earth, and subject to the diseases induced by the external elements. This book is a perfect model of physiological delineation. Phidias, or Zeuxis, never sculptured the human figure more divinely, or painted with more expression, than HIPPOCRATES has here traced the Asiatic and European character.

The influence of the earth on its human inhabitants, is expressed somehow in this manner:-You will almost always find the forms of men and the nature of a place, corresponding; for where the soil is rich, and soft, and wet, and of uniform temperature, the people are gross, lymphatic, of relaxed joints, intolerant of toil, and cowards; indolent and sleepy; they are neither keen nor subtle, but dull in the arts. On the contrary, where a region is bare, rough, un-sheltered by nature, oppressed by the cold of winter, and burnt by the summer's sun, the men will be found spare, robust, of well-expressed form, vigorous, and swarthy; they will be capable of toil, and wakeful; their manners will be pertinacious and contumacious; they will be easily roused to anger; fiercer than mild; exceedingly acute and dexterous in the arts; expert in war. For whatever springs from the earth, savours and participates of its nature.

To great changes in the weather, and sudden irregular successions of heat and cold, moisture and dryness, HIPPOCRATES attributed great power; he considered them the most common causes of disease, and ature at which corn would grow to that at often states that slow alterations of habit, which the grape, or orange, or olive, would

benign and refined; at the same time the inhabitants were rendered timid, effeminate, indolent, and unwarilite. The amo-sphere around them key stanguil, and was insensibly changed; hears the soul was never shaken, the body never tossed about, and tried by changeful vicisaltade, which probably exasperates passion, and excites heat, and intellect more than repose. For changes always rouse the mind of man, and

permit it not to rest.

When the organization is thrown into motion by the external forces of nature, and then suddenly abandoned to its own resources, an effort of self-action is made, which gives and concentrates independent power; and thus Nature hears her children, as on eagles' wings, into the higher regions of exertion, and educates them till they can triumph over their element, and ride upon its storms. Excitement of the mind, and of animal heat, which have many analogies with each other, is equally favoured by changes of temperature. We may conceive that in a cold atmosphere a great supply of internal heat is demanded, and when the atmosphere becomes warm, the supply will be superabundant; and this principle of reaction not only applies to calorification, but to the muscular, the nervous, and all other organic functions. In the political changes, the stormy years, of the Peloponuesian war, Greece produced many of its immortal works. Man is ever seeking an equilibrium, but that is repose and death. When the equilibrium is most disturbed, he is most active. Variations in the intensity of external agents serve not only to augment the sum of power, but they temper the body, and fit it to live through a greater range of circumstances; they improve its means of self-adjustment-a point which requires deep consideration in education. Medical men, when consulted relative to the regimen of children, and even of adults, are too apt to recommend exclusively warmth, regular diet, and exercise, proscribing all extremes. This may prevent tender children now and then from taking cold, but, on the whole, more is lost than gained by it. Let us never forget that all men are often hurried from one extreme to another by necessity, and that this sort of oscillation preserves or accumulates vital force.

There is a limit to the utility of change. It may be excessive. HIPPOCRATES alias speaking of the climate of Asia Minoral and Western Asia compared with Greece, crowned indeed with snow-covered mountains, but situate in a latitude where the general range of changes only extended from the temperripen. In countries not known to the Greeks, but this day for them was not then on in Pekin and Petersburgh, excessive change Blooding, and strong purguities, and of it illuste more favourable to life than the active remedies, he did not spare to emp

sone or the tropics. are despotized, are not in their own power, and do not live under their own laws, they are not very curious in preparing for war; nay, they rather take care to appear unwarto their lord, and augment his resources, months; gastro-enterite was recognised,while to them nothing is meted but dandence enlarges, and gives energy to, all the hygeine. faculties; it is the vital breath of the mind; Now, an army is only a part of the comit gives health to a nation; and we shall munity; and the same facts hold of the rect enactments.

mint et similia.

uniformity of the habitable parts of the frigid as occasion required, but Hippocharae never forgot that drugs were subordinate One general principle limits another; the agents in the preservation and restoration of climate may be good, but the government health. He looked to climate, diet, and may be bad; or the race may be feeble. So exercise, as causes for the prevention and HIPPOCRATES further attributes the unener- cure of disease; and only considered drugs getic character of the Asiatics to their laws. as useful auxiliaries. His practice in fevers The greater part of Asia is, he says, go- has been called inert. What would calomel, verned by (despotic) kings; and where men and leeches, and bleeding, have done? The experiment has been tried in the Mediterranean. HENNEN says that the proportion of deaths among the Russian, French, and English troops in the Ionian islands was nearly like ; for, to them the chances are unequal. the same, although the English met the fevers They are driven to fight, to toil, to seek of the country with mercury and the lancet death, for their lord, while their children, "in all the activity and all the orthodoxy of wives, and friends, are left behind; nay, the schools." When the French army, 14,000 if they bear themselves valiantly, and are strong, was in the Morea, 1000 men were successful in battle, the advantages accrue lost chiefly by fever in the course of nine leeches were there-but the patients died gers and death. Their lands, too, are liable exhausted after their use, as the troops were to devastation, or to be made desert by the exposed to miasmata. Where the hygeine enemy and by the cessation of labour, so of an army is judiciously regulated, the solthat hrave nich are prevented by the laws dier may be kept in health and vigour; but from exercising their courage. The influ-allow an ignorant general to encamp on a case of government is further proved by marsh, let filth stagnate, fatigue excessively this: wherever the Greeks, or barbarians the men, crowd them in low damp rooms, in Asia, live under their own laws, fight for and, despite drugs, they will fall as unthemselves, and reap the fruit of their own ripe and blasted fruit, not by the sword labours, they are neither cowardly nor in- but by the fever. The French and English dolent. It may be added that experience troops at home,—not trained to the field has since shown that they for a time could from childhood as the Spartans were. - are become both, in the stirring atmosphere of very skilfully and efficiently supplied with Greece, under a despot. Thus has our drugs, yet their mortality in peace is much great author laid bare the very nerve and greater than that of people generally of the withering arm of despotism. Indepen- same age, because they violate the laws of

have occasion to show that life is not only inhabitants of a city or a small village. A less valuable, but, on the whole, shorter in medical man always saves many lives and Austria and other countries, where paternal much time in sickness; but in a neighbourgovernments enforce hygeinic laws, but de- bood, or in families where he can command prive their subjects of liberty, not allowing all the resources of hygeine, his practice them to bring up children for themselves, must be much more successful among adults. than in England, where the government has and rescue twice as many children from in-attempted so little towards raising the popu-lation to its present pitch of vitality by di-scribes most advoitly. Officers of dispensaries and hospitals will bear this out. In fine, all modifying agents act less on "But," some may say or think, "we live the individuals existing than on those form- by drugs; the present public will pay noing, and Europeans differ from each other thing for our sanatory precepts; they know more in size, form, and faculties, than the more of large green, purple, and red glass Asiatios, because - " Plures corruptiones globes, than of the physiology of health; contingunt in seminis coactione quam tern-they think more of Morison's murdering pra sequenter variant, quan at eadem pills, or St. John Long's caustic liniments. than of minute precepts about the air and HIPPOCRATES has described all the forms food by which they live and breathe. Besides, of sickness, and the signification of every why study hygeine, when, by promoting the sign, with an unapproachable exactness. He sign, with an unapproachable exactness. He would have estimated the pathological dis-ber of patients?" Gentlemen, I know that cor generous profession—Louis, and Carswell, at their real value, will not, for a moment, harbour sentiments petilic health, and if the pertisance of our lide constantly closed; when roused from craft is at variance with the public good in the sleepy state in which she lies, she the name of God let it be abeliabed, let us answers correctly; no convulsion or parabetake ourselves to something else. Happily our interests are the interests of the community: in proportion to the health and strength and knowledge of England, it has flourished, and will flourish, and in its prosperity or reverses we shall participate. In patriotism, also, litprocaates was our pattern. He pointed out the sources of health and improvement to mankind. He remained to the last, true to the fortunes of the small island on which he was born : he refused to go to the court of Persia, because he preferred serving Greece, and his disinterested exertions during pestilence ob-tained for him a place in the Prytaneum of Athens.

HOPITAL DES ENFANS MALADES, PARIS.

RESEARCHES INTO THE DISEASES OF CHILDREN.

CONDUCTED ON THE

KNOWN PRINCIPLES OF ANATOMY AND PATHOLOGY.

TUBERCULAR MENINGITIS.*

Child ten years old; symptoms of tubercular peri-Child ten years out; symptoms of topercular per-lonitis; headache, returning with irregular accesses, and sometimes accompanied by billions vomiting; dulness; morority; after three mouths, constant headache, billions vomiting; mumbress of the hinds, delirium, coma, general convisions; death at the end of seven days; tobercles found in the meninger, longs, broaching glands, and perlouseaus.

CASE 3 .- Clemence Fournier, an orphan, ten years of age, was attacked at the age of seven with confluent small-pox, of which she still carries the marks; for the last three months she has complained of pains in the head and abdomen. Admitted into the hospital on the 14th June, 1835. She did not present anything more than the symptoms of tubercular peritonitis, and some uncertain signs of pulmonary consumption; up to the end of June we did not observe any notable change in her condition, beyond a sadness and depression of spirits that seemed quite disproportionate to the patient's sufferings, and two or three attacks of headache, without any other trouble of the cerebral functions. During the last few days of the month the moral and physical depression became more and more severe, with intense headache, and slowness of the pulse. Leeches behind the ears.

July 5. The headache has disappeared,

We exist, as a body, to promote the but the patient is dull ; she keeps the eveson of our lide constantly closed; when roused from altewers correctly; no convulsion or para-lysis of the limbs, but the muscular force is excessively depressed; pulse irregular, 96; the diarrhosa which existed for several days has given place to obstinate constinution. In the evening, return of the headache, which the patient describes as having its seat in both temples.

6. During the night and the morning, violent deliram and agitation, rendering it necessary to employ the struit-waistcoat: at the visit, however, she answers all questions addressed to her, and puts out the tongue when required: she complains much of headache and feebleness of sight in the left eye, whose cornea is perfectly transparent, and the pupil neither contracted nor dilated. On the other hand, the surface of the right eye is bathed in a puriform liquid. The sensibility of the skin is obtuse at both sides of the body, and the muscular force greatly diminished; the patient is unable to grasp an object firmly in either hand; the head is thrown backwards, and she atters an acute cry whenever we attempt to bring it to the natural position; there is no evidence of pain occupying the dorsal or lumbar regions; the patient can sit upright without difficulty: the pulse is moderately strong, 96, as yesterday; the diarrhum has now returned, and evacuations are sometimes involuntary. During the day, low delirium; the child is unable to recognise her relations.

7. Come; she does not answer when spoken to; the cyclids are closed; the pupils largely dilated; the limbs are in a state of resolution, and when lifted up are seized with a trembling motion; the muscles of the neck, on the contrary, present a tetanic degree of rigidity, and render the head quite immoveable; pulse 100; no stool; urine excreted involuntarily. Six leeches, three to the right temple, and three behind

the right car; a blister to each leg.

At three o'clock p.m. the patient was seized with general convulsions, which persisted for about an hour, and then terminated in death.

Body examined thirty-eight hours after Death.—Temperature of the Atmosphere, 20° R. (77° Fahrenheit).

External Habit. - Body lean; cadaveric rigidity very well marked; abdominal parietes of a greenish colour.

Cranium and Vertebral Canal.—The brain and spinal marrow had been removed from their cavities with their membranes, and left on the table of the dead-room for at least six hours before their examination by M. Jadelot in presence of the pupils. The dura mater does not present any-thing remarkable. The arachnoid at its free sur-

[.] Continued from LANCET, No. 645, page 575.

face is moist, and conserves its normal trans. She with of August, however, without any parency; the pia mater is infiltrated with a known cause, she was saided with comiting, great quantity of serouity. In its tissue we followed by intense basedache, fever, and conark a great number of tabercular gra- delirions; in the night of the 5th, she sank nulations, offering the same physical characters as in the cases already reported. On the anterior part of both hemispheres, to the extent of about a square inch on the right side, and half an inch on the left side, the pia mater is infiltrated with a yellowish substance having the consistence of chalk. This substance penetrates with the membrane into some of the anfractuosities, and here it is impossible to separate the pia mater, especially on the right side, without removing with it a portion of the cerebral pulp. Between two convolutions of the convexity, we find a tubercle, not larger than a good-sized pea; the cerebral mass is almost reduced to the consistence of jelly; but as this softening is not accompanied by any change of colour, and is general, it probably depends on putrefaction. The spinal marrow is equally softened. It does not contain any trace of tubercles.

Thorax. - Both lungs contain a great number of miliary tubercles; the brouchial glands are tumefied, and transformed into tubercular masses.

Abdomen.-The epiploon, thickened and studded with tubercles, adheres to the anterior wall of the abdomen, and to the convolutions of the intestinal tube, which are also united by false membranes that contain small white tubercular deposits. The pisms to the lower extremities. sub-peritoneal cellular tissue of the intestines, the mesentery, the liver and the spleen, -all these parts contain numerous tubercles. The interior of the intestinal canal was not examined.

TUBERCULAR MENINGITIS TERMINATING IN ACUTE HYDROCEPHALUS

Child eight years old; antecedent measles; de-pression of spirits, and dulness; headache and fever, returning by freegular accesses during three months; returning by tregular accesses during time adminst the symptoms of acute hydrocephalus; death; gra-natations in the pia mater; emission of turbid serum into the lateral ventricles; softening of the white central parts; pulmonary inherens.

Case 4.—A young girl, eight years of age, habitually of good health, of lymphatic temperament, contracted the measles near the end of April. During the three months following the disappearance of this exanthema, which was very irregular in its march, the patient frequently complained of pain in the head; she became sad, dull, and was attacked from time to time by accesses in gular fever. Towards the middle of stant, with pain in the abdomen and consti-pation; a tew lesches were applied to the trunks. On passing the pulp of the index anns, and mustard poultices to the extremi- finger along the surface of the arachnoid, ties. The symptoms were dissipated by these we feel a slight resistance at the points corremedies, and the child seemed to have re-responding with these little masses. On de-covered her original gayety and health. On taching the arachnoid and pia mater from

into a state of deep stupor; on the following morning, being transported to the hospital, she presented the following symptoms:-

Dorsal decubitus: alternation of paleness and redness of the face; complete loss of consciousness; the coma is from time to time interrupted by low cries; the globes of the eye are constantly agitated by convulsive movements; the pupils dilated and immoveable; the faculty of vision completely destroyed; there is trismus, grinding of the teeth at intervals; foamy saliva, tinged with blood, issues from the mouth. The superior and inferior members are slightly rigid; the sensibility obtuse at the right and left sides of the body, equally; no nausea or vomiting since yesterday; the child passed two or three involuntary stools during the night, after the administration of a purgative; the abdomen is retracted and indolent; the skin is dry, flaccid, and rough on the limbs; the heat moderate; pulse small and irregular, 132; the respiration accelerated, 52 in the minute, and often accompanied by dilatation of the nostrils. The chest gives a normal sound under both clavicles : on auscultating the patient we hear nothing but some mu-cous rale. Twelve grains of Calomel, in four doses; a large blister to the head, and sina-

At two o'clock p.m. the cries had entirely ceased; the face is now pale, and covered with a cold sweat; the trismus is very violent: the eveballs immoveable, and directed outwards; the sensibility and motility present the same disorders as before mentioned. The stools are involuntary; pulse 130. In the evening the coma gradually became more deep, and the child died at one o'clock after midnight.

Body examined fifteen hours after death.

External habit .- Body thin; a few phlyctenæ on the scalp, produced by the blister; no rigidity of the body.

Skull .- The cranium is well formed: its parietes are rather thinned than developed; the dura mater is in its normal state; the longitudinal sinus encloses a dark coagulum of blood; the great cavity of the arachnoid membrane contains about an ounce of serum; under the layer of this membrane that covers the cerebral hemispheres, we observe a multitude of points of a yellowwhitish colour, some isolated, others confluent, and forming by their union small the brain, we can distinguish clearly these that depression of the spirits and moral granulations, situate in this last membrane, and presenting a cartilaginous degree of consistency. They are more numerous at the right side than at the left, both on the convexity of the hemispheres and at the base; and are particularly confluent at the fissure of Sylvius on the right side. They are manifestly distinct, both in colour, form, and seat, from the glands of Pacchioni. gelatino-albuminous substance exists at the base of the brain, near the decussation of the optic nerves : the lateral ventricles are distended by three or four ounces of turbid serum; the posterior cornu on the left side, and the pes hippocampi on the right side, present a ramollissement of a creamy ap-pearance; the cortical substance of the hemispheres is slightly coloured, and the white substance pretty well injected; the cerebellum and pons varolii are healthy. The spinal marrow was not examineds

Neck and Chest .- The cervical ganglia, epiglottis, larynx, and traches, do not present any alteration; the bronchial glands are transformed into tubercular masses; the serous membrane of the thorax is not adherent at any point between the lungs and thoracic wall; the right lung is studded with tubercles; some, like gray demitransparent granulations, others presenting a duli point in their centre; others, finally, of a yellowish white colour. We do not observe any cavity; the pulmonary parenchyma appears healthy in the intervals of the tubercles; the left lung also contains a great number of miliary tubercles, most of which lie immediately below the pleura. The pericardium, heart, and thoracle duct, are healthy.

Abdomen .- Small tubercles are disseminated throughout the peritoneal lining of the intestines, the liver, and the spleen; the parenchyma of this latter viscus is studded The pancreas and with them like the lungs. kidneys are free from all alteration. The mesenteric ganglia are not developed; only two or three are changed into tubercular matter. The gastro-intestinal mucous membrane is healthy.

In the first of the two cases just reported, the chronic stage, which so frequently characterizes tubercular meningitis, and its passage from the chronic to the acute form, are well marked. If we look to the cause under

character which so often attends and points out the commencement of cerebral disease in children. In the present case, however, the diagnosis must have been difficult, for the child suffered at the same time under chronic inflammation of a similar nature in the abdominal cavity; hence the frequent pain in the abdomen, diarrhos, &c., to which the headache and torpidity might reasonably have been referred, and to which they would certainly have been attributed by M. BROUSSAIS and his followers. The symptoms of chronic meningitis continued for a fortnight after the child's entrance into the hospital, when those of the acute stage suddenly declared themselves. What were they? Bilious vomiting, exasperation of the headache, falling of the pulse, and constitution. we insist strongly on these symptoms. Although, taken separately (abstraction made of the headache), they seem to have no connection with cerebral disease, yet, when united in the same subject, they are a certain index of inflammation of the meninges or the brain in cases where some prodrome has existed, as in the present case; and even when no premonitory phenomena has been observed, they afford the strongest presumption of the existence of meningitis. We have not yet had time to make an analysis of the cases we possess of meningo-cenhalitis, in order to determine the value of bilious vomiting as a symptom of the development of this disease; but we can affirm that it exists in a vast majority of cases, and is a most valuable sign. In the case we now speak of, it may be said, "The vomiting took place in a child affected with peritonitis, and was, therefore, of no value as a symptom of cerebral disease; inflamnations of the abdominal cavity frequently produce vomiting in children, and may have been the cause in the case of Clemence Fournier." This reasoning is specious; we have often heard it employed, but its refutation does not require any great effort. The vomiting, if it existed which scrofulous inflammation of the cerebral alone, would certainly rather indicate abmembranes was developed in the present case, dominal disease than inflammation of the we find nothing to which we can attribute it brain, but it must be considered in connecbut the antecedent small-pox, though it is tion with other symptoms. Why did the very doubtful how far this disease may influ- pulse, at the same time, fall in frequency, ence the deposit of tubercular matter in any and the diarrhosa give way to obstinate conorgan. The symptoms of the chronic stage, stipation, if the vomiting depended on an which lasted three months at least (and per- increase of the abdominal inflammation? It haps longer), were energy headache, and is impossible to connect these latter symptoms with peritonitis; they are, on the contrary, well-known phenomena of meningitis, and show that the vomiting must here, as in a vast number of other cases, he attributed to sympathy with the brain. It is unnecessary to follow this case through the other symptoms; the only one we would remark is the violent delirium with which the child was attacked on the night of the 6th. It is strange enough, but certainly true, that inflammation of the cerebral membranes seldom gives rise to severe delirium in children, and in a great many cases the intellectual faculties remain undisturbed during the whole course of the disease; in the present case the delirium was not attended with any febrile access; the skin was cool, and the pulse only 96.

The second case presents several traits of resemblance with the former one; here also we find a prodrome extending from the month of April to August (three months), and consisting in headache, with irregular accesses of fever. The passage from the chronic to the acute stage was also marked in the same manner, by bilious vomiting and exasperation of the headache. As to the other two symptoms, constination and slowness of the pulse, it was impossible to determine whether they existed or not, as the child was not brought to the hospital until forty-eight hours after the acute attack, when she was in a state of coma. The other symptoms followed each other in rapid succession, without presenting anything worthy of notice; on the 6th the pulse mounted to 132. We merely mention this, because some systematic writers describe the last state of acute hydrocephalus as characterized by slow pulse; this is certainly an error. In a great majority of cases the pulse rises, towards the end of this disease, to 120, 130, 140, or even 150; it is always above 100; we would also direct attention to the absence of contraction of the limbs, although the forms, and a portion of the lateral ventricles, were remarkably softened. Meningo cephalitis rarely is fatal in so short a time as in the case now under consideration. The disease commenced on the 4th, and the broken by a blow or a kick, there is not child died in a state of come at midnight on the 6th. In most cases the disease lasts from seven, eight, or ten, to twenty-one days. days. P. H. GREEN.

OX

FRACTURES OF THE PATELLA.

WITH PROPOSALS FOR A

NEW PLAN OF TREATMENT.

To the Editor of THE LANCET.

Sir,-I send the subjoined observations for insertion in your journal, if the proposal by which they are accompanied be worthy of attention.

Fractures of the patella must be considered as rather serious accidents, when we reflect on the rarity of their osseous union. From the retraction of the upper fragment of the bone, in transverse fractures, by the powerful muscles connected with it, and from the difficulty of keeping the broken surfaces in steady apposition by the ordinary means employed, the union is generally by ligament. The length of the uniting medium varies from half an inch to three or four inches, but, if it be more than half an inch, the patient can never walk securely.

Although such fractures are generally united by ligaments, yet the possibility of osseous union is now placed beyond doubt, by the number of instances recorded, and, it is owing to the inadequate means of treatment that osseous union is not more frequently effected. It is highly probable that, if we could scrupulously fulfil the indications of cure by proper modes of treatment, there is no fracture which, in ordinary circumstances, would not unite by bone, not excepting even fractures of the neck of the femur within the capsule. Deficient vascularity, I suspect, is not the true rationale of non-union in such cases. There are still some who seem to think that the organization of the patella is different from that of all the other parts of the osseous system, and that therefore, when broken, it must unite as regularly by ligament, as do the other bones by bony matter. It would be somewhat strange were the result of their practice in any one case to belie their theory.

Sir C. Bell is of opinion that the cause of the fracture exercises a material influence on its union. "In the common case," he says, "of fracture of the patella by the sudden action of the quadriceps extensor, the pieces are separated without that degree of violence which is necessary to produce reunion by bone. But, when the patella is only less retraction, but the injury, the bloody effusion, the tumefaction, and the rigidity of the parts, resemble that which attends the fracture of any other bone, and M. GUERSENT tells us that he has only ob- the fragments unite by bone." If he had served a single case where it exceeded thirty merely said that, in fractures from direct violence, there is less retraction than in those

from muscular contraction, and that the upwards in the same direction, and made to former more frequently unite by bone than the latter, he would have been more cor-rect. It is not from the greater violence which the bone sustains in fractures from blows, but from the capsule to which it is attached being less torn than when the fractures result from muscular contraction, that it more frequently unites by bone.

The chief points to be attended to in the treatment of fractures of the patella, as in all other fractures, are, 1st, To keep the fractured surfaces in apposition, and, 2ndly, To prevent motion between them. The means generally employed. I am inclined to think, are not adequate to fulfil these indications. The great objection that may be urged against them is, the undue degree of pressure which they exercise, either on the whole circumference of the limb, in the vicinity of the fracture, and thereby impeding the circulation below, or, by being of trying this method; but, from its success confined to a point endangering the super- in that case, I feel warranted in recomstance is a strong objection to Mr. Mog-lam, Sir, your obedient servant, ridge's ingeniously contrived apparatus. Mr. Mogridge, however, by this apparatus, obviated an objection which applies to all the other plans of treatment, viz., the circular compression, and consequent obstruction to the circulation in the limb.

In Sir Astley Cooper's plan (which is the one now generally employed), a belt is buckled round the thigh, immediately above the patella, and from each side of it a narrow strap passes down over the sole of the foot; but when this apparatus is put on lightly. which it must be when there is much retraction, it causes great swelling of the limb, and much uneasiness to the patient. Mr. Amesbury has improved on this plan, but his apparatus is so complex and expensive, as to preclude its use in the ordinary cases occurring in private practice.

The plan which I now propose is both simple and easily applied. It consists of a wooden splint, reaching about seven inches above and below the knee-joint, and from four to five inches in breadth. To the lower part of it is attached, transversely, a narrow piece of wood, extending about two inches beyond either side of it, giving it the appearance of a cross. This transverse piece should be so placed, that its upper edge, when the splint is applied, will be opposite the spine or tubercle of the tibia. The limb being bandaged from the toes up to the middle of the thigh, the splint, padded with towor cotton, is applied posteriorly, and fixed by several turns of a roller. The fractured surfaces are then approximated, and another bandage. two inches broad, is passed two or three times round the thigh, above knee, and then carried obliquely above the upper fragment It is then brought round it, and carried cordingly I was admitted to examination.

turn round the thigh, at the point from which it started. The above manipulation is performed round the other transverse process, and repeated on each side successively, until the bandage, which ought to be several yards long, is expended. The position of the limb and trunk is then attended to, as in the other modes of treatment.

In applying the splint, we must take care (as already stated) to have the upper edge of the transverse piece of it placed opposite the spine of the tibia; otherwise the bandage which is last applied, is apt to slip over the patella. If we attend to this point, however, we can produce considerable traction downwards, and keep the fractured surfaces approximated, without danger of the bandage slipping, and with very little uneasiness to the patient.

I have had but one opportunity, as yet,

London, February 1, 1836.

APPLICATIONS AND EXAMINATIONS FOR A MEDICAL DEGREE.

AT EDINBURGH, ST. ANDREW'S, AND GLASGOW.

To the Editor of THE LANCET.

SIR, -- I am induced, more particularly by the statements in your last two numbers relative to the conduct of the Examiners of Apothecaries' Hall on a late occasion, to enter into the following personal details, for which, however, an apology to the public may be necessary.

Some years ago 1 offered myself as a candidate for the "Summi in Medicina Honoros," as their dispensers call them, of the University of Edinburgh. Before any examination was begun, it was objected that my Paris certificate was insufficient for its object, viz. to count as one year out of the four required for the course of study. as the certificates, if I remember rightly, are sent in some months (certainly some weeks) previous to the day of examination it is the business of the professors to see that they are sufficient, or to return them, and acquaint the student or candidate with what fact. This, however, was not done in my case; but, I presume, considering the omission to be their own (for I was not aware that I had not studied long enough), the of the patella, and downwards, underneath examiners probably were desirous at least one of the transverse processes of the splint. of appearing to "make up for it." and ac-

The examiners were, Professors Alison, so seldom esteemed by the public? Not be-Fraham, Monro, Duncan jun., Home, and Hope; and if I may be allowed to express an opinion of their merits, I may state that I have placed them pretty nearly in the order in which they should stand. After about two hours' examination, and ten minutes' deliberation among themselves. Dr. Alison presented to me my certificates, stating that the Examiners were not satisfied with them, and, consequently, that he should either recommend me to study for another month or two, or (what would be better) come up for examination in the following year. As I had reason to believe that the shortness of time occupied in my studies, and the circumstance that I had shown some disrespect, though perfectly unintentional, * towards one or two of the examiners, operated in some degree in producing this decision, I resolved to appeal to another tribunal; and, accordingly, I was soon on my way to St. Andrew's,-St. Andrew's! not, as formerly, the mercenary St. Andrew's, but St. Andrew's the reformed,-the St. Andrew's which then professed to examine into the moral character of the candidates, and to require from him some knowledge of the Greek. Alas! " Dum loquimur, fugerit invida actas,"-everything changes in this world; and so sudden a change from the basest kind of prostitution to consummate virtue, would lead us to believe that miracles have not ceased.

But respecting the reasons which influenced the Edinburgh professors in recommending to me a second examination, more remains to be said. Dr. Hope, as is custowary, I believe, wrote to ask me if the thesis which I had sent in, was intended for publication. I replied, no, not in Latin, but in an extended English form. Dr. Hope, as well as Dr. Duncan, and, probably, all the professors, were aware that I had long been engaged in making some inquiries into the blood; and I have little doubt that the intention which I expressed not to publish the Latin, but to extend the thesis, and publish it in English, might be considered as presumptuous in a student who had not yet passed an examination.

While coinciding with Gibbon in the opinion that an author is generally the best judge of the merits and defects of his own work, I also consider that a man is generally the best judge of his own qualifications and conduct in the case in question. Why, then, is his opinion of himself or his book

Knowing that I had studied the profession most attentively, both by reading and by practice, for many years, I did not go for six months (as the custom was) into a grinder's shop, to have my mind "filed," as Shakspeare calls it, to the usual shape. I contented myself with six lessons on the general plan of proceeding, and found those too many.

I went to St. Andrew's next, because rather more classical knowledge seemed to be required there, under their new regulations, than either at Edinburgh or Glasgow. Besides, no further attendance on lectures was necessary before admission to examination. Lectures on the theory of physic, and on speculative physiology, are not near so well calculated as reading and comparing different authors, to increase our knowledge of medicine. Where lectures are illustrated by experiments, the case is different.

Professor Briggs, after examining my

cause he may judge incorrectly, but because he has not candour enough to acknowledge the defects. This may be the case with myself.

But did I answer all the questions put to me at the examination? Certainly not. Replies to some of them seemed as impossible as an answer to the question put to a student by the Society of Apothecaries,* viz., " How many protoxides of mercury are there?" I answered, I think, nearly twothirds of them, but to give my adversaries fair play, let me allow that I answered only onc-half. But when it was found that I did not intend to publish my thesis in Latin, it was not even examined, as I have good reason to know. I had written this Latin document myself. It was merely corrected by a master previous to being placed in the hands of the professors. I naturally enough, therefore, depended greatly on this "for passing;" for the corrections being made not in sentences, but in individual words, I could pretty fairly consider myself in the light of its author, in language as well as in matter. It extended to fifty pages; but this labour went for nothing, though, as I subsequently found that the thesis always weighs as nought, I must not here censure the examiners. However, as it had not been twice written, and the corrections were occasionally visible, this circumstance also may have been considered disrespectful, though quite unintentional on my part.+

[.] LANCEY, Jan. 16th.

[•] LARCEY, Jan. 16th.

+ I may add here that I only took out one ticket fram each Examiner; but I believe most students take out two, though this may not have inflaenced them. Again, though in the Latin questions I was not perhaps as quick or perfect as I stiontd know been, yet I save the English of Latin put to me which I had never seen before, whom the childness with much less knowledge of Latin, and, as I think, with less knowledge of physic generally.

^{*} Time of the questions of Drs Home and Monro were so extraordinary, that they caused a little levity on my part; and some of those of Dancan and Hope on my part; and some of those of Dimean and Hope were so snappish, that they produced somewhat sharp results. Moreover, i had before thoughtlessly told Professor Turner that I should try Glasgow if I failed at Blimburgh. This was not very complimentary to his intimate friend, Dr. Alison, who probably, as well as all the Edinburgh Examiners, was informed. of it.

certificates, was, I think, at first inclined to plogist. The Revne Médicale of Paris has admit me to examination. But when in reply to his inquiry, Why, since I had studied at Edinburgh, I did not graduate there? I answered, " that having been once rejected, I intended to graduate elsewhere," rejected, I intended to graduate eisewhere, "correct, I cannot but cherish a neiter that, the case was altered. Observing (as I con-science or later, it will come to be considered ceived) this alteration in his sentiments, I a standard work on the subject. did not press the matter; but at once departed elsewhere.

At first sight this hesitation of the Professor may seem to be confirmatory of an in London, for students who may be dealt alteration in the University, as regards imjustly by at medical examinations. Think pecuniary considerations, the expense of of the College of Physicians rejecting Armthe diploma being £35. But he had to strong and Mason Good! perhaps for some support the new character of the institution, petty questions which those distinguished and I beg therefore to express my regard men would have lost time in honouring for his conduct. If I had passed at St. with a moment's attention. But public public would have said that he had sold me is so vague a term, and some examiners are the degree; particularly as morality had so fond of showing their powers of crossonly just begun to exert an influence at St. Andrew's. It was of course necessary to its reputation, that at least the first few years of its new life should be passed in a state of watchfulness. But not even then do tion in the public mind. Poor St. Andrew's! I fear the £35 were wholly lost to thee in any thape, for centuries may elapse ere the blot upon thy name can be effaced.

I called upon Professor Jeffray at Glasgow. wishing to pass my examination there before the summer had expired, but he told me that I was then too late, as it was necessary to take out two Professors' tickets before I could he examined. He, too, asked me why I did not graduate at Edinburgh, so that this ations? well-known anatomist, who was one of my examiners at Glasgow, indifferent to the opinion of the Edinburgh professors, dared to admit a student to examination, and to pass him, whom the latter had thought fit to reject, for I was successful at Glasgow, and without any " grinding." As my rejection at Edinburgh was known to Professor Jeffray, it was probably also known to Professor Thomson, the other examiner. therefore consider the degree I hold the more creditable to me, since the previous rejection could not have operated with the Glasgow professors at all in my favour.

I then went to Edinburgh and finished my book, which was already partly printed, and advertised it in the Scotsman, as written hy " H. Prater, M.D., of the University of Glasgow." Obliged as I am to the Glasgow professors for their degree, still on that book, -- which, notwithstanding its bad arrangement and inequalities, has been regarded as one of the most profound and original works on the subject since the time of Hunter,-do I rest my chief claim for consideration as a physician or a physi-

done me the honour to express, in their number for June last, a high opinion of its merits, and with all its defects, and these hope another edition will allow me to correct, I cannot but cherish a belief that,

And now that medical reform is under discussion, I would beg to recommend to those who are in power, a court of appeal, Andrew's after being unsuccessful at Edin-examinations, as THE LANCET has suggested, burgh, he might have been afraid that the would be best and safest of all. Medicine examining, or their "extensive knowledge," (as was the late Dr. Duncau, particularly,) that when unchecked by public observation they may occasionally encroach even on the province of such an examination as would regenerated characters always recover sta- be given to apprentices by tea-dealers, or oilmen, or unrsery gardeners, or God knows what other tradesmen, and call the examination one on " materia medica and the practice of physic!" In the classics and the exact sciences, there is no room for these excursions. It cannot be too often repeated that a check of some kind is required on medical examiners. What reason have we to consider such men as above the influence of personal prejudices, or sordid consider-

I conclude by expressing my admiration of the noble stand which "the rejected candidate" has made against the "Pot-I-carriers." Perhaps his course was better than mine. I have the honour to be, Sir, your very obedient humble servant,

H. PRATER. 12, Dalby Terrace, Jan. 25, 1836.

WESTMINSTER MEDICAL SOCIETY.

Saturday, Feb. 6, 1836.

Mr. RICHARD QUAIN in the Chair.

DR. JOHNSON said he had this week seen a most interesting case, which at the same time had puzzled him more than any he had ever before seen. The subject of the case, who had led an active public life. was the only surviving sister of the late Mrs. Siddons, and was now in her 76th year. Two years ago, this lady consulted him (Dr. J.) for a very severe and obstinate pain at the back part of the head, which had existed for upwards of twenty years. She was then

^{*} Prater on the Blood. Highley, Pleat Street.

a fine-looking active woman, full of spirits, and had invited the doctor to join a large dinner party, which his professional avocastions prevented, and from that time until last Monday he had lost sight of her. Time and suffering had now wrought a great change in her person, which was reduced almost to the bulk of a skeleton. Her features were shrivelled, and indicative of great distress. Three months back a great difficulty of speaking came on, followed, in the course of a few weeks, by difficulty of awallowing, both functions gradually de-creasing in power up to the last three months, when she became totally incapable of articulating and swallowing, and was, when he (Dr. J.) saw her for the first time during the present consultation, dying of inanition. The tongue presented a shrivelled condition, and was incapable of tiful at Guy's. motion; in its centre were several small knotty prominences. Hunger and thirst, phenomena of considerable interest, were absent. Most of the other functions of the body were apparently healthy, the secretion from the kidneys and alimentary canal being necessarily scanty. The intellect was perfeet, written answers being returned to inquiries, except to her attendant, who understood what she attempted to utter by the movements of the lips. He (Dr. J.) conceived that there was paralysis of the nerves which impart to the tongue the power of motion, and those which produce articulation, the eighth and ninth pair, these having their origin from that region of the head which had so long been the seat of suffer-The remedial means adopted at present had been first to support the system by nutritions liniments, adding to the first. fifteen drops of laudanum, which succeeded in producing some sleep. On the second day, two lavements were administered, and on the third (Wednesday) a small quantity of broth, with considerable difficulty, was passed down into the stomach, which produced, as that organ was greatly contracted, some uneusiness, from the distention that followed. This plan of treatment, since Monday, has been productive of some benefit, and today (Saturday) slight motion was perceptible in the tongue. The lady, although advanced in years, was anxious for life. Since the administration of the broth, a tenderness of the abdomen had supervened, which had been combated by sinapisms. An exceeding captous motion also had come away. Not a little curious to remark, after the first wix or seven ounces of broth were passed down, a vomiting of pure bile succeeded, without its containing a ringle drop of the broth, showing the remarkable power of the system, when only functionally and not or-ganically deranged, to retain completely was offensive.

Dr. Appraon related a case, not very much in point, and remarkable only, though not uncommon, for the following particulars :-- A young woman, twenty-two years of age, was received into Guy's Hospital, a perfect skeleton, apparently labouring under irremediable organic disease of the abdomen, with an imperfect state of the uterine organs. A judicious administration and perseverance in the use of aperients, brought away, one after the other, stools much larger, collectively than it was imagined the contracted state of the whole alimentary canal would have allowed it to contain. Eventually her health was perfectly restored, and she grew fat, and became one of the sisters in the institution. She had lately had a relapse, attributable to her indulgence in the good things of this world, which are plen-

HARNEMANISM.

Dr. STEWART WAS now called on to furmish his paper on the operation of minute doses of medicine. After some judicious introductory remarks, the Doctor begged to be understood as condemning, without respect of persons, in toto, the blue pill plan, the Morison-pill plan, the bread-pill plan, and all other indiscriminate plans, which pretended to reduce to uniformity what was in its nature infinitely varied and complicated. A due variety of remedial measures, administered under the personal direction of medical men, was the distinguishing mark of rational practice. But even after allowing a choice of means, there have been very opposite ends proposed in their employment. The contra-stimulant and homoopathic systems stood remarkably contrasted, not only as to the doses of medicines, but also from there being in the former very little regard paid to the symptoms produced by the remedies, and in the latter the affectation of a great deal more attention than usual. Homosopathy comprehended not only the imitation of disease in the administration of remedies, but the diminution of the dose. With regard to this ingenious supplanting of disease, as recom-mended by Hahneman, he (Dr. S.) thought that there existed a delusion, the copy existing only in the mind's eye, while the reality was going on, uninfluenced by the phantom of physic which was to frighten it away. Looking at the liberal allowance of time which was made, often from a week to a month, between the doses, and calculating the comparative and relative agency of all the elements of a homeeopathic case, he (Dr. S.) concluded that it was not the small dose of medicine, but rather the large dose of time, which worked the alleged cures. As that which was appropriate for the support to the principle of bouncementhy, the plan of the body, while it rejected that which of treating similar similars, there was nothing in it that was new. Diarrheea had frequently been cured with purgatives, go- | tion for the benefit of the patients, givnorrhica with irritants, and sallors were ing no privilege in the wards. even said to cure old gleets by contracting a greedy and disgusting law was carried on fresh clap. With regard to the question, the 2nd of June, 1835, by a majority of 30 whether the doctrine taught by Hahneman to 29, in a full meeting of governors. But was quackery or not, the answer was to be the exposure which attended no found in the reply to the inquiry, Is any part of the system concealed, or is it laid before and at this adjourned meeting it was unanthe profession in a manly way, and open to mously expunged, Dr. Chakes on this inquiry and experiments? Medical societies occasion merely intimating to the independent afforded good tests of such questions. They majority of 36, that it was not now either served the purpose which Frederick of Prushis or Sir Benjamin's wish to place such a sia employed with the philosophers whom law on the books. The result was of course he invited to his court, saying that he knew very gratifying to the few governors who how to squeeze the orange and throw away stood forward to advocate the enlightened the pulp when he got them there. Medical side of medical polity. Practitioners may societies were capital squeezers, though now visit the wards of the hospital, both for they did not always obtain much juice. (Ap- the purpose of scrittinizing the practice of plause.)

pated to-night.

ST. GEORGE'S HOSPITAL.

THE NEW CODE OF LAWS.

LAST year we devoted an occasional page to reports of meetings of the governors of this hospital, to form a new code of laws for its government, and did some good by exposing to public view the proceedings of the cannot pretend to guess. Much angry dismedical junto who had obtained sufficient enssion ensued, and the "expulsion" lawinterest among the subscribers to commit wise and provident measure-was carried. all kinds of corrupt and illiberal acts, in wielding the patronage and managing the like way, contended that the govern-affairs of the institution. The final com- ors ought to submit to the adoption of mittal of the new laws was, at a certain this law, because it was copied rerbatim stage of their consideration, adjourned until from the law-book of the Law Association. January 1836, and that time having arrived, Dr. Wilson could not see the justness of their discussion has been renewed, and we the precedent, and opposed it. For our are now prepared to give an abstract of the parts, we think it would be as correct to order fresh debates on their revision, and the wigs and gowns all round for the medical results.

day, January 11th. Mr. HOLLAND in the Howship voted for the clause because Dr. Chair. The first matter discussed worth mention was the motion Dr. Wilson intrusted to the care of Dr. CHAMBERS, for the lawyer, whether an action at law would expunging those words from law 11, which not justly lie against the nine individuals declared that medical governors should not who might "expel" a governor, and subinspect the hospital "for the purpose of obtaining medical and surgical instruction, under colour of such inspection." This law was originally intended by Sir B. Bredie's ing, and it was generally agreed that the laws worthy party, to keep every medical visitor of no other hospital contained a similar out of the hospital, unless he had paid to the medical officers an enormous fee-a subscrip-

the officers, and with the object of seeing The drift of the paper was for the most such practice as its walls afford. Dr. Wilpart lost sight of in the speeches which followed, and as the subject is postponed for opportunity of exposing the majority who future discussion, we leave to another oc- voted on the former occasion, and of pointcasion further remarks. The evening passed ing out the good effects of perseverance on off merrily, if not instructively. At least the part of a minority, and Dr. Wood took the cloud of silence which has hung over the care to obtain an explicit proviso that licen-Society for the last two nights was dissitiates in medicine and surgery should have "access to the wards of the hospital, at proper times, on the introduction of a Governor."

Attention was then called to a substitute for law 13, which related to the "expulsion" of governors at the caprice of the Brodie party,-or, as the excuse ran, for any conduct, in connection with the hospital, or any notorious public scandal, calculated to bring discredit upon the haspital,"-on the bricks and mortar, we suppose, for how anyhody but themselves could bring discredit either on the patients or the medical officers, we Mr. Fuller, the lawyer, in a businessofficers, because the barrristers wear them The adjourned Special Court met on Mon- in the law wards at Westminster. Mr. Wilson opposed it. Mr. TRIMMER, in an able speech against it, asked Mr. Bagshaw, lish their libelious reasons for the proceeding. As Mr. Trimmer offered no fee for the opinion, the lawyer declined answer-

^{*} Lancet, page 333.

clause. Mr. James Lane, Dr. Wood, and the governors had failed in electing a quali-Mr. ANCELL, also spoke against the law; RODERICK MACLEOD and Mr. BAGSHAW in s favour. The minority, however, Mr. RIMMER at their head, succeeded in getting appended to the clause the following declaration; —that no question relating to the expulsion of any governor shall be considered, or discussed, or acted upon, at any weekly board at which there shall not be present twelveyovernors, nor any question relating to the expulsion of a governor at any weekly board he carried by a majority of less than two thirds of the governors present."

Friday, January 15th .- Mr. Holland in the chair. Several amendments of no public import having been agreed to,

Mr. JAMES LANE moved as a law that, "No governor or governors shall circulate any notice or statement bearing date from the hospital, relative to any election, or tending in any way to influence the rotes of governors at any election, unless such notice or statement shall have been previously sanctioned by the weekly board." He said that at a late election of an assistant surgeon, six of the medical officers dated a circular letter to the Governors from the hospital, to the unjust prejudice of one of the candidates, and he wished to guard against the recurrence of such a proceeding, which tended to deprive gentlemen who looked forward to the offices of the hospital as a reward of their industry and professional attainments, of a fair chance of competition.

ROBERICK MACLEON acknowledged that the dating of the circular from "St. George's Hospital " was decidedly wrong, and attributed the circumstance to an "oversight."

Captain BAGNOLD observed that in respectable societies the office bearers serupulously avoided any interference in the election of coadjutors; he wished as much delicacy was exhibited at St. George's. At present the successors of medical officers were only looked for in the pupils of particular persons, without regard to their capability. The circular in question was evidently an attempt to influence the governing body at the eleventh hour, when reply on the part of a candidate was impossible.

Dr. Skymour on the other hand asserted that the governors of all medical institutions invariably referred to the medical officers the candidates for vacancies, and it was in fact the duty of the medical officers to interfere, in order to guide the votes of the governors.

Mr. ANCELL referred to the elections at the Western Dispensary in proof of the incorrectness of the statements of the last speaker. In that institution the medical officers made it their business to abstain from all interference in the elections, and he appealed to Sir B Brodle, who is connected with that institution, to say whether

fied individual. Altogether, the jealousies and private interests of the medical officers wholly disqualified them from electing their coadjutors, who stood a chance of rejection, exactly in proportion to the independence of their character, at least at St. George's hospital.

Dr. Wilson showed that the existence of two editions of the circular palpably ex-posed the character of the "oversight" suggested by Dr. Macleod. He also reflected on the circumstance of a copy of the circular being immediately sent for insertion to what he described as "a disreputable and contemptible periodical, with which Dr. Macleod was intimately connected, if not the avowed editor."

Ultimately the law was passed.

Monday, January 18th.

The meeting of to-day was, as is usual, opened with a prayer for charity, Mr. HOLLAND in the chair. The story of the grocer and his apprentice, who sanded the sugar and watered the molasses before devotion, was thus forcibly brought to mind. The room was said to be two-thirds packed with Sir Benjamin's disciplined men.

Mr. ELKINS' motion stood first-" That lists be taken of the majority and minority of such governors as vote on any matter decided at any weekly board, provided three governors present shall require it, and that such lists shall be entered by the Secretary as a part of In an able speech Mr. E. the minutes." pointed out the necessity for keeping a faithful record of the proceedings of the board, and on the general advantage of registering the votes on matters of importance, a proceeding to which conscientions voters could not object.

Mr. Monley seconded the motion. He thought the law would prove a salutary check on the votes of those who decided on questions before understanding them, as did many governors at present, thus often sacrificing the interests of the institution to party feeling.

Mr. JAMES LANE felt convinced that such a law would have prevented the extraordinary proceeding of the last meeting, when a motion which had undergone a thorough discussion, and was supported by the speeches of four of the medical officers, and was carried by 36 to 29, was rescinded. at the dicta of Dr. Chambers and Sir B. Brodie, who were not present. "Surely." Mr. L. said, "those 36 gentlemen could not, if their names had been recorded, have submitted to this degradation as voters." He also advocated it upon personal grounds. It had been stated in the board-room and in the wards of the hospital, by one of the medical officers, that in consequence of his (Mr. J. Lane's) factious opposition to these board.

laws, his brother the surgeon should never he had now to deplore, would have been be an officer of the hospital. He (Mr. Lane) was anxious to have his vote recorded upon every occasion, for he mover did vote factiously.

Mr. FULLER (the lawyer) opposed the motion, because no institution in the world afforded a precedent for it.

Dr. Wilson thought that publicity should be given to all the proceedings of the

A Governor (not usually an attendant) said he had heard so many arguments for the motion, and only one speech against it, (the world being too large to be searched for precedents, and arguments being wanting on the contra side, that he should vote for the motion.

Mr. ELKINS replied, and adduced several precedents, among others, the meeting of the Middlesex magistrates, on Mr. Rotch's business, when the votes were recorded.

The motion, however, was negatived by

a large majority.

Dr. Wilson next proposed that the physicians and surgeons " should meet in committee" at stated intervals, " to consider all matters relating to their office, and report proceedings to the Weekly Board." He considered the enactment essential to the proper conducting of the hospital affairs. A year and a half ago the medical officers were deputed to report on a proper site &c. for the erection of baths in the hospital, yet no meetings to consider the matter had ever taken place. The museum, also, was, by the new laws, placed under the care of the medical officers. The questions pending as to the medical schools of the metropolis, rendered it also imperatively necessary for the medical officers to meet, from time to time, in committee, to protect their common interests. Desirous, too, as he was, of avoiding personal matters, he could not omit alluding to the indelicacy of isming a prospectus, headed "St. George's Hospital," with his (Dr. W.'s) name attached to it, without consulting him, and in defiance of his written protest to the contrary.

Dr. SEYMOUR said he should oppose all such propositions. It would be attended with the greatest inconvenience to himself, and it was highly derogatory to the character of a high-minded physician to be compelled to adopt this specific course.

Mr. Nussey, one of the visiting apothecaries, considered the governors would have reason to be offended at such meetings.

Dr. CHAMBERS also opposed the law. At such meetings nothing but angry discussions could ensue. As matters now stood, disputes could be got rid of by a word, and if the governors enacted the clause, he must decline attending the Committee.

Mr. Stone was in favour of the law. Had it before been adopted, the whole of the dis-

averted.

RODERICE MACLEOR opposed the law because it would afford opportunities for gentiemen to " have a fling at one another.

Mr. ANCELL considered the arguments against the law to be entirely personal, and such as the Court could not properly enter-tain. The Court had recognized the medi-cal officers as a body, and delegated to them certain powers which it was incumbent on the Court to take care should be properly exercised. He regretted to hear some of the medical officers refusing to act with others because differences of opinion existed amongst them, and he thought the Court was in error in recognising dissensions in the medical staff, which it certainly would

Dr. Witang library that, after what had fallen from the library that that, after what had fallen from the library that the matter would end. The answer that Mussey he replied, that meetings of the medical officers do take place, meetings to call up the servants and to censure them, -without any reference to the weekly board of management. For instance; upon the recent election of a chaplain, the porter was called before the major section of medical officers, and censured because he was suspected of being favourable to the candidate whom that section did not support ! It was for the purpose of regulating the meetings of the medical officers that he proposed this law, and, moreover, to ensure the first step towards conciliation in the management of the hospital affairs.

The law was rejected by a large majority, and the meeting adjourned to the 22nd.

Friday, Jan. 22nd .- Mr. HOLLAND in the chair.

Sir Culling Smith moved that "In the absence of the two senior surgeons, their patients shall continue to be attended by the present senior assistant surgeon." In a mild, gentlemanly, and conciliatory address, the hon. Baronet besought the medical officers to return to the arrangement which subsisted prior to the election of a second assistant surgeon, and to remove the impression that it was intended to humiliate an officer who had served the hospital with zoal and ability for upwards of six years. The present arrangement, also, was detrimental to the best interests of the institution.

Mr. JAMES LANE entertained the same views, not doubting that the law would, he in accordance with those of Sir B. BRODIE. who pledged his word to Mr. Walker that the election of a second assistant surgeon should not in any way prejudice him, or disturb the existing arrangements.

Sir B. BRODIE made a statement respectventions, and their consequent evils, which ing his own conduct, in which he alluded to some paragraphs in the newspapers as at whose authority I can rely, that the patients justification of the proceedings of himself have not been seen for a week past. Sir, and his colleagues towards Mr. Walker. It was true that he had pledged his word of monr to the effect stated by Mr. Lane, and he should now be glad to have Mr. Walker's efficient services as his assistant, but his colleagues, without consulting him, had entered into a different arrangement. Sir Benjamin was twice called to order in his personal statement, but the chairman ruled that it formed a proper subject for discus-

Mr. KEATE, Mr. BABINGTON, and Dr. SEYMOUR, followed, the latter saying that the present arrangement was so perfectly symmetrical that he should certainly oppose its disturbance.

Mr. CUTLER considered that the governors would be guilty of great hautice to him, if they deprived him of a partition which he had enjoyed for twelve thousand.

Sir Current Better, to reply, observed that he had heard nothing which altered his view of the case. If it could really be shown that the symmetry of the arrangements would be destroyed, he should relinquish his proposal, but he had the authority of Sir B. Brodie himself that it would not. Bearing in mind that Sir Benjamin wished to have Mr. Walker's services, and that Mr. Walker was anxious to be Sir Benjamin's assistant, he could not conceive why the other surgeons should oppose an arrangement to which the parties most interested consented.

Sir Culling's motion was then put to the vote, and, of course, negatived.

Mr. Jones moved, " That the income of the present apothecary should not be reduced beyand his average salary for the last ten years." Towards the conclusion Mr Jones remarked that on inquiring of a governor why Mr. Hutchins, the present apothecary, was alone unde to suffer in his income, he received for a reply, not that he was an unworthy servant, for the contrary was acknowledged on all hands to be the case, but that he was "on the wrong side." Having no personal knowledge of Mr. H., but being acquainted with gentlemen on the strong side in that room, he had been afraid that this was the true cause; but Dr. Seymour had entirely disclaimed its correctness. He now, therefore, had no doubt that those who had the power to avert oppression would cordially support his motion.

Mr. Jones, however, was grievously in error. The usual minority alone supported Ms motion, which was of course negatived. Our reporter then goes on to state that on the question of adjournment being put,

Dr. CHAMBURS rushed to the table, foaming and furious, and thus addressed the pre-

my mind is perturbed, my spirits are oppressed, my feelings are assailed, and the business of the hospital is obstructed. The time of the medical officers is taken up in this Board-room by factious governors coming here to bring forward futile motions.

Dr. Wilson ross to order, but was overruled by the chairman.

Dr. CHAMBERS proceeded: -- by Gover-nors coming down here with factious motives, and bringing forward motions which they know cannot be carried,-when they know they will be beaten, two, three, four to one-four to one, and having no other desire than to take up the time of the medical officers in this Board-room, and causing the patients to be neglected. Having proceeded in the same strain for some time longer, actually livid in countenance, and foaming at the mouth, he turned from the table.

Mr. J. Lanz.-Sir, as you have thought proper to rule that Dr. Chambers was perfeetly in order in imputing factious motives to governors, I, as one of those who have given notices of motion, trust you will call on Dr. Chambers to state whether he alluded to me.

Dr. CHAMBERS.—Sir, I have no explanation to give. Mr. Lane-Then, Sir, you had no right

to make such accusations. (Great uproor.) The CHAIRMAN said, as Dr. Chambers had made so grave a charge and had thus left it, of course he would retract the objectionable expressions.

Dr. CHAMBERS did so, saying that he meant nothing personal.

Mr. LANE then said, that the inconve-

nience arose solely from the medical officers having been allowed to occupy nearly the whole time of this meeting in criminations and recriminations. The charge of factious motives he wholly denied.

The CHAIRMAN here interfered and said he should not allow this matter to proceed any further, on which the meeting broke up in great confusion, and with many censures on the conduct of Dr. Chambers, and some on that of the chairman.

Monday, Jan. 25.

Prayers.-Mr. Powers in the chair.

Mr. MORLEY wished to have some opinion as to the conduct of Dr. Chambers at the last meeting, but the chairman objected. Mr. M. then handed in a written paper on the subject, which was refused.

Mr. J. Lane moved the incorporation of two clauses of the Apothecary Laws. Feeling from what took place at the close of the siding officer:—Sir, I have a complaint to last meeting that those governors who make of neglect of duty. I have been into brought forward independent motions had the wards, Sir, and am told by a person on not the protection of the chair, he had determined on not attending this meeting, but on reflecting that the conduct of one individuals whose title to vote as a governor, he resolved to be present, party who profit by holding office in the inthough, with regard to his motion, he had no expectation it would be decided on its for public hospitals should be founded, and which should nlone be followed in the decider the present.

The CHAIRMAN begged Mr. Lane to proceed.

Mr. Lane did so, though with every doubt of a fair discussion. He then explained his views on the subject, but we are compelled to say that some deficiency in the notes before us prevents the arguments on the question from being sufficiently clear for publication. The tendency of the arrangement opposed by Mr. Lane seemed, according to the report, to sanction the entrance of pupils to the assistant apothecary, whose interest it would then be to attend to his pupils rather than to the regular husiness of the bespital.

Mr. BAGSHAWE contended that the meeting had not power to concede what Mr. Lane desired.

Mr. Benson (a barrister) differed from his learned friend, who he thought carried his special pleading and legal quibbling rather too far.

Captain Bagnold thought that the quibbling was not too paltry for the Old Bailey, but that they would be ashamed of it even at the pie poudre court at Bartholoniew-fair.

After an hour and a half's speechifying it was decided that the meeting could amend the clauses opposed by Mr. Lane.

Mr. KRATE supported the views of Mr. LANE, and made a motion to that effect.

Mr. FULLER moved that the clauses do stand as they are, which was carried.

Dr. Wilson then withdrew his notice of motion. In consequence of the proceedings at the last meeting he could not consent to bring forward any motion, and he took that opportunity of informing the governors that he had seen all his patients three times during the last week.

Mr. BABINGTON took up Dr. Wilson's motion, and it was carried.

Captain BAGNOLD moved that when a patient was attended by the assistant surgeon, his name should be placed on the bed card, as well as that of the surgeon.

The surgeons objected; motion with-drawn.

Mr. J. Lank now felt convinced that he could not carry a motion that stood in his name, and he therefore withdrew it. All the others but one (which was passed) were also withdrawn, and the meetings terminated.

Our reporter adds,—" Upon the whole these reports exhibit an instructive leason. They show how even a public institution may be rendered thoroughly subservient to the interests of a party. Such a result is not difficult of accomplishment in an esta-ination of the assaultable, while the patho-

on the voices of individuals whose title to vote may be supplied from the purses of the party who profit by holding office in the institution." The principles on which la for public hospitals should be founded, and which should alone be followed in the decision of questions of management, are wholly abandoned in the operation of such a system. Those principles are few and most simple. The first concerns the pattents,how their wants may be supplied. The second concerns the public,-how the science of medicine may be hest served as a means of promoting the public health. That these objects are the very last which have been considered by the party of Sir BEN-JAMIN BRODIE in legislating for St. George's Hospital, is so plain, that words would be wasted in a farther exposition of the fact.

FOREIGN MEDICINE.

Gazette Médicale de Paris, January, 1836.

THE four numbers of this journal for the month of January, 1836, contain so few original articles, that the whole are comprised in the following communication:—

1. Memoir on the False Membranes of the Cerebral Arachnoid, founded on Observations collected at *Bicitre*, by M. F. Le-LUT.

2. Memoir on Gangrene of the Lungs in Deranged Patients, by M. J. Guislain.

3. Clinical Reminiscences of St. Louis. Wounds of the Head, by J. F. MALGAINE, M.D.

FALSE MEMBRANES OF THE ARACHNOID.

The memoir of M. LELUT contains twelve observations of arachnitis in insane patients. accompanied by an exudation of false membrane. In all these cases the intellectual faculties were deranged in the most serious manner, and there was, in addition, some lesion of motility, consisting either in convulsions, agitation, or paralysis. The false membrane in all cases existed in the cavity of the arachnoid, like the false membrane in plcuritis or peritonitis; it was never formation between the arachnoid and pia mater, although Dr. ABERCROMBIE and several Sther writers speak of false membranes interposed between these two membranes. Indeed, many authors fall into this error. How many

isting outside that membrane!

The false membrane, in almost all the gases examined by M. LELUT, was situate on the convexity of the hemispheres, occupying the anterior part particularly: the author explains their mode of formation in the following manner. When simple serum is effused into the cavity of the arachnoid, it gives rise to the formation of false serous membranes, similar to those observed in true acute arachnitis. When, on the contrary, blood is exhaled in such a manner as not to produce a fatal apoplexy, the serous and aqueous parts are absorbed, and nothing is left but the fibrine, which is ultimately converted into a new tissue. · the

The authors who have observed false membranes on the aracknowd in a chronic form, are agreed in thinking that it is generally impossible to diagnosticate this lesion. Its symptoms are commonly confounded with those of cerebral compression or irritation, so frequent in maniacal patients.

GANGRENE OF THE LUNGS IN THE

The memoir of M. Guislain also refers to a condition sometimes observed in insane persons. LAENNEC describes gaugrene of the lung as a very rare disease; he saw it only six or eight times in the course of eighteen years' practice; M. Guislain has had occasion to see this disease much more frequently, in the insane patients at the hospital of Gand. He considers it as depending on the following conditions, viz., 1st. An aberration of the moral power consisting in a disgust and horror of all food. 2nd. A deterioration of the blood, in consequence. 3rd. An alteration of the pulmonary tissue, as a final result.

The attention of the author was first drawn to this disease by the circumstance of excessively foul breath in a patient, who for a long time had refused every kind of aliment. On examining the body he found the lungs extensively sphacelated. This obstinate refusal of food exists in many patients affected with melancholy; in one-ninth of all the insane, according to the author, it is excessively difficult to overcome; they sometimes rumain twenty, thirty, or sixty days without accepting any food, drinking ten days. Insane patients affected with this nething but some cold water, or fasting the disgust for food not only seem to be indiffe-

logical change is described as altogether ex- | first days of the week and then eating on the rest.

> M. GUISLAIN has made thirteen autopsies of deranged persons who thus died in a state of inanition: in nine of the thirteen he found the lungs gangrenous: in three cases the tissue of the lungs was of a darker colour than usual, and in one there was a simple congestion at the posterior part of the lungs. In the gangrene, one lung was always more affected than the other, and the lesion, which never implicated more than one-fifth of the lung, was more sensible at the summit than at the base. The patient never seemed to suffer any pain in the chest; he did not cough; the respiration was not difficult, nor was there any appearance of fever : the skin was cooler than natural, and the pulse rather retarded than accelerated. In all the insane patients who have abstained for any time from eating, the author observed a special symptom, viz., a change in the colour of the skin, always more striking the longer the patient remained without cating. This consisted in a brick-red colour of the cheeks, passing by degrees to brown or purple. It probably depends on a change in the composition of the blood, produced by abstinence. Inflammation of the stomach or abdominal viscera was not observed in a single case; the stomach always presented itself with the most healthy appearance. This is the more curious, as the experiments and observations of HALLER, DUMAS. BROUSSAIS, MAGENDIE, and ADELON, show that in most cases of forced abstinence the stomach affords traces of inflammation or even of erosion. In the insane person who refuses food, we find nothing of this; we see no trace of pain. When restored to his faculties, he affirms that he never felt hungry; we remark no fever, no heat of skin. no acceleration in the pulse. In abstinence of a healthy individual the force sinks rapidly; in the insane, on the contrary, the force is sustained nearly to the last day. He comes into the hospital after having fasted for 20, 30, or 40 days. He walks about, takes ordinary exercise, and continues to live in a state of extreme emaciation, though not much debilitated, for months, or even years, swallowing from time to time a mouthful of broth, while another person subjected to the same privations would die in eight or

rent to hunger, but the other seases appear | to the original papers contained in this exequally modified. Thus they support the sensation of cold and heat with an astonishing indifference; a heated iron applied to the skin produces scarcely any sign of suffering; they are indifferent to the loudest noises; they regard the sun without blinking, and all the other senses are in a similar degree of stupor. The following case, which we quote from the memoir of M. Guislain, shows that when the mental state has not made too great progress, we may hope to overcome the resistance of the patient, and even when the pulmonary lesion is very grave, an unexpected cure may take place:-

Case .- Marie de Leest, descended from a family in which several members were mad, was seized with a deep melancholy while in the establishment of the author. The patient was 28 years of age, of very delicate complexion, blue eyes, and light hair. months after her entrance she commenced to refuse all kinds of food; three days passed in perfect abstinence. Threats and entreaties were employed in vain. At length force was had recourse to, which succeeded twice; but the patient soon offered such violent resistance that the liquid was retained in the pharynx, and after some time rejected by the mouth. The introduction of a tube into the asophagus was impossible. The same fruitless efforts to introduce a little food were repeated day after day; sometimes, perhaps, a few spoonfuls of broth were passed. The colour of the face now commenced to assume the pathognomic character. The force declined gradually, and after two months spent in complete abstinence she commenced, without any previous cough or difficulty of respiration, to spit up fetid matter, at first rusty-coloured, and finally brown. At this time she did not eat a single morsel of food, as we were afraid to employ force lest suffocation should be produced. However, after remaining some time in this condition, she suddenly determined to eat, and in a few days the face recovered its former pale colour; the sanguineous fetid expecioration ceased by degrees, and the patient at length recovered a perfect state of health. She left the house in 1829, but came in again This time also her disease was in 1831. characterized by a refusal to eat, and by pulmonary disease, under which she sank. On opening the body, the left lung was found reduced to a dark and fetid mass.

Archives Générales de Midecine, September, October, November, December, 1835.

The press of other matter prevented us on a former occasion from noticing more than one or two articles contained in the last four numbers of the Archives Ginerales. We now return cellent journal for the last trimestre. They are.

1st. Researches on some of the causes that hasten or retard the period of puberty; by M. MARC D'ESPINE.

2. Conclusion of Researches on Dysen-

sery. By M. THOMAS.

3. Researches on the Pulse, the Respiration, and the Temperature of the Body in Discuses, and on the Relations existing between these Phenomena. By M. A. DONNE, Chef de Clinique.

4. On the Physiological and Essential Effects of the Rarefaction and Compression of the Air on the Body or Limbs. By M. T. JUNOD.

5. Memoir on Pericarditis. HACHE, Interne.

6. Clinical Researches into the Diseases of Old Persons. By Messrs. HOURMANN and DE CHAMBRE.

7. Researches on the Movements of the Heart. By M. BLAC, Interne.

THE PULSE, RESPIRATION, AND HEAT.

We present our readers with the paper by M. Donne, on the relations which exist between the pulse, respiration, and animal heat, in different diseases.

The experiments which form the basis of this memoir, were conducted at the hospitals of La Pitic and La Charite, with the object of determining how far the pulse, the respiration, and the heat of the body, are affected simultaneously or independently in several diseases. For a statement of the numbers ascertained during the great series of experiments made by M. Donne, we must refer to his memoir. Our space will only permit us to notice some of the general results which have been obtained. The experiments were made on persons affected with pneumenia, pleuritis, phthisis, hypertrophy of the heart, hemoptysis, chlorosis, diabetes, puerperal fever, hemiplegia, hysteria, jaundice, &c.

The first question examined was, in what diseases do we find the pulse most frequent, and the animal heat most elevated? The following numbers, selected from amongst a great many experiments, answer this first question:-

	Pulso, rather.	nespira
Hypertrophy of the [150 . 394 .	. 34,
heart	168 . 40 .	. 48
Phthisis	140 39	. 62
Typhus fover	Mind or and	

pulse and heat had attained the highest degree of elevation; the latter was measured By the centigrade thermometer, thirty-six to thirty-seven degrees of which give the normal temperature of the human body. It may be seen, from the above table, that the acceleration of pulse was always accompanied by an classition of temperature; the skin is most warm in those individuals in whom the pulse is quickest; this rule, however, cannot be generalized too extensively; it is not true in all diseases. Thus M. DONNE gives forty-two experiments made on patients affected with pulmonary tubercles; in twenty-six we do not find any relation between the temperature and pulse; in sixteen cases only, the animal heat fell or rose in proportion to the slowness or acceleration of the pulse. Again, in ten observations made on pleuritic patients, we cannot discover any relation between the state of the pulse and the degree of heat; on the contrary, in seven experiments made in pneumonia, the heat constantly rose with the pulse. The same relation was observed in twelve experiments on patients affected with hypertrophy; in eleven experiments on puerperal fever; in four experiments on jaundice; in six experiments on acute rheumatism; in five experiments on inflammatory fever; and, finally, in six experiments on typhus fever. In fourteen experiments made on females affected with chlorosis, the relation of the pulse and heat was by no means constant.

The above numbers confirm, in an exact manner, an opinion generally received amongst physiologists, although it never before was proved by direct experiments on a large scale-viz. that the animal heat often ascends or descends with the pulse. They also prove another point, which is contrary to the ideas generally received. They show that in some cases there is no proportion whatever between the number of pulsations and the degree of heat, although the relation of ascending and descending may still exist Thus, in one case of typhus fever, the pulse being at minety, the thermometer marked thirty-nine degrees; and in another where the pulse was up to 108 it marked 40°, the mesimum of heat in the human hody. M. Downe, however, remarks, that typhus fever is the only disease in which he observed this great disproportion between the pulse

The above cases were those in which the | and heat. In the normal state of the body, we do not find this close connection between the pulse and animal heat: this is easily proved by experiments, which every one can perform on himself; we can make the pulse mount fifteen or twenty beats in the minute, without producing the least change in the temperature of the body. In cases of disease this is not the case; the heat is elevated with the quickness of the pulse; but here an interesting question, which has never been examined by physicians, presents itself. Does this relation between the pulse and heat exist more in one disease than in another? Is it influenced by the nature of the disease? Thus, for example, does it depend on the integrity of the organs of sanguification, of the nervous system, or of any other apparatus?

> These questions are resolved by the tables given by M. DONNE. Thus, in tubercular affection of the lungs, and in pleurisy, the relation between the pulse and heat is more frequently absent than present. In chlorosis, again, we do not observe this relation; the latter disease, indeed, does not belong to the pulmonary organs, but sanguification may be regarded as imperfectly performed. In organic affections of the heart, such as hypertrophy, contraction of its valvular openings, &c. the relation is not constant, but it is more frequently present than absent. On the other hand, in puerperal fever, in hemiplegia, jaundice, inflammatory fever, ague, and peritonitis, the relation between the pulse and heat was almost constantly observed. In the theory of animal heat, such as it is generally admitted at the present day, after the researches of MM. Drione and DESPRET, the augmentation of the animal heat may be attributed to the acceleration of the circulation. In this theory, ninetenths of the heat in animal bodies is attributed to the combination of the carbon of the blood with the oxygen of the air, and hence the more quickly the blood passes through the lungs, the more carbonic soid will be formed, and the more the heat of the body is clevated. However, some strong objections may be made to this theory. In the first place, it is remarkable that one of the diseases in which the animal heat is most elevated, is precisely that in which sanguincation is most imperfectly performed : thus. in pulmonary consumption, the heat of the body often rises to 38°, 39°, or 40°, even.

where one half or two-thirds of the lungs are indurated, and impermeable to air. Again, the experiments made in tylhus fever, show that the animal heat depends on other sources than sanguification and assimilation; in that affection, certainly the pulse is not always much accelerated, nor the respiration very quick, yet we find the heat of the body mounting in one case to 39°, with a pulse of 93; in a second case, equally to 39°, while the pulse was at 108, and the respiration at 28.

M. Donne proposes to follow up these interesting inquiries. We shall take care to communicate his observations as they appear.

PERICARDITIS. •

The memoir on pericarditis, by M. HACHE, is an excellent resumé of the present state of our knowledge on pericarditis, by an old interne of M. Louis. The conclusions to which he comes are based upon eight cases of pericarditis, observed with all the care peculiar to the pupils of M. Louis's school; of eight more cases, collected by M. Louis between 1830 and 1833; and, finally, on an examination of these original observations with those published very lately by Professor Boulliaud of La Charité. It is not our intention to go over details already sufficiently known to the profession, we shall therefore merely notice a few principal points in the memoir of M. HACHE.

The cases observed by our author may be distinguished into two kinds; one where the disease was simple; the other in which the pericarditis was accompanied by various complications. In the first of these forms the disease appeared in such a manner, that if we were to be guided by the description given in any of our standard medical treatises, it would be impossible to detect, or even to suspect, the existence of inflammation of the pericardium. Thus the premonitory symptoms were mild, consisting in some pain in the precordial region, a little cough, and very slight fever, which did not prevent the patients from pursuing their ordinary occupations, or even laborious employment. After one or two weeks they came to the hospital on foot. Nothing in the patient's countenance of a general bearing, indicated the existence of a severe malady; the face was calm; the skin quite cool; the pulse moderate, and, we again repeat, without the assistance of percussion and auscultation, it would have been quite

tom much more frequently existing than authors generally describe it to be. Thus in all the cases observed by M. HACHE, the development of pericarditis was marked by some pain, at times slight, near the left mam-ma. The same result is obtained by examining the twenty-two cases detailed by M. Louis and M. Bouillaud, while in a moiety only of those published previously to the memoir of M. Louis in 1826, the presence of pain about the precordial region is mentioned. Palpitation is another symptom which frequently attends pericarditis. It is, indeed, mentioned by all writers, but it may not be uscless to give, what we may call, some statistical notes of this symptom. It was present in all the eight cases of M. HACHE. In the twelve cases of pericarditis published by M. Lours, it is mentioned six times. Thus we have palpitations existing in fourteen out of twenty cases. However, if we analyze the twenty-eight cases published by M. BOUILLAUD, we find palpitations mentioned only three times. How is this great difference to be explained? In many cases of pericarditis, the palpitations do not cause much distress, or attract the patient's attention, and we think with M. Louis, that if palpitations are not mentioned by M. BOULLAUD in more than three cases out of twenty-eight, it is because his attention was not directed to that point. This circumstance shows the necessity of noticing, as well those symptoms which are absent as those which are present, if we desire a case to possess the full value of which it is capable. It is a point upon which M. Louis insists with some carnestness, and is one of which English writers are by far too negligent.

The rational signs of pericarditis are, as we have before said, insufficient to demonstrate the existence of this disease: fortunately the physical signs are much more certain; they are given at length, and with clearness, by M. HACHE. Before entering on an examination of these signs, we should mention that the author seems to refer constantly to cases of pericarditis with abundant effusion, and not to the dry variety of Dr. STOKES. One of the first physical symptoms worthy of notice is a prominence over the precordial region, depending evidently on protrusion of the soft thoracic parietes by the distended pericardium; this symptom was very well marked in five of M. HACHE's cases. In one it was slight; in two young girls it could not be determined; but there the disease was very slight, and if a small difference existed between the two sides of the chest, it was masked by the volume of the brensts.

repeat, without the assistance of percussion and auscultation, it would have been quite cussion gave a dull sound over the whole of impossible to detect the change which had the precordial region, and above this, slong

the sternum, as far as the third, second, or fresh effusion. Four days after this relapse even first rib. As resolution took place, this the bruit de frottement reappeared, but with region became sonorous from above downwards, but in many subjects the sound remained obscure beyond its usual limits, at the time they left the hospital, all other symptoms having completely disappeared.

Auscultation .- In all cases the respiratory sound was absent, or more or less weakened. in the whole of the space occupied by the distended perleardium. This symptom evidently depends on the portion of the left lung which commonly covers the heart, being pushed on one side. As the effusion was taken up, the respiratory bruit re-appeared, from above downwards, in the space where it was before absent.

Sounds of the Heart.—In cases of effusion, the normal sounds of the heart are obscured and displaced; being more evident at the level of the third rib than elsewhere. The rythmus was altered in three cases only, and then in a cursory degree. M. Louis observed the same irregularity in two cases out of eight; and in fourteen cases of cure, reported by M. BOUILLAUD, we notice it only once. Hence irregularity in the pulsations of the hear exists only in one-fifth of cases of cure, and that in a mo-

mentary manner. It cannot be regarded as an important character in the diagnosis of simple pericarditis; it seems to belong rather to that acute and complicated affection of which pericarditis forms only an element.

Abnormal Sounds .- The bruit de frottement existed in only three out of the eight cases observed by the author; in eight cases reported by M. Louis the same bruit was absent; however, it must be remarked, that at the time the patients were examined, the pericardium was the scat of more or less abundant effusion. The three cases in which the bruit de frottement was heard, occurred in subjects who laboured under the disease for a great length of time, and it appeared at a period (23rd to 25th day) when the symptoms evidently showed that absorption of the effused fluid had taken place in part. In two cases this bruit continued only three days, was not very distinct, but superficial, and was not accompanied by vibration of the thoracic parietes. In the third case the bruit de frottement was very strong, and at its commencement presented the timbre of a sonorous bruit de cuir. During the last four days it was attended by a vibratory thrilling of the thoracic parietes, circumscribed, at first, like the bruit de frottement, to he portion of the third intercostal space that joins the sternum at the left side, it then extended to the whole precordial region, and disappeared gradually with the rubbing sound. The latter bruit ceased suddenly on the 12th day after its operation, when the increased prominence over the precordial region, and matity, announced a his own account.

less force, and was attended by no vibrating thrill. M. Hache says,

"These details confirm fully the result of the observations published by Dr. STOKES in the Dublin Journal, on the mode of apposition and formation of the fremissement vibratoire. It is developed under the same circumstances as the bruit de frottement, but much more rarely. In the cases reported by M. Bouillaud it is noticed only once, and then described as a new species of fremissement cataire.

"Thus, in thirteen cases of pericarditis, where the bruit de frottement was distinct, the fremissement was only observed twice, or in one-sixth of the cases; but as the bruit de frottement itself exists in only half the number of cases, it follows that the phenomenon discovered by Dr. STOKES exists only once in twelve cases, and must, therefore, be of secondary importance." case the author observed the metallic tinkling at a time when the effused fluid was nearly absorbed; M. Boulland has noticed the same sound in several of his cases. We do not propose to follow the author through the analysis which he gives of other symptoms furnished by lesions of innervation, of circulation, or nutrition; let us,

* We have given the very words of M. HACHE, or nearly so. It is evident that he has not read the paper of Dr. Stokes, or has heen led into error by an imperfect translation. In the first place, the object of Dr. STOKES's paper was not to prove the existence of fremissement as a diagnostic sign of pericarditis, but to direct our attention to the value of stethoscopic phenomena, and chiefly to the bruit de frottement, in the diagnosis of pericarditis. Again, Dr. STOKES does not describe the vibratory thrill as existing in all his six cases; and, finally M. HACHE'S statistics are evidently erroneous when he says, " in thirteen cases where the bruit de frottement, or de cuir neuf, was observed, the fremissement was perceived only twice," because a few lines before this he quotes Dr. STOKES's authority for six cases, in which these two symptoms coincided together.

Since writing the above observations, we have referred to the number of the Archives Ginérales (for January 1834), in which Dr. STOKES's paper is translated, and we must say, in justice to that excellent journal, that the translation is perfectly correct, and that the errors of M. HACHE must be placed to

however, my a few words on one symp- works of ANDRAL, LOUIS, and BOULLAUD. pericarditie; this is fainting: it was obwas complicated by other grave affections: pericarditis. Fainting, then, does not belong all cases, a moderate antiphlogistic method to pericarditis, and may, ia all probability, was employed with success. Digitalis was be attributed rather to the dangerous com-plications which exist in all cases where this of from six to thirty days, one grain the phenomenon manifests itself.

Diagnosis.- In the cases observed by M. HACHE, the pain about the precordium, palpitations with or without dyspnara, troubled dreams, or sudden awaking with fright, were nearly constant symptoms; but these are not sufficient to determine in a certain manner the existence of this disease, which can only be discovered by exploration of the chest. Then the development of the left side of the chest, the dulness of sound over the whole precordial region, with absence of the respiratory sound in that space, the displacement of the sounds of the heart, frequently attended with absence of impulse,-all these signs indicate the presence of effusion into the pericardium, and are the more important, because in most cases inflammation of that membrane determines offusion, and we are rarely called upon to examine a patient in the first days of his disease. These observations apply only to pericarditis with effusion; the author has not had an opportunity of seeing what Dr. STOKES calls the dry variety.

The march and termination of simple pericarditis are usually favourable. The disease terminates by cure from about the lath to the 22ud day, under the influence of antiphilogistic treatment; however, this malady is more frequently complicated than simple: thus in five of the eight cases reported by M. HACHE, he observed the following complications; in one inflammation of the lungs; in two rheumatism; in two tobercles. The coincidence of rheumatism is regarded as very frequent by M. BOUILLAUD, who says "rheumatismal pericarditis is incomparably more frequent than any other species; it exists in about the half of all subjects affected with severe articular rhenmatism." This assertion is rather too general; in composing the cases reported by M. BOULLAUD, ANDRAL, Dr. STOKES, LOUIS, and M. HACHE, have a total of 72, and find that acute articular rheumatism existed only sixteen times, or less than one-fourth.

The age and sex have a certain influence in the frequency of pericarditis. Thus the oldest of M. HACHE's patients was 38 years

tom, which, if our memory does not deceive we find only six whose age passed 40, and us, is given as a frequent attendant upon the majority was below 20. Pericarding, then, is a mulady of young persons, that it is served in two cases only, where the disease much more frequent in the adult than in the child. Females are less subject to the disease one patient suffered under this symptom at than males. In 107 cases collected by M. the commencement of the disease; another Louis, we find 27 women, 80 men; and in felt faint whenever he attempted to sit the 36 observations of M. Bourllaup, we upright. The same phenomenon was observed only once by M. Lours, and once by cessary to enter into any details upoff the M. Boulland; sever in simple cases of treatment of this disease by M. Louis. In first day, carried gradually to six grains in twenty-four hours : in two cases it produced a manifest lowering of the pulse, but the other symptoms were not relieved in proportion, and the pulse soon rose again, although the medicine was continued for a length of time and in elevated doses.

THE LANCET.

London, Saturday, February 13, 1836.

NEVER was there a more favourable period than the present for promoting a little gentle agitation on the subject of medical reform. But although there is an overflowing catalogue of abuses which require to be demolished, yet there are questions standing apart for consideration, which are altogether unconnected with the misgovernment and malpractices of our medical colleges, corporations, and hospitals. points a great difference of opinion prevails, many contending that a liberal system of government would be injurious to the interests of the community, while others believe that if the self-perpetuating principles in the election of the rulers in our colleges were abolished, good government in medical matters would be the certain and speedy result.

There is one grievance, however, which, although it is itself the source of much heart-burning and injustice, does not owe its origin to any enactments of the Legislaof age : of fifty-five cases contained in the ture, or to any charters granted by the Crown,

We refer to the unjust treatment to which | medical man shall be devoted in aid of the liament with whom he or his brethren quiry; but where the Coroner is not a meners' Inquests, is founded on such a just latter case, is the whole proceeding. It is and immoveable basis, that no danger can then nothing but a solemn farce, which is claim. What, we ask, is the value of the sion. inquest, in five cases out of ten, unless there | It may be alleged that witnesses are not be a medical witness present on the occa- ordinarily reimbursed in our Courts of jussion? And what right have the public to tice, except for the bare expenses which insist that the professional services of a are consequent on their attendance. The

medical practitioners are subjected, who proceedings at a Coroner's Inquisition, withattended witnesses at Coroners' Inquisitions. out making him an adequate return in the We, therefore, earnestly and emphatically way of compensation? In fact, the entire entrest our professional brothren to use their proceeding, in many instances, constitutes utmost endeavours to obtain support for a a worthless, nay, even a mischievous farce, bill which, in all probability, will be placed in consequence, almost entirely, of the en the table of the House of Commons on want of a law which authorizes the coroner the 2nd of March next. The mode of pro- to direct the payment of a sufficient sum for ceeding in that as in every other case in medical attendance. Be it observed, too, which the interference of Parliament is that a medical witness, on being summoned required, is by petition; but we would to attend at the inquest, is liable to be comremark here, that it is a great mistake mitted to a jail, in contempt of the mandate to suppose that one petition, however nu- of the Court, if he omit to be present at merously signed, is, or can be, equal in in- the inquiry. Ought such a state of the fluence to a great number of petitions; law to last? Is it possible that it can last coming from various cities, towns, and much longer if the medical profession disother places in the country; because in charge their duty to themselves and the the latter case a numerous body of public? This is a public and not merely a members of both houses of Parliament professional question. The welfare of the will be enlisted on the side of the profes- community is the point at issue. Often as sion. If there he but one petition, it can be we have thought and stated that the Court presented by but one member. If there he which is held by the Coroner, is one of the numerous petitions, they are necessarily most important institutions in the kingdom, placed in the hands of many members, who never has it struck us as being so vitally are then made to feel an interest in the sub- momentons as when we have reflected on ject, which could not from any other cir-the great value of the efficient and honourcounstance occupy their minds. Besides, able medical testimony of witnesses who each petition may ensure an application by have been educated in the science of mediletter, or a personal interview, or, at any cine. Even if the Coroner were himself a rate, some communication between a medi-| medical practitioner, it should be recolcal practitioner and some member of Par- lected that he is not a witness in the inmay be acquainted. Had we anything to dical practitioner, as we have a thousand fear from an investigation of the subject, times alleged he ought to be, in one half of we might be chary and cautious in hazard- the inquests that are held the money which ing such applications, but the demand of is paid out of the county rates for the exmedical witnesses to be paid for the time penses of the Court, might as well be tossed and services required in attending at Coro- into a river. Preposterous indeed, in this arise from its discussion,-none from the calculated to lull unreflecting and ungifted severest scrutiny into the correctness of the spectators into a state of pernicious delu-

parallel, however, does not held when it is attempted to be drawn between such persons and medical practitioners who give evidence at Coroners' Inquests. In the one case the witness generally attends because he was accidentally cognisant of the facts on which he is to be examined. In the other case the witness attends officially, and the value of his testimony depends on the time and money he may have devoted, in order to acquire a scientific knowledge of his profession.

Again. Without such testimony, the inquest is useless to the public. And, vet further, the entire duty of this attendance is necessarily restricted throughout a whole district, to the few practitioners who may be resident within its circle. Upon a very few persons the toil and responsibility of attendance on these occasions imperatively devolve. Upon what principle of justice, therefore, can a very few gentlemen, who have expended many years of their time. and many hundreds of pounds of their capital, in the mere attempt to render themselves competent to execute the general duties of their profession, be required to make. -systematically and regularly make,-the heavy sacrifices which the summonses of the Coroner usually demand? On our side of the question the entire justice of the arguments rest. On the other side of the question,-if there be an opponent,-he can be armed only with the weapons of prejudice. In the face of such instrument, the advocates of a correct principle stand in no danger.

But we must not remain passive and quiet in this emergency. It were folly, indeed, to continue gazing, stupidly gazing, at the progress of events, without taking some pains to turn the current of improvement to our own and the general advantage. All. that is, every friend to the cause of medical justice, should resolve to take part in the struggle. No doubt can be entertained of the successful progress of the Medical Witnesses Bill through Parliament, if

medical practitioners will but use their influence in sending petitions, start politions, to members of both Houses of the Light-ture, praying that such a, measure may be enacted into a law. We say to members of both Houses of the Legislature, because it is of the utmost consequence that an impression which is produced in one House of Assembly should not experience a countervailing check in the other.

It should be understood, also, that it is not necessary that the petitions should be written on parchment, as a sheet of common writing-paper is amply sufficient for the purpose.

Beyond praying for such remuneration as the Houses of Parliament may consider it wise and just to grant, it will only be necessary to point out the hardships to which medical practitioners are subjected by their being so often required to attend at inquests which are held many miles distant from their places of residence, occupying many hours of their time in the journey and in waiting during the progress of the proceedings. The folly, also, of drawing money from the county fund for the payment of the expenses of an inquest when efficient medical testimony is not received, should be shown, and allusion may with propriety be made to the necessity of instituting post-mortem examinations for the information of the coroner and jury, and of the danger to life which often attends such investigations.

And now let us hope that this grievance will no longer exist from want of applications for redress, or indisposition on the part of the Legislature to grant what is so truly and unquestionably just. Let us hope that a wiser state of things will arise out of the simultaneous exertions of the medical practitioners of this empire. Let it especially be remembered that no good result can follow any efforts which may be made, unless both houses of Parliament become the points towards which every effort is directed. Finally, we conjure every surgeon who may

this the greatest metropolis of the world. You have shone with equal brilliance in the Court and in the College. The polish and suavity of your manners have rendered you as acceptable at the banquets of great peers, as at the tables of commoners; and, as I have heard you yourself so justly observe, your presence at the hospitable board of our beloved Sovereign has absolutely conferred a distinction on the College, and is an honour to the profession generally. Now let me contrast with this, your true and just character, that of the ephemeral reptile, the mushroom, the mock surgical reformer. In place of the classical and moral education which you received at Oxford, and the elegance of manners and ideas which you there acquired, he spent all his time within the precincts of an Institution, where, instead of being occupied in those pursuits which expand the mind and ripen the understanding, he was employed as the dirty drudge of the Hunterian robber, whose -Alas! we are all creatures of dependent men.

attention to this subject. It is for you to

SPRING RICE, pray fail not to tell me the friars? Who will come forward with fiftyresults. It is better that I should communimay be committed in the proceeding.

BRODIE is at the bottom of this, and that that Council ought to have anything to do, there is some peculiar object in the request. directly or indirectly, with the Metropolitan I also hear that the little man has been intrigning to get some relation of his own appointed as trustee to the Hunterian Museum. rest.

" Your faithful and devoted.

" Monday."

R.

" My DEAR SIR, -Our matters regarding cured an interview with Mr. SPRING RICE. with whom he assumed the character of a liberal, he got the Chancellor, step by step, to consent to see me. I soon found out, however, at my interview, that we had little to expect from Mr. Ricz.

"I began with explaining to him how carnest our College was to reform itself, and I assured him that in the course of one or two years the thing would be done satisfactorily to all parties. I explained to him that one great difficulty which we had to surmount was now got over by the deaths of TUTHILL and MATON, whose bigoted and contracted minds would not a to listen to any plan of reform, and that the few superannuated old downgers who remained in the College would, to the course of nature, soon leave this world of sorrow, and thus would enable us younger Fellows, to sweep away those abuses which are so loudly complained of. I must confess that all I said seemed to make little impression on the mind of the CHANCELLOR. I could distinctly perceive that our foes had been there before us, and that it is determined to overthrow the present medical corporate bodies. He evidently saw the motives which had influenced BRODIE, and CHAMBERS was much too thick-headed a fellow to alter his habit, and most of us are more prone to views. In fact, it now appears to me next to follow the path of evil than of good,-to certain, that a metropolitan university will become the leader of a set of corruptionists | be established, on the broadest possible basis, than the peaceful advisers of liberal and in- granting degrees in medicine and surgery on such terms as will best ensure to the "I have thought it proper to draw your public competent medical men, and permitting those who may obtain such degrees consider what reliance should be placed on to practise their profession freely, without those who now ostensibly co-operate with molestation, in all parts of the Pritish domi-you in your arduous endeavours to obstruct nion. When such a plan is carried into exthe progress of the Metropolitan University, rule in Pall Mall East? What will be the "Whenever you contrive to see Mr. condition of the Drug Company in Blackresults. It is better that I should communicate pound Bank-notes to purchase our license? cate with the Fellows on the matter. For Who will then be at the trouble of tretting ay be committed in the proceeding.

"Have you heard that the Council of the dical qualification?" I certainly do not cace College of Surgeons have applied to the so much about the change in Lincoln's im-Bishop of London to write a Latin inscrip-fields, and, indeed, I agreed with Mr. tion for their new building? I suspect that Spring Rick, that not one of the mea of University.

" I have finally arranged to commence I have no doubt that he has a good inten- our evening entertainments at the College tion in this; but he seems never to be at on the 2nd, when I shall have an interesting oration to deliver. In the interim I am giving a series of snug little dinner parties, at one of which I invited Dr. Wilson, in the hope of soothing his feelings of opposition. There is, however, a lamentable inflexibility about him which will give me some trouble. I have heard that he made a the University have been managed much as direct attack on poor M'Choun ing they in anticipated. Sir Benjamin having pro-board-room of St. George's the other day, as the editor of the Gazette. Ever yours,

" Thursday."



Sin, -I beg leave to offer my mite towards the general fund of plans concerning this important and humane question.

1. The parish officers should submit to view, in a public place or at an open vestry, a list including every pauper in the parish who cannot afford to pay for medical aid in case of sickness. The list to include every individual member of a pauper's family who is unable to gain a livelihood.

2. Every pauper or indigent labourer who claims a place on the medical list, to have his claims openly heard and discussed once a-year by the parish officers and the pa-

rishioners who pay the taxes.

- 3. After having made the list, the parish should agree with a medical officer to attend every person named in the said list, in case of sickness, for one year, at some fixed price, say fourteenpence per head in the country, and tempence per head in the town. If we consider that poor families are generally very numerous, about fourteenpeace will come near the mark; and if midwifery be included in the agreement, an additional sixpence should be added to each name on the list.
- 4. The medical candidate should be proposed by the guardians or the parish officers, and be elected by ballot, by those only who are on the list of paupers; by which means the paupers would be less liable to the abuses of a bad election. The paupers, doctor's complacency and attention, as the voters have on members of Parliament.
- 5. Should sickness occur to persons not named in the list, yet who are unable to pay for medical attendance, such cases to be considered as common cases, not belongdozen more names on the list.

Supposing a parish to contain fifty panpers who receive a weekly allowance, pro-We taken at 1s. 2d. per head, the sum would little enough.

This rate of payment is but very moderate, but then the practitioner does not expect to fatten by means of poor patients. Although the poor form an important part with you in the opinion that medical men

in the chain of society, yet the practitioner's principal reliance must be placed on the increase of his connections and usefulness through their means. The foregoing plan seems to me to be as simple and just as the nature of the circumstances concerned will allow; requiring, indeed, several modifications as to a fixed salary, &c. I am, Sir, yours respectfully.

Corwen, Feb. 8, 1836.

CORVINGE.

MEDICAL ATTENDANCE ON THE

SICK POOR.

To the Editor of THE LANCET.

Sin .- So much has been said in THE LANCET on the mode of procuring medical attendance for the sick poor, and the remuneration of the practitioner, and it has been said so well, that little remains to be usefully offered. However, a few observations on the subject may not be superfluous. At the same time I take the opportunity of congratulating the profession on the prospect of the whole mass of absurdities which constitute the laws for regulating (!) medical practice, being brought before Parliament through the medium of the Editor of THE LANCET.

The medical clauses in the Poor-Law Amendment Act in no respect contemplate an increase in the effectiveness of the medical profession, and the preservation of the health and lives of the poor.

Even if I approved of the mode on which also, would thus have some claim on their medical men are elected as attendants on the sick poor, I could find numerous errors in the details, but this would be useless, as I object in toto to the principle of contractto the letting out of medical services to hire for a specified period of time, at all hazards, "come weal come woe." Moreover, it is not ing to the agreement, and to be paid for honest to either party, as it implies in each extra, accordingly, by the parish. This a feeling of distrust. On these grounds I extra payment will meet the miserly design and my predecessors have at all times reof not placing on the list several who may fused to be parties to all medical contracts, have a just claim to be there. One such and consequently for years have not attended ease would prove the wisdom of placing a any "parishes." Of course also we have declined any participation in the plan under the new Act, which therefore does not in any way affect my interests. I have thus, hably there will be two hundred entitled to too, avoided the numerous disagreeable cirhave a place on the medical list. If these curustances which are so frequently complained of in parish medical competition, mount to 111 13s. 4d.; and if 6d. towards from the cagerness with which medical men bidwifery be added, it would amount to have caught at the depreciating offers of 161. 13s. 4d, which in a country practice is contracting overseers, jostling and jockeying each other in the scramble. Indeed, the present degradation of the profession scems to be self-sought and self-invited.

I do, therefore, on every ground agree

must rely only on themselves and the legislature for redress ginder the numerous evils arising from the freesent anomalous and unjust laws. As for the poor! may God help them. If the Malthusian doctrine be good, commend them to the tender mercies of enlightened commissioners, who confide them to the care of "American" practitioners, zens "catheter," zens "horse," sons everything.

Wire regard to renumeration, I think the following mode would be advantageous. In cases beyond a certain distance (a mile?) a mileage should be charged. For the case itself, whether in town or country, a charge should be made in the ratio of its duration,—a certain sum per day, gradually diminishing after the first three days. Thus for a continued chronic case there would be a smaller rate of pay, and in an acute case of shorter duration, when more time and trouble are bestowed, the rate of remuneration would be symewhat greater.

Under such arrangements the poor might apply to whom they pleased, each practitioner at certain periods giving in (as directed under the new Act) the names of those patients who have been under his care, with an account of the nature and duration of their disorders. I am, Sir, yours obediently.

A COUNTRY PRACTITIONER. Cirencester, Feb. 9, 1836.

POOR-LAW AMENDMENT ACT.

To the Editor of THE LANCET.

SIR, -The following statement will prove the hardship of my case under the Poorlaw Amendment Act. Three years ago I engaged in a practice of sixty years' standing, which comprised the medical attendance on five parishes in my immediate neighbourhood, but which five parishes will not give me sufficient interest to obtain the attendance on the poor in the district, in consequence of the sudden introduction of strange medical men by the Poor-law Commissioners. I shall not be able to retain even the one parish in which I reside. The consequence will be, the entire destruction of my practice, the committal of a dead robbery on my property, with the prospect of starvation to the sufferer. The Guardians, after allowing a certain sum for a certain number of attendants, should, at least, divide that sum amongst the established medical men, allowing them to remain undisturbed. I transmit you my name and address privately, and am, Sir, your obedient servant,

A SUFFOLK PRACTITIONER.

MEDICAL CORONERS.

To the Editor.—Sir, As predictive to be informed of the medical coroners tende the vicinity of the numerous readers of The Lancer, I beg leave to what state the footner for the county of Merioneth, is Enwarm Williams, Esq., of Bala, surgeon. In the next county to this, the county of Deubigh, there is also a medical coroner, R. Nigenda, Esq., surgeon, of Ruthin. Thus I would seem that we are wiser in Wales than they are in England,—two at least of its counties having chosen their coroner from among the members of the medical profession. I am, Sir, your obedient humble servant,

JOHN WILLIAMS.

Corwen, Feb. 8, 1836

Mr. SMITH'S INDENTURES .- To the Editor. Sir,-In answer to an inquiry made in the last number of your journal, by the author of the letter signed "INVESTIGATOR." I hasten to furnish him with a statement of the simple facts. About half an hour before my examination terminated, the Clerk of the Court gave me my indenture of apprenticeship, which I placed by my side, when the examiner who was sitting opposite to me, whose name I have not the pleasure of knowing, took it up and looked at it. The rest of the proceeding has already been made known. Now if this mode of proceeding be irregular, which the author of the letter in question considers it to be, I am only performing a proper duty in stating the facts, in order that a similar proceeding may be prevented in future. You will oblige me by inserting this note in the pages of your very excellent journal. I remain, Sir, your obedient servant, THOMAS SMITH.

1. Jewin-crescent.

To the Editor .- SIR. I beg to state, through the medium of your journal, that I have no knowledge or concern with certain individuals who have taken the liberty to affix my name to a preparation of Sarsayarilla, by printing it on the stamp,-as declared, at least, in certain advertisements. Nor have I, as I find it is asserted, anything to do with sarsaparilla, or any medicinal preparation whatsoever. Permit me also to state that legal measures will immediately be commenced in order to obtain redress for this most unjustifiable freedom, or forgery, as perhaps it might be designated. I am. Sir, most respectfully, your most obedient JUHN HANCOCK. servant, Commercial-road, Feb. 1836.

DERVISOSTREET HOSPITAL, DUBLIN. CLINICA REMARKS* SECONDARY SYPHILIS.

January, 1836 .- Ward No. 8. The case of this individual (Mary Ross) descrees your particular attention. She is, I presume, from her appearance, only seventeen or eighteen years of age. You observe she looks full, and in rude health. She, however, labours under secondary syphilis, and the manner in which she contracted the disease, as well as the form of her symptoms, should be known to you, and impressed upon your memory. First, as to the manner in which she contracted the disease: she affirms, and I am perfeetly convinced of her veracity, from the inquiries and examinations which I have made, that she contracted it from a child which she dry-nursed. Remember I have said dry-nursed. It is generally known that wel narses often contract a disease from suckling infants labouring under symptoms of syphilis; but I do not know that it is generally admitted, that the dry nurse may also, by the contact of such a child, become diseased. This is however the fact; here is a proof of it. Numberless are the analogous cases which I have seen. I have known the disease to be propagated through whole tamilies, yea, through a whole village, by simple contact. In all these cases, it is the matter of secondary sores which propagates the disease. You know that Mr. Hunter and his followers deny that secondary syphilitic sores are infectious or contagions. In this position they are quite mistaken. This is one of the numerous facts which my investigations have unfolded. The second point of attention in this girl's case, is the form of the symptoms. She has condylomata on the pudenda and round the anus, and you may here see that she has a fungoid excrescence on the surface of her tongue-You also remark that the front arches of her soft palate are ulcerated, and that the ulceration is of that superficial form which I have often told you almost uniformly accompanies condylomata. You also see that

Pr. Wallace gives clinical instruction in wo forms, by conversation at the bedside of the patient, during his walk through the hospital, and by lecture in the theatre of the hospital. The former are here called his "CLINICAL REMARKS," and to the latter we have prefixed the title of his "CLINICAL LECTURES. -Ed. L.

she has, scattered over her shoulders and arms, a number of some hat rounded spots, of a red-brown colour, very slightly raised, and scaly, scarcely larger than a split-pea. With these symptoms she had no pains, nor any affection of the fibrous, provial, or osseous systems. She has, in fact, the majority of those symptoms which you will find to occur in all the cases of syphilis which are produced by secondary matter. seen the child from whom she contracted the disease, and went to Fenglis for the purpose, and it labours under the same class of symptoms. I am anticipating by these remarks, gentlemen, some of a most important series of facts which I have discovered respecting the cause of the varieties in the symptoms of syphilis; and which I will very soon take an opportunity of communicating to you in a systematic form. The symptoms of syphilis under which this girl labours, yield with great rapidity to mercury, and are comparatively insensible to the action of the hydriodate of potash, which is, in some other forms of syphilis, a remedy far superior to mercury.

ULCERATED SURFACES.

February, 1836 .- Ward No. 4. See how admirably this man's case is advancing to a cure! Can anything illustrate in a clearer light the value of my mode of treating old ulcerated surfaces? He had lost, from slonghing and ulceration, consequent on an injury, a large portion of the integuments on the inner surface of his thigh; and an extensive ulcer remained, which he could not get healed. He says he had applied to many persons, and had tried in vain all the ordinary applications and methods. When he was admitted, the ulcer was not less than eight inches long and three wide; and the skin surrounding it was very indolent, or callous. You see it is not now more than five inches long, and in some parts scarcely half an inch wide, and the surrounding integuments are much softer and more natural. How has this great improvement been so rapidly produced? You have seen the treatment; he has been kept in bed, the surface of the granulations has been dressed with water-dressing : that is, lint dipped in tepid water has been daily applied to the sore, and then covered by oiled silk; and the skin surrounding the sore has been, to the extent of an inch, several times rubbed with the solid nitrate of silver, previously dipped in water. This application, you see, causes the separation of the cuticle, and a temporary exhalation, or sweating, from the surface of the cutis.

Let me explain to you the principles of this treatment. You will find, if you attend to the subject, that old chronic ulcerations are prevented from healing, much more by a morbid state of the tissues immediately surrounding, and under the diseased sur-

face, than by the stain of the diseased surface itself. Or, pendaps. it would be more correct to say, they they are prevented from healing, not only by the state of the discased surface Melf, but by the state of the surroundingsparts, upon the healthy action of which, me reparation of the ulcerated surfaces mainly depends. In the treatment of suchcases, however, practitioners seldom thinks, the surrounding parts. They apply dressings of various kinds to the surface itself, and seem to think nothing of the parts upon which the surface is placed, unless so far as they act on them by bandaging and by position.

My first object in the treatment of such cases is to leave the surface as much as possible undisturbed,—to let the regenerating The evening before her admission she ha lymph, when effused, remain without interruption; I do not allow the surface to be cleaned in such a way as to cause the slight-est friction. I avoid all stimulating applications, which, although they may be of the mildest kind, too often cause the destruction of the very weak granulating germs, and thus undo daily what nature in her attempts at reparation is endeavouring to the whole face; the left eyelid so puffed a accompuse. To carry my first object into effect there is no mode of dressing to be compared with the water dressing. laid on with great gentleness, and removed only when there is an accumulation of discharge. My second object is to excite and alter the morbid state of the parts, upon which the ulcerated surface is placed, and to this end I without or art on them with the witness of errysipelas has extended ever the loft care the witness of the parts. accomplish. To carry my first object into completely to obstruct her sight; pulse 110 stimulate, or act on, them with the nitrate of erysipelas has extended over the left car to stimulate, or act on, them with the nitrate of the occiput; pulse same as yesterday; howel silver, applied as you have seen it applied by opened by the medicine; great heat of skir Mr. Molloy in this case. By this method, and thirst; the catamenia have reappeared conjoined with an occasional purge, you will Two tablespoonfuls of a mixture, containin succeed in healing old sores, which can be one grain and a half of aconite and fou healed is much less likely to re-ulcerate than one healed in any other manuer. This I would explain by the fact that it is a mode a slight rigor about an hour ago. A mix of treatment which, by causing a healthy ture, containing one grain of the extract of belladonna in sixteen ounces of water, wa action in the surrounding parts, produces a now ordered, of which she took two table sounder cicatrix, and consequently one more spoonfuls every three hours. able to preserve its future integrity under | 6. Redness and swelling are much dimi exertion. You know that this practice nished; she has had a very quiet night differs widely from that of Mr. Higgin- skin covered with a gentle perspiration hotham. He applies the nitrate of silver to complains of no pain, and expresses hersel the surface of this sore, as well as to the as being a great deal better. As the bowel surrounding parts; but I have found this are confined, give a dose of castor oil. The quite unnecessary, and greatly to retard the belladonna mixture to be given every five healing of the sore, as well as to cause un- hours. necessary pain. Let me, however, recom-entirely disappeared; some adema still me mend in the strongest manner to your mains about the orbital regions; the rest t perusal, Mr. Higginbotham's work. It is a the surface is wrinkled, and is desque most valuable contribution to surgery.

NORTH-LONDON HOSPITAL.

REVSIPELAS OF THE HEAD-UNITED EXTRACTS OF ACOMUTE AND BELLADON

CATHERINE COX, ageris, warementer February 4, with crysipelas of the face, un der the care of Mr. LISTON. She is mar ried, and has had four children. She state that she has been subject to attacks of cry sipelas for twelve years past, which hav come on at all seasons, and without observ ing any regular intervals, sometimes a verfew weeks intervening between them, an lasting for a fortnight or three weeks at time, the cures not being completed unde three weeks. She has, however, been quit become very much beated with washing having at the time her catamenia upon her She was attacked with rigors, succeeded by hospital, the following symptoms presented themselves :- Great redness and swelling c

7. Nearly convalescent; the redness ha mating; pulse 96; tongue clean; howel open. Discontinue the medicine. A pint | and gave rational and

of beef-tea caily.

having been under this occasion only four days. aconite has superfeded bleeding in 9. QuPe recor man't cases at this bespital.

DELIRIUM CUM BÉBILITATE -IMMENSE DOSES OF THE MURIATE OF MORPHIA.

Timothy Quill, aged 38, was admitted Dec. 18, under the care of Dr. Elliorson. He is an excavator, a strong and muscular man. He has been much addicted to drinking spirits, particularly rum, and has been considerably exposed to vicissitades of the weather, and to noxious effluvia, such as those arising from common sewers. On his admission he told a story about the origin of his illness six months ago, of its scat in the right side, and at the epigastrium; of his travelling to Ireland for the recovery of his health, and the return of the complaint on resuming his occupation; he complained of thirst, loss of sleep, and tenderness over the abdomen. These circumstances were related with perfect coherence of manner, but they turned out afterwards to be all entirely destitute of foundation. He was very restless during the night, often leaving his bed, putting on his clothes, wishing to go out of the hospital, accusing the other patients of robbing him, complaining of dinmess of sight and spectral appearances, and other mental delusions. A slight tremor, after careful observation, was detected in his fingers and his tongue. He says he has headache, and that he is thirsty. His bowels are confined, tongue clean, appetite very good. Pulse 60, slow and weak.

case of delicion dependent on debility; but over the olecranon; the bandage was therewithout the remarkable diagnostic sign of fore slackened; the man had passed a quiet that disease. He therefore ordered the night, patient, on the day after his admission, to have half a grain of the muriate of morphia directly, to be repeated at bed-time if separating over the triceps; copious effunecessary.

21. Rather more tranquil.

23. Sleeps better at night, but still labours under delusions, and occasionally talks and day; the bandages were removed, and a mutters loudly and incoherently, and is so violent as to require to be pinioned.

24. Is more tranquil and rational to-day. 26. He was extremely violent the whole of yesterday, and to day the irons have again been employed. Muriate of morphia, half a Liston and Dr. Quain, it was decided to grain, every fourth hour.

28. Was extremely violent the whole of test day. The morphia to be given every

three hours.

29. Still violent; the dose of morphia every two hours. 30. The morphia increased to one grain

every two hours.

Jan. 2. Seems much better this morning,

ers to questions put to him.

4. Is rather quieter and ing the day, but becomes delirious, and is very violent every morning, between 3 and 4 A grain every

6. Muriate of morphia of

He was discharged to-day, in c equence of his creating such a noise in the

COMPOUND AND COMMINUTED PRACTURE OF THE OLECRANON .- FRACTURE OF THE THIGH .-- AMPUTATION OF THE ARM.

Charles Hussey, aged 36, a slater, was admitted October 15th, under the care of Mr. Cooper. He had fallen from a ladder, at the height of the third story of a house, in consequence of one of the steps breaking as he was ascending. The femur was broken transversely, at about the junction of the middle with its lower third. There was also a compound comminuted fracture of the olecranon of the left arm. With the point of the finger some fragments of bone could be felt within the wound, and one small piece was so loose, that it was taken out. The extremity of the olecranon was retracted by the triceps. The patient complained of pain in his side and back, where he had received some severe contusions. The thigh was put up with a long splint, in the straight position, and the elbow was extended by means of a splint in front of the joint, the arm having been previously bandaged from the fingers upwards. As a good deal of blood onzed from the wound, the sides of it were not brought together until the next day. A cold evaporating lotion was applied.

16. This morning a considerable swelling Dr. Errioman considered this to be a has extended up the limb, with ecchymosis

18. Not so well, has considerable fever; arm much swollen and discoloured; cuticle sion of serum in the cellular tissue up to the shoulder.

20. Mr. Cooper visited the patient toconsiderable quantity of pus, mixed with blood, allowed to escape from the wound. Mr. C. thought the man would have a better chance of living if the arm were amputated; but after a consultation with Mr. try to save the limb. Fomontations and poultices were ordered, and the arm was left free from all pressure.

30. Since the last report two or three abacesses have formed about the elbow, and been opened. During the last two days he has been exceedingly restless and delirious; his pulse has risen to 136. A grain of the muriate of morphia was given to him, and he was directed to by tept under the influ- erysipelatous swelling which has taken place

ence of that medical From this time the case got gradually worse; the pre-ent was delirious almost every night; he hand was cedematous, and erysipelas attacked the forearm and arm, near as high as the armpit, and matter was inffused under the integuments. The pydar was varying from 130 to 150. As soon, the swelling and redness of the soon, the swelling and request, Mr. upga arm had somewhat abated, Mr. form determined on removing the limb by the following operation:—An external flap was made, by introducing the point of a narrow smallish amputating knife into the centre of the posterior part of the limb until it touched the bone. The handle of the knife was then inclined towards the patient's side, and the point passed closely round the humerus, to the fore part. The external flap was then completed by carrying the knife through the biceps and centre of the front of the limb, and cutting down-wards and outwards. The flap was two inches and a half in length. The internal flap was formed by introducing the knife at late arrival, render it impossible for us to the upper and posterior angle of the wound, examine his statements with sufficient care and passing it round the bone to the front for notice in our present number. angle of the first wound, and cutting downwards. The fibres of the brachialis and the operation the pulse fell to 120.

Nov. 21. An incision was made into an printed "gentleman."

over the pectoral onseles; the inflamed skin had been bathed with the intrate of silver wash.

Dec. The patient went on favour. the stump coming to a an exceller; one, the thigh also having united.

HOUSE OF COMMONS.

Thursday, Feb. 4th .- Mr. WARLEY gave notice that on Tuesday, the lat of March, he should move for leave to bring in a bill to provide a sufficient payment to all legallyqualified medical practitioners who might be called on to attend, in a professional capacity, as witnesses at coroners' inquests. --Morning Chronicle, Feb. 5.

CORNESTONDES

The length of Commeter's reply, and its

triceps were divided, and the bone was ERRATUM.—In the leader at page 753 of sawn through. Mr. Coopen said he was the last number of THE LANCET, the senflap operation; for, having written so much should have been printed thus:—"Not conagainst it, it might be thought he was prejudiced against it, which was not the fact, which was not the fact, which was not the fact, and he would give it a fair trial by resorting admirable behaviour conferred a dignity on to it in all cases in which he could. After the deliberations of that assembly" &c. In a part of our impression the ninth word was

METEOROLOGICAL REPORT.

(Extract from a Meteorological Journal kept at High Wycombe.)

Days.	Thermometer.		Barometer.		Rain.	Wind.	Weather.
	Highest.	Lowest.	Highest.	Lowest.	fus. Dels.		
Feb. 1 2 3 4 5 6	44. 32.50 35.25 36. 34.75 48.50 43.	28.50 31.50 32. 33.75 27.50 35.25 29.	29.04 28.79 29.19 29.86 29.93 29.75 29.66	28.98 28.46 28.71 29.49 29.88 29.72 29.54	0.88125 0.2875 0.08125	N.	Rain and snow frequently on the 2nd, with rain on the Grd and 4th. The remaining days were very fine for the season.

THE LANCET.

Vol. I.]

LONDON, SATURDAY, FEBRUARY 20, 1836.

T1835-36.

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-

By M. ANDRAL,

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine of Paris.

LECTURE XII.

ATROPHY OF THE BRAIN AND SPINAL MARROW.

Gentlemen,—Having finished in our last lecture the study of hypertrophy of the nervous centres, we now proceed to examine the opposite state, or lesion, which consists in a diminution of nutrition,—in an atrophy of the same part. This atrophy of the nervous centres may result either from a primitive arrest or retardation of development, or from an actual diminution in the bulk and volume of some portion of the cerebro-spinal axis, after it has been fully and perfectly formed. Hence flows naturally a distinction of this disease into

Two Principal Species.

The first is congenital, rather an absence of formation than a wasting of the medullary substance when once developed. It has been described by several authors, and particularly by M. Cazauvielle (who has published an excellent memoir on the subject in the Archives Generales, t. 14), under the Jame of Agenesia, cerebral agencsy. The other form of the disease is not congenital; it occurs at a certain period after birth; it does not depend on original absence of the part, but is an acquired disease, produced by causes that we shall presently have occamion to investigate.

No. 651.

General Anatomical Characters.

Atrophy of the nervous centres, gentlemen, whether it be an acquired or a congenital malformation, may present itself to our observation under a great number of forms and degrees, from the slightest diminution in the normal volume, either of the totality or any one portion of the cerebro-spinal axis, up to the complete absence of all those parts together,—of the brain, the medulla oblongata, and its prolongation into the cavity of the vertebral canal. Between these two extreme cases we find an immense number of intermediate degrees, to the principal of which we shall presently recur in detail. No matter what may be the seat or degree of this atrophy of the nervous centres, the disease is recognised by a certain assemblage of anatomical characters, which we now proceed to lay before you. The gray substance enveloping the medullary pulp is more pale than natural. It very frequently retains its normal degree of consistence; but in some cases we find that the nervous substance has acquired an increased degree of density and consistence, at the same time that it has diminished in volume. The brain then appears more solid than usual; it has a harder pulp, and this is particularly the case when the atrophy attacks the convolutions or external layer of the cerebral mass.

The parts immediately surrounding the atrophied portions of the cerebro-spinal axis present sometimes certain lesions that we should not neglect to notice. These may affect either the membranes which envelop the brain and spinal marrow, or the osseous cavities enclosing the central mass of the nervous system.

When the Diminution of the Brain or Spinal Chord is very considerable,

the membranes take on an increased artion, and throw out a quantity of serum in proportion to the loss of substance which the nervous centres have suffered. In these cases we find a large quantity of serous fluid effused into the general cavity of the cranium, or into the ventricles of the brain and between its different convolutions, occupying and filling up the void that has been left by the atrophied beneather in the bones of the cree um. — sometimes the case, present a equal degree of atrophy, the when the skull, we may use the expression, follows the retreat of the brain, and is atrophy that exist in the brain. In some applied cloself on its surface, then the quantity of serry as much less considerable, and the member hes display a degree of activity in harman with the new object which they are cg and on to fulfil. It is not now the time to discuss where this serum is collected, for from what source it is more particu-larly derived. This question would lead us oo far from the subject of our present study; however, we may remark, that it would appear, from the researches which have been made by M. MAGENDIE, and at a still later period by M. le Docteur CAVARA, that it is accumulated in the cellular tissue which is interposed beneath the arachnoid membrane. In some cases the serum is not diffused throughout the surface of the brain, but is collected together in masses, contained of the absent nervous substance.

The Osseous Envelopes,

also present various changes, corresponding with the lesions of the soft parts beneath. and in this case the void left by the atrophied nervous matter is supplied by an effusion of erum, which we spoke of a short time back. When the disproportion between the cranium and the cerebral organ is great, the serum is found in large quantities; in other cases, the deficiency of nervous matter is made up by peculiar changes in the organization of the membranes themselves; the meninges are found much thicker than usual; they are incrusted with a cartilaginous or even an osseous layer, more or less thick, according to the degree of atrophy of the brain.

You may remark the analogy existing between this latter circumstance, and what takes place in other parts of the body. hus, when a portion of the lung has been lestroyed or atrophied, a lesion that frequently exists at the summit, in consequence of abscess, induration, and various other accidents, - when this, I say, occurs, and, at the same time, the thoracic parietes are unable to accommodate themselves to the altered form of the lung, to follow its atrophy by a corresponding degree of contraction, we frequently find osseous or cartilaginous matter thrown out between the ribs and surface of the lung, nature thus endeavouring to fulfil, by a morbid process, an indication which the state of the respective parts rendered impossible by a normal process.

did not present any alteration of form or ous diseases of the membranous envelope, as

of conformation, the different degree atrophy that exist in the brain. In some cases the bones are thicker than an ellormal condition, and yet this increased thickness of the skull is not appreciable on external examination, because the inner table alone is the seat of an increased nutrition. Here we have no default of development in the bones, corresponding with the want of development in the brain; but, in other cases, this is more marked. Thus, in a certain number of examples, the brain is more or less atrophied, and at the same time the osseous parietes sink down, and, as it were, follow the nervous substance in its retreat. The diminution of the cranium now alluded to may be partial or general, when the atrophy of the brain is general and complete; when the want of development in the osseous parietes of the skull is carried in one or more cysts, which supply the place to a very great degree, and is accompanied by a general absence of the brain; in a word, when we find no trace of nervous pulp where the brain should be, the malwhich protect the cerebro-spinal axis, may formation has received the name of anencephaly; this is the highest degree of cerebral atrophy. The volume of the head is Sometimes the osseous parietes are intact; reduced to the smallest dimensions, or, the form of the skull is perfectly normal, rather, no remnant of the cranium exists to show that its development had ever begun. However, we cannot now occupy ourselves with this lesion, which belongs more properly to the history of monstrosities.

In a certain number of cases, where the volume of the brain has been considerably diminished, or even the organ is completely wanting, the cranium, instead of following the diminution of the cerebral matter, retains its ordinary dimensions, or acquires an unusual volume, and becomes developed much beyond the normal standard. Here the bones are hypertrophied; they are more solid, more massive, more thick, than is natural; or, on the contrary, preserving their soft and membranous condition, they yield easily to the distending force of the serum which is shed between the membranes of the brain, and accommodate themselves to the increased bulk of the matters contained within their cavity. In this condition, the brain, and its osseous parietes, frequently attain a great volume, and are designated by the name of

Chronic Hydrocephalus.

We do not mean to assert, in an exclusive manner, that, in all cases of chapping hydrocephalus, the absence of the brain, and the development in the cranial case which accompanies this absence of the nervous mass, is always an effect of some ori-We have now alluded only to cases of ginal malformation in the brain; it may, atrophy in which the parietes of the skull and in fact does, sometimes depend on vari-

inflammation, increased socreting activity, tion of the next cc.; however tome cases, the atrophy of the permits substance, with increased bulk me head, does really depend on an original ower of nutrition.

Finally, in some cases that are not very unfrequent, the membranous parietes which supply the place of a hony envelope, open; the cerebral substance, unsupported by its usuals protecting boundaries, escapes from the cavity, and forms a

Cerebral Hernia

externally; or a membranous pouch fille lungs are absent, and the digestive tube with serum, and bearing more or less resemblance to a cyst, projects through the deficiency in the cranium.

In the lew observations which we have now laid before you, we have not attempted to give anything like a complete history of the different lesions observed in cases of anencephaly, of accephaly, or other malformations of the cerebral mass connected with atrophy. Our object has been merely to touch in a general manner on the relation which exists between these different states, and a default of development in the brain and its osseous parietes. They were also necessary to explain the numerous and considerable lesions which we sometimes observe in the parts, whether membranous or bony, that surround an imperfectly develoned brain. Let us now turn to a consideration of the

Causes of Atrophy of the Nervous Centres.

These are not always the same. Some of them depend upon the non-accomplishment of certain acts or formations that should have taken place during intra-uterine existence.

One of the most beautiful results of the researches which have been made within latter years to determine the mode of forma. tion of animal bodies is the discovery of this curious law, "that most of our organs pass through a series of successive revolutions, each of which represents a normal and permanent organization in inferior animals." The operation of this law is seen in the brain as well as in other organs. Hence at any period when the centre of the nervous system is not yet completely formed, and an arrest of development takes place, implicating either the whole organ or any particular portion of it, we may observe the different types of atrophy which we described a few moments ago, the lesion being more com-Pete as the developmental nisus is arrested a hore early period, and in different parts of the brain at the same time. Here then is the first cause of atrophy of the nervous centres; it consists simply in a modification of nutrition, in an arrest of the "nisus formativus;" but why this arrest should formativus;" but why this arrest should constituted; all the parts exist in a state of take place at one period of fetal life rather perfect integrity. We find the hemispheres, than another; why it should attack one por- the corpora striata, the central parts, such

tion of the next of utres, leaving others that are contemporane vely developed, intact; there are questions but we are unable to resolve. We can only a licate the arrest of development, without only able to mount beyond it. It is worth of remark that in fetures born with my or leave. that in fetures born with m or less atrophy of the nervous centre quently observe at the same tin deficiency of several other organs showing that the lesion of the brain really depended in an arrest of its development; thus the heart is formed in imitation of the batrachia; th presents more or less resemblance to the simple alimentary canal of lower animals. Again, imperfect development of the brain

may depend on various maladies of the membranes which envelop the nervous substance, and by which, according to some physiologists, the nervous pulp itself is accreted. We can understand readily how this may take place, by supposing that the membranes draw towards themselves an unusual share of nutrition, or by a too great activity of secretion prevent the development of the more solid parts. This latter is a powerful cause of arrest of development in several organs contained in the cavities of the chest and abdomen, and may certainly operate also in modifying the nutrition of the cerebral mass. When the absence of a normal degree of development depends upon some disease of th (brain, or on inflammation of the pia mater, or irri-tation of the collular tissue that every where supports the pulp, the brain may present a general change of form rather than an absence of any considerable portion of its substance. Thus in the latter set of cases alinded to, where the cavity of the cranium contains an unusual quantity of serous secretion, all the different parts, whose ensemble constitute the cerebral hemispheres, have been found to exist. The hemispheres are as it were unfolded; the convolutions are separated from one another and spread out into a vast layer of medullary tissue, resembling a membrane, but on close examination, we find that the nervous substance remains intact in the midst of changes apparently so profound. There is a modification of form only ; but no actual diminution, no atrophy of the mass. This has been frequently seen by Dr. CHASSAIG-NAC, who has paid particular attention to the changes that take place in the arrangement of the nervous substance during the progress of chronic hydrocephalus.

There is another Species of Atrophy

of the nervous centres which we must not neglect to mention. Here the brain is very small, very small indeed, but it is normally

mation e a single part

Wenave now touched upon a great order of sauses which produce atrophy of the ebral hemispheres, viz.. disease or irritaon of the membranes, and we are the more induced to admit the operation of this cause when we reflect that in a great number of cases the meninges are injected, thickened, contain abnormal deposits, and present more or less trace of antecedent disease.

Cerebral Atrophy from Accidental Productions in the Brain.

Certain atrophies of the nervous centres depend on a different order of causes. Thus suppose a tumour developed in the anterior of the skull: this must necessarily exercise a greater or less degree of mechanical compression; and the convolutions thus pressed upon, are sometimes completely removed, or at least reduced in bulk and volume. In other cases these accidental productions, instead of acting in a mechanical manner, seem to occasion atrophy of the cerebral substance by exciting a certain degree of irritation in the parts with which they are in contact. Hyperemia is the first result, and when once the nutritive nisus is deranged, a state of atrophy may succeed this deviation of nutrition, as well as a state of hypertrophy. This is a curious fact, though a certain one, that irritation gives rise to diminution of volume in the part which is the seat of ex-We have had occasion to obcitement. serve a remarkable case of this latter kind in the person of a man twenty eight years of age; who at the age of three fell on his head into the street from a first-story window. The accident was soon followed by paralysis on the left side of the body. The intellectual and other faculties, however, remained intact. This individual died of an inflammatory affection of the abdomen, and on examining the body after death we found that all the middle portions of both hemispheres situated above the lateral ventricles were completely gone; nothing remained of these parts except a vast cavity filled with limpid scrum. Here the lesion supervened on external violence giving rise at the commencement to irritation, probably inflammation of the membranes, and subsequently to extensive atrophy of the hemispheres.

Finally, various diseases of the brain may determine an atrophy of the nervous sub-

which surrounds an applectic cell may in all the componers portions of the brain, are found, but they tist as it were in miniature. The organ has tuffered from a general arrest of development, acting equally upon all parts, and string rise to an excessive smallness of the whole mass, without any matter. found much diminished in volume, and transformed into a species of serous cavity.

> We have now exposed at some length the anatomical characters of atrophy of the nervous centres. We have laid before you a history of the lesions observed in the osseous parietes, and in the membranes enclosing the brain. It remains for us only to add, that in some cases we are unable to discover any cause which has given rise to the diminution of volume in the brain. Here we may be permitted to ask, Is the default of nutrition connected with a want of due exercise of the intellectual faculties? muscle condemned to constant inaction wastes away. May it not be the same for the organs of intelligence? This is not improbable.

> The lesion which we have designated under the term "atrophy," does not present itself with the same frequency in all parts of the nervous centres. It becomes more rare as we pass from above downwards, from the surface of the brain to the more deep-seated parts; and it may be established as a general rule that it exists less frequently in those parts of the cerebrospinal axis which are first developed, than in the portions which arrive more slowly at their perfect degree of organization. Thus atrophy of the spinal marrow is more rare than atrophy of the brain, and, again, in the cavity of the cranium, the deep-seated parts, which are first formed, are less frequently

> which they have been specially observed. We shall follow their order of frequency, and trace their history, in the cerebral hemispheres; in the deep-seated parts; in the annular protuberance (pons); in the cerebellum; and, finally, in the spinal marrow. And first for

the seat of this lesion than the convolutions.

We now propose to pass in review the vari-

ous degrees of atrophy of the nervous cen-

tres according to the different points in

The Anatomy of Atrophy of the Cerebrum.

Here the lesion may present a great numher of degrees, from a slight diminution of the normal volume, to the complete disappearance of the organ Let us commercie with the most severe cases. A certain A ber of examples have been recorded" which the whole mass of the cerebrum was entirely wanting: there was no brain whatever: and in these cases it is at the stance immediately surrounding the affected same time proved that extra-uterine expart of the organ. Thus some observations istence is impossible; or at most possible seem to establish that the part of the brain only for a few short days. The unfortu-

nate beings subject to this degree of mallone or both hemis formation, seem made to live only in their here also the indimother's womb and as the arc remoted pendent castlence, incanable by their organization, of thinking these two cases from any single act of arimal life, so they are incapable or an independent existence, and after a few hours of vegetation lay aside life, which is incompatible with the absence of so large a portion of the nervous centres. This is the highest degree of atrophy of the brain. In place of that organ we find nothing but a slight trace of medullary lamellæ, which afterwards form the brain in a normal condition; or the nervous substance is supplied by a secretion of serous fluid, or by a mass of vasculo-cellular tissue, the rudiment of that membrane which is destined to surround and support the different parts of the interior of the brain. We have already spoken of the condition of the bones in this state; sometimes they are flattened down upon the base of the cranium; sometimes we do not find any trace of conformation of a skull; the parietes are membranous, and contain here and there irregular spots of ossification.

In other cases, as we have already mentioned, the destruction or absence of the cerebral mass is not indicated by any external symptoms. Thus BECLARD has cited the case of a child who lived five days; the ccanium was well formed, but it contained no brain; the whole of the cerebrum and cercbellam was absent, and their place supplied by a great quantity of serous fluid contained in the membranes; the spinal marrow however was not absent; this portion of the cerebro-spinal axis had attained its normal degree of development, and terminated superiorly in two bodies corresponding with the cerebral peduncles (crura cerebri), each of which again terminated in a kind of renflement, or swelling of the nervons substance; two small chords were observed detached from these bulbs, which ran forwards towards the ethnioid bone, became engaged in the groove of the ethmoidal plate, and, finally, terminated in an oblong swelling, exactly analogous to the balb of the olfactory nerves: here an arrest of development produced in man a disposition of the brain peculiar to certain animals, which, you know, are furnished with olfactory lobes placed in front of the cerebral ones, and destined solely for the production of a single pair of nerves, the olfactory.

The history of the symptoms connected with this form of cerebral atrophy is not one; indeed, it is unnecessary to enter on it. We have seen that this child is, from the instant of birth, condemned to a premature grave; it may enjoy an imperfect life for a few short days, but death is an inevitable consequence of this malformation.

Next, to complete absence of the whole atrophied. Here we have to consider the cerebral mass, we may arrange cases where lesion as it may occur in the anterior lobe,

one or both hemist eres are wanting, and here also the indicated is incapable of independent "Amelies. We must distinguish these two cases from these where, in consequence of imperfect development of the superior masses of the hemist eres, we might be led to imagine that the thain was wanting altogether. In the form an owallude to, there is an absence only to the parts which are situated above the full of the ventricles; when the malformations a trophy is thus confined, when the impirant parts comprised in the cerebral mass phicod beneath the level of the lateral ventricles are sufficiently developed, then a great faccomes to light—viz., the possibility of extrauterine existence. In

Alrophy of the Nervous Substance placed above the Level of the Lateral Ventricles,

we may observe two degrees. the atrophy exists at one side of the brain alone; in the second, it has implicated both hemispheres at the same time. Sometimes the whole of this superior portion of the brain is replaced by a membranous bag containing serous fluid; at others, the lateral ventricles are laid bare, and without any dissection we see the thalami corpora striata &c. This case, as we have already observed, does not necessarily compromise life; the individual may continue to live for several years, but all his faculties and senses are obtuse. many of them annihilated, and he lives in a state of vegetation rather than of humanity. When the absence of the substance is less considerable, and confined to one side of the brain, life, as you may conceive, is carried on more, much more, perfectly. This degree of atrophy has often been observed in persons arrived at an adult age. It is compatible with a perfect integrity of organic life, but the intellect is generally obtuse, dull, or idiotic. However, cases of an opposite kind have been seen, and it is remarkable to observe how the intellect may sometimes be conserved with a very great absence of the substance of the brain. M. BRESCHET has published a curious case relative to a child, four years old, where the intellectual faculties were much altered; the infant was plunged in a complete state of idiocy; but what we notice this fact for is to point out the occurrence of mutism. The child was dumb, although not deaf. In all the other cases observed, we do not find mention made of a similar phenomenon. Again, in a great majority of cases we have hemiplegia: the power of motion is lost in one side of the body, although the nervous mass lying below the level of the lateral ventricles exists in a perfect state of integrity.

We now pass to an examination of those more severe cases where the substance of the brain below the ventricles is more or less atrophed. Here we have to consider the leasion as it may occur in the anterior lobe.

in the middle, or in the esterior lobe. We much the more are we convinced of this in the middle, or in the seteror lobe. We may remark that the sperior lobes are wanting more frequently than eather of the two others, and his atrophy may affect either one of the anterior lobes alone or both together. When both anterior lobes are absent of their we generally find the cranium decrement at the same time it is flattened on in the forward part, and the foreshore the same less some Howards. flattened in in the forward part, and the foreless in more or less gone. However, some isses of the kind we now speak of, may kits with an excellent conformation of orehead. Here the cerebral mass which is secreting is supplied by a quantity of serous offusion, or by membranous cysts filled with a clear fluid. What are the symptoms that accompany this

Absence of the Anterior Cerebral Lobes?

How are the great functions affected? Is the intelligence modified? How far? What lesions of motility does it produce? These are questions that we must now cndeavour to resolve.

The intellectual faculties are generally modified in a considerable manner, or sometimes completely abolished. Thus M. BRES-CHET has recorded a case in the Repertoire d'Anatomie, of a girl, 15 years of age, in whom both anterior lobes of the brain were supplied by a membranous cyst, at the bottoin of, and behind which, the corpora striata were seen distinctly exposed. This child was a complete idiot; she could not clothe herself, required to be fed, and remained constantly in the same position without taking any notice of what passed around her. What symptoms do we observe in connection with movement? In some cases motility does not undergo any modification, although both the anterior lobes of the cerebrum are simultaneously wanting. This took place for example in the person of the idiot child just mentioned: her listlessness and constant rest did not depend on paralysis or feebleness of the muscular power, but on an absence of volition. The same phenomenon, viz., absence of paralysis may also be seen in two other cases published by M. BRESCHET: in other cases we observe nothing but a general feebleness of the limbs, and this gradually increases until the patient at length falls into a state of paralysis, being unable to move either his upper or lower extremities.

In one of M. BRESCHET'S cases there was an abolition of vision. The child, nineteen months old, was perfectly blind, yet we cannot see any connection between the anterior lobes of the brain and the faculty of vision. We cannot understand why an absence of these parts should bring with it complete cecity. The truth is, the more we see of diseases of the nervous system, the further we advance in the study of their history, the more knowledge we attain upon the complex point of medical science, and so shall, therefore, content ourselves with sim-

fact, that the different acts of the brain are connected to wher as interactly and as closely as are its different analogued parts by a continuity of organization; and so in. the more do we feel the secessity of studying in the nervous system, mst, as detailed acts, and secondly, its action of ensemble.

In another case of absence of the anterior lobes, we find loss of the sense of smelling : this phenomenon is readily explained, and need not arrest our attention. The olfactory nerves are attached to the anterior lobes. When the latter are wanting, it is quite natural to find an absence of the power of smelling. Now for the cases

Where only One Anterior Lobe is Absent,

the other presenting its normal degree of development. Here the brain does not seem to have any great influence on the intelligence; it is ordinarily developed in a moderate degree. The individuals, though not, perhaps, remarkable for talent &c., possess a common share of judgment, good sense, and knowledge of society. In some cases, however, the intellectual faculties are modified; the individual is far from being an idiot, but his mental power is evidently diminished; the intelligence is dull, slow, weaker than natural. In most of these cases of atrophy of a single lobe, we observe bemiplegia, and we draw the same deduction for these that we have done for cerebral hemorrhage, viz., that the paralysis almost constantly occupies the side of the hody opposite the injured hemisphere. In one case, which is recorded in the fifth volume of our Clinique, p. 620, the patient, a man, seventyone years of age, in addition to complete paralysis of the left side of the body, was affected with an extraordinary difficulty of speaking, or rather of articulating; he could only mutter a few unintelligible sounds. After death we found the anterior quarter of the left hemisphere replaced by a transparent cyst, containing a limpid serosity. This, you may remark, is in accordance with the observations of M. Boull LAUD, who attributes the power of co-ordinating language to the anterior lobes of the cerebrum. Examples of atrophy, or even of complete

Absence, of the Middle Lube,

below the ventricles, have also been observed. These cases were accompanied, like the former, with hemiplegia of the opposite side, and the intelligence presented the same modifications as those which we have just mentioned. The same remark applies atrophy of

The Poeterior Cerebral Lobe.

The symptoms do not differ in any point worth noticing from the former cases; we

ply mentioning the fact. In one case we and the patient observed an absence of the middle and nos- lesion of moveterior lobes of nemispirat the same time. ecurred in the erson of a man enty-eight years of age, whose case we lave already spoker of at the commencenent of the secture. The middle and poscrior lobes on the right side were comdetely gone; nothing remained but the nembranes floating in a clear liquid, and a portion of the anterior lobe situate in front if the corpus striatum. Here was absence if a very considerable portion of the cereral substance: yet, notwithstanding, the ndividual enjoyed a common share of inteligence; his memory was good; he spoke reely and easily. Up to the day of his leath he never presented any symptoms of lisorder of the mental faculties.

You are all acquainted with the position and form of a cavity which anatomists have alled the

Posterior Horn of the Ventricles.

Dr. HASTINGS has described two cases of trophy of this portion of the hemispheres: on will find them detailed in the 59th voume of the Bibliotheque Medicale. Cuvier ad established, that this posterior horn of he lateral ventricles is very much developd in the brain of man, while it is much maller, and sometimes quite a rudiment, in nferior animals. We are totally unacquaintd with the part it plays in the manifestation f such or such faculty; we shall only retark, as connected with Cuvian's obseration, that in the two cases alluded to, there xisted a lesion of the grand characteristic which distinguishes man from animals,-inelligence.

In all the cases of cerebral atrophy which we have hitherto passed in review, certain sarts of the hemispheres were absent; there was a real loss of substance: the hrain did not present the ensemble of all those parts chich constitute it in the normal state. But trophy may present itself under another oint of view. Here we do not find an accural absence of any part of the brain; there is a general

Diminution in the number of the Molecules of the Brain.

The brain is well formed, but much smaller han in the normal state. This diminution of volume, affecting the cerebral substance for volume, a free time to composite to that form the osseous parietes one, a single one, a portion of a lobe, or exist on both atter kind, published by Dr. Calmell, is, or haps, the most remarkable we have on ecord. (See Journal Hebdomadaire de Médeise, t. 1, p. 225.) All the parts composing the cerebral hemispheres were imperfectly leveloped, and equally so on both sides, site side of the body.

s epileptic. No other r intelligence existed. The interior of the lingence existen.

In it a fact worthy of your attention; it cannot fail recalling to aur minds what we said in an early part of oil course, where we showed that a variety of less us often coexist with the same symptom, with the nervous system is in question. Thus it aur last lecture we noticed a case of epilepsy, belued by induration of the cerebral substant. Here self as a consequence of atrophy; the organic lesions differ widely from one anoner; the functional symptom to which they g rise is the same. The form of atrophy of which we speak, may be circumscribed by a few convolutions; in that case we often find them hard and compact, and wrinkled on the surface like a cicatrix. Instead of the convolutions, the atrophy may occupy the more deep-scated parts, viz., the optic thalami, and the corpora striata. These two elevations may be either simply diminished in volume, without any change of structure, or the atrophy may engage more particularly the gray or the white substance which enters into their composition. In some cases we find not a diminution, but a complete

NTRES.

Absence of the Thalami and Corpora Striata.

They are replaced by a serons cyst, or we may simply observe their absence without finding anything in their place. When these bodies are simply diminished in volume, the hemispheres may or may not be wanting; but when the thalami and striated bodies are absent, we constantly find at the same time an absence of all the nervous substance placed above them. We find nothing but a membranous tissue, and a few scattered filaments. The brain represents the condition in which it existed at a very early period of fetal life; it represents the normal type of the cerebellum in a certain class of organized beings.

Atrophy of these parts, whether general or occupying only one side of the brain, has been observed at all

Periods of Life,

from infancy to the most advanced old age. Sometimes the cranium is depressed upon the portion of the brain seated beneath the absent parts. Here the lesion is discoverable during life, and we have a state exactly opposite to that form of hypertrophy where the osseous parietes seem to be pushed forwards by the development of the brain.

The different modifications of intelligence that we have already pointed out, have existed in individuals affected with atrophy of the thalami and corpora striata, and whenever the diminution of volume has been at all extensive, we have paralysis of the opposite side of the body.

The White are called they of status of the brain, as the various examples of atrophy. They may be diminished in youne or be absent, without any lesion of the rest of the hemispheres. In a few atrophy of the septum lucidum have in observed. In others the want of dever ment affects more particularly the corp 2 callosum, and this mass of cerebral me ker is reduced to the form of a fine memrane. Reit has left us a remarkable exfample of this latter kind, in the person of an idiot, thirty years of age, in whom the corpus callosum was completely gone, and the two hemispheres of the brain merely united by the anterior and posterior commissures. This is another example where an arrest of development in man gives rise to a form of structure that is peculiar to animals. Thus, in birds and reptiles neither the sentum lucidum nor the corpus callosum normally exists. You will also find some curious cases of atrophy of the central parts, detailed in the thesis of M. BOULANGER, No. 195, for the year 1821. In two of these cases there was complete absence of the corpus callosum, and in one the septum lucidum slso did not exist. The patients were both idiotic, and one was unable to walk, or sustain herself on her limbs.

Atrophy of the Pineal_Gland.

Before we conclude, let us say a word on atrophy of another part, whose use is not vet established, although it exists constantly in the four classes of vertebrated animals. The pineal gland presents a great number of variations in volume : in some cases it is excessively small, not larger than a grain of millet-secd. In others it is so far reduced, that we may in effect consider it as wanting. These varieties in the bulk of the pineal gland do not bring with them necessarily any modification of development in the other parts of the brain, and we are not aware that they are attended with any appreciable symptom. Some writers, indeed, have attempted to connect atrophy of the pincal gland with a diminution of the intellectual faculty, but this is a theory unsupported by a single fact, a supposition in which we can place no belief whatever. We the tube. The next day you find the instru-shall continue this subject in our next ment still looser, and the discharge more lecture.

esterior lobe. We much the more are we convinced of this serior lobes are fact, that the different acts of the brain are tely and as

CLINICA ECTURES ON CARRS OF

DISBASE OF THE URINARY ORGANS. Delivered in the Session of 1836.

BY MR. LISTON.

LECTURE II. (Concluded.)

Catheterism in Cases of Stricture.

Now I would have you follow, in these cases of bad stricture, the practice I have detailed, such practice as, in fact, we have pursued in the several cases I have brought in review before you. You should try to get an instrument into the bladder. It is all the same whether it be large or small. Tie it in; and it is better to begin with a metal catheter, such as this, at once, than to be poking away with these wax catheters, clastic bougies, and bits of fiddle-string. What can you expect by trying to put such a thing as that (it is called a catgut bougie, I think) into the bladder? It is better to work with an instrument with which you are sure to succeed. You are recommended by Sir Benjamin Brodie, a great authority in these matters, in this book of his, to try first all sorts of things, guin catheters, catgut bougles, et cetera; then you are to bend your bougle after this, that, and the other fashions, and if you fail not withstanding, you are at last to have recourse to the silver catheter. Why, the mischief, should you not take the silver catheter at once and pass it into the bladder?

Well, you introduce the catheter, and how does it act? Why, in the first place it is grasped and held firmly by the stricture, so that the patient or the surgeon would find very great difficulty in withdrawing it. But after a little time the parts become impatient at the presence of this foreign body. and a natural process is set up for its discharge. It is exactly the same process as that which takes place to favour the escape or ejection of a foreign body lodged in any part of the living tissues. There is a pro-fuse discharge from the surface of the urethra, and the parts all become widen and relaxed; and unless the catheter war tied in properly, it would tumble out in the course of twenty-four hours, part of t water comes to be discharged by the side of profuse. You then cut the tapes with which the catheter is tied, and can pass a larger one without any difficulty. Then allow the

THE KNIFE.

ply mentioning the fact. In one case we and the patient observed an absence of the middle and postlesion of moyas at all this while I canterior lobes and mention to see that commencement of the practice. After a time age is right, and then make the instrument ment into the bladder, and after that, in the instrument into the bladder, and after that, in much longer. Be set the end of four or five days, and thut proceed until you they went on passing instrument severy day, have brought the canal to its natural state. I would not have you retain these catheters longer than forty-eight hours, or three fering to the patient, and as not exceed a spreaduring great inconvenient and suffers at all events, otherwise a great deal way to restore the parts to their attural of mischief will arise. You find, if it is kent state—certainly not the way to restore the parts to their attural days at all events, otherwise a great deal of mischief will arise. You find, if it is kept in very long, that the further end of it, the eyes, become coated over with earthy matter, and, in withdrawing it, portions of that earthy matter have sometimes been separated, and a nucleus for a calculus has been formed in the bladder. Another mischief which I have seen to result occasionally, is the formation of abscess in the canal, and, frequently, anteriorly to the scrotum. A false passage is the consequence, and it is very difficult to get an opening in this part of the canal to heal up. It has been proposed in what are termed "impassable strictures." - but there are no strictures impassable, that I have seen, for when any water comes away, you can, by patience and perseverance, get a catheter through, sooner or later,-it has been proposed to introduce either an clastic gum catheter, as recommended by DUPUYTREN, or a silver catheter, down to the stricture, and to keep it pressed against it, in contact with the obstacle; and it is said that in general, after a little time, the catheter will slip of itself into the bladder. I have seen this tried, but I cannot say that I ever however, already stated, and proved by witnessed any good result from it. I should think, that if a catheter will slip through in this sort of way, the surgeon would be able without much difficulty to introduce it. Here are two of the last works on this subject, one by a St. George's Hospital, the other by a Westminster Hospital surgeon. I have derived from them a great deal of satisfaction. There is a case related in the work of the latter gentleman which has amused me not a little. The method of securing the catheter is detailed, but I would recommend you to follow the mode you see adopted in this hospital, merely fastening a tape to each of the rings of the catheter, bringing them under the thighs, and then tying them to a handkerchief round the waist. There is no necessity for bandaging up the penis, and putting rings on it, and tring it up in lint and bobbin, as is someinstrument, a gum clastic catheter, was pur down to, and kept in contact with, the stricture. The patient was kept very quiet, and "the catheter kept going a little further in," for eighteen days, without its being passed through the stricture, though all openings in the perincum. As there was no that time the patient was making water by possibility of passing an instrument, how-the side of the instrument. What it was ever small, it became necessary to make an

state,-certainly not the way to tranquitize them ; although Sir EVERARD HOME, al the four hundred and eighty-nine applica tions of his caustics, thought it necessary that the patient should have a bougie put in to keep the parts quiet and tranquil.

Cases of Stricture requiring the Employment of the Knife.

Now, sometimes you will not succeed in passing a catheter into the bladder, and you cannot expect to succeed where the passage is completely closed. Cases of that kind are now and then met with,-cases resulting from injury, or from violent inflammatory action, followed by the formation of matter, loss of substance, sloughing, and so on, in the perineum. In such cases it may be necessary to cut down into the passage, and to carry the knife forwards into the stricture, until you meet with the catheter passed down the sound part of the canal from before. This can only be required where the water flows through fistulous tracts, and none whatever is passed through the natural canal for a considerable time. I have, cases, that you may sometimes succeed in introducing a catheter when no water has passed for some time. I succeeded in one case where the patient had made no water by the urethra for fifteen months; but where the passage is completely obliterated, where it is closed, and closed from violent inflammatory action, (the result, say, of injury,) while the cellular tissue all around is glued up, and there is, perhaps, an extensive deposit and organization of new matter,-in such case you must resort to cutting instruments. I have been obliged to have recourse to these operations in a few cases. One was that of a boy, about fifteen years of age, who had had his urethra cut across. He was engaged in the Carron foundry, and being about some mischief or other, was pursued by one of the workmen, when he jumped out of a window, and alighted on a bar of iron, which stood upright in the ground, in consequence of which he received a wound of the perineum, and had the urethra, it would appear, cut clean across. He was brought to me a long time afterwards, passing his water entirely through incision into the rauk so as to expose the to lodge the inst .ment .. for a time. I h a occasion to pursue this plan, also, in ' e case of a very dreadful stricture, foll ed by abscess of the perineum,-a s' cture resulting from a bruise of the pr neum, in consequence of the .ng from a great height on a man a beam ood many years previously. All s to reach the bladder failed; the atter wa' r was passed with difficulty, and with great straining, altogether, as it has been or many months, through various openings in the perineum. The urine was mixed with muco-purulent stuff. There was resson to suspect disease of the kidneys, in addition to the abnormal state of the bladder and its outlet. Under these circumstances, incision was resorted to for the re-establishment of the passage. In another patient, also, who positively declared he had not made any water through his urethra for about fifteen years, incision was had recourse to. He had been under treatment for stricture, had come to this city, and had had a caustic bougie introduced, rather roughly he thought (by no means an unfrequent source of complaint). This was followed by profuse hemorrhage. On riding down to Woolwich immediately thereafter, his horse shved, and in addition to the injury inflicted by the surgeon inside of the passage, he got a severe bruise outwardly by striking his perineum on the pommel of the saddle. In consequence of these injuries, abscess and sloughing took place, and, in the end, the whole of the water was passed through the openings in the perineum I have mentioned. I am astonished that he should have submitted to this so long, for he was in the prime of life. I should think that he was not much over fifty years of age when he applied to me. When I first saw him, he passed his water through the perineal openings with difficulty, frequently, in small quantities. It was mixed with much ropy mucus, furnished by the thickened congested lining membrane of the bladder, no The bladder must have been very much diminished in capacity, the muscular coat being also thickened. He had great and frequent straining to make water. It was necessary to enlarge this artificial opening, the patient being secured in the position for lithotomy. I passed a catheter down into the perineum, near to the sinus of the urethra; not quite so far, but about four inches down; and on making an incision into the perineum, I cut forwards upon the point of the catheter, and readily carried it on to the bladder; the result was, that the whole of his water came through the natural passage, and he enjoyed himself after a short time, I suppose, just as much as he did before his mishap.

Now in making these incisions, you are not or other cause, the urine is extravasated,

- 4 6114 114 great difficunt in catching the of the canal. It on cut upon an in able stricture, you . w that the canal is greatly enlarged behind; , ou cut in the middle line, from near the apex of the prostate, the finger being placed in the bowel as a guide, directing the point of your knife upwards and forwards, you must hit the passage, and you are not interfered with by vessels. There is no hemorrhage; very little, at any rate. You can make an extensive incision, from the verge of the anus, into the perineum, and there is no difficulty in cutting into the anterior part of the passage. It is only in those cases where no water comes through the passage at all that you are warranted in cutting down, for, in general, by proper study of the parts, and by considering well the nature of the disease, and practising on all occasions the introduction of the silver catheter, you will attain such dexterity in its use, that you will have small difficulty, in almost every instance, whatever the case may be, in getting an instrument into the bladder.

Rupture of the Bladder from Retention.

In retention of urine there are very considerable peculiarities as regards the state of the bladder and the state of the urethra. In strictures the bladder is generally diminished in capacity, as I have before said. It contains but a very small quantity of urine; it can bear distention to a very slight extent, without occasioning unpleasant or uneasy feelings, and without great risk occurring if the viscus be not relieved; but this is not the case in all instances of retention. In some, the bladder is capable of containing two or three pints of water, and it rises up into the cavity of the abdomen exactly as the gravid uterus does, forming a large oval tumour in the "lower part of the stomach, as the ladies and their doctors call it. The belly is swelled, if I may use that phrase. There is a large oval swelling in the lower part of the abdomen. Now in some of those cases there is a much greater chance of the parts giving way, and an infiltration of urine taking place into the cellular tissue, than there is in others. In retention from stricture, more especially where an abscess has been in progress beforehand, there is a greater chance of the cavity of the abscess communicating with the urethra, the parietes of the urethra bursting, and the urine escaping into the cellular tissue, than of the urethr behind the stricture yielding. The ri k in such cases is very great indeed, but the risk of infiltration from retention of urine is greater. In retention from obstruction at the nock of the bladder, from enlargement of the prostate gland, impactment of stone.

ply mentioning the fact. In one case we and the patient observed an absence of the middle and post-lesion of moyar to instrument in, you terior lobes of moyar to the patient of the patie danger is great, yet recoveries often are made, even after the loss of much integument and cellular tissue, the covering of the testicles &c. In cases of

Retention from Injury of the Perineum,

you will in the first instance endeavour to pass an instrument into the bladder, so as to empty it for a time, until the parts have recovered in some measure from the effects of the injury. At a later period, when there is great swelling and some effusion of blood, more especially if the patient have strained to make water, you will have to make a free incision into the perineum, in order to allow the escape of the blood and water, mixed up together. At the same time it is sometimes though rarely necessary to pass an instrument through the lacerated urethra into the bladder. You may in some of these cases be under the necessity of puncturing the bladder. This has been called one of the regular operations of surgery, but it is such an operation as you will very seldom see performed here. Where there is no previous contraction, but where the retention arises from inflammation of the parts, you will be able to relieve the patient, without the employment of instruments at all, by warmbaths, and the exhibition of opium, with the addition of an opiate suppository. If the patient be not thus relieved, you must at all risks introduce a catheter into the bladder, and if there have been no previous contraction, there should be no difficulty in effecting your object. Again, in

Retention from Stricture,

which is the most difficult to manage of ali, there is no faith to be put in opium, the tincture of muriated iron, or anything of that kind. There is then no time to be lost. Have recourse to the catheter at once. parts are altered, and there is very great probability of the arethra suddenly giving way, not bursting, as people say in books, but sloughing, and of entravasation of urine loaded with saline matter, taking place into the cellular tissue. It is not very comoon for patients to recover from this, though frequence the catheter and retain it, because you may find a difficulty, if you withdraw the catheter, in getting it replaced, for the patient may be subject again to retention, so that you will be under the necessity of introducing and re-introducing the catheter; but if you do away with the chance sach. It is time enough to pass the cathe-

pened to come to the hospital at the time, and found that the house surgeon been been foiled in passing the catheter. The passing it is here stated, had been affected by goingrhœa three years previous to this attack and he had never been altogether free from discharge. He more than once had laboured under retention, from which he was easily relieved. However, the stricture had been getting worse and worse, and on this occasion, before his admission, his surgeon had attempted to pass an instrument, without success, and he then sent him here. He had passed no water for twenty-four hours; he had pain and tenderness in the perincum. very likely increased by the attempts which had been made to overcome the stricture. He had been put into the hot-bath, and long and continued attempts had been made to pass the catheter after he had come out of it, but without success. A false passage, it is said in this report, was discovered. He had forty drops of the muriate of morphia given to him, and the following is the report of the house surgeon :- "On Mr. Liston's coming into the hospital, he was asked to introduce the instrument, and by dint of considerable force,"-that I deny,-" and dexterity, he succeeded in passing the ca-I did not use what may be called theter." " force," though I dare say some little dexterity was required, and after the point of the instrument was lodged in the stricture, which you know by its being held firmly, steady pressure was perseveringly employed. The catheter being passed into the bladder, that viscus was emptied. The instrument was quite loose in two days. On the 6th, two days after it had been introduced, it was withdrawn, and he then made water with but little smarting. On the 14th he was discharged quite cured.

Now when abscess forms in the perineum, more especially

When Extravasation of Urine takes place,

you are called upon immediately to make a free opening into the perineum. Make an opening directly into the collection of matter and urine. As soon as this is done, the necessity for passing an instrument into the bladder has ceased, because the bladder empties itself into the perincum, and the water comes freely through the opening. Besides, if the urine be infiltrated into the cellular tissue of the scrotum or penis, you must make many good free punctures, of about half an inch in length ter into the bladder has gone off, after

and the sloughs 1 , we come away.

I have said, 'ast in almost every case it is possible t' succeed in introducing the catheter; h it may happen that you are not able to o so. You may then be under the nece ... y, as a last resource, of

· Puncturing the Bladder.

I ' ve already stated, that you will seld m see this operation performed here. I ave had a pretty extensive practice in these cases both in public and in private, but I have never punctured the bladder yet, and I hope I never shall. You will find the same opinion entertained by other surgeons. Mr. THOMAS BLIZARD, under whom I studied, and no man could be more dexterous in the use of instruments, was decidedly of this opinion. You will find it stated in Dr-SAULT'S works, that he once punctured the bladder, but that was when he had had no great experience in these matters, and when he first took charge of the Hotel Dieu; and he expresses his conviction, that if the case had occurred later in his practice, he should have succeeded with the catheter. But if you cannot manage to give succour by the catheter, why then you must puncture the bladder. You must relieve the patient from his sufferings at all hazards, and it He was in the habit of driving out parties would be better to puncture in all the three places at once-above the pubis, in the perineum, and through the rectum—than to allow the patient to suffer from extravasation and destruction of the cellular tissue.

There is only one other species of retention of urine, and that is, from disease at the muscular apparatus of the bladder-from

Enlargement of the Prostate.

in relieving the patient by the employment gan was in an excited state, and I should of a proper instrument-by a long catheter, such as this,—one at least four or five inches vanced in life—if he had been straining longer than those usually employed, the himself, or over-exerting himself in some curve being large and the heak long. There is no use in poking away with shorter catheters, because you cannot by any possibility reach the bladder with them. The urethra is elongated by the enlargement, by the hypertrophied state of the gland; the prostatic portion of the urcthra is immensely lengthened; and, besides that, the tempt was made to pass a catheter, as I bladder is generally capacious; it is enlarged have already stated, but without success. to an immense extent; after it has become so far distended and bulged for a time into the hollow of the sacrum, the fundus of it difficulty, succeeded in getting a small cabegins to yield, and then the viscus rises theter into his bladder, and drew the water into the cavity of the abdomen, and in that off. The catheter was secured in the bladway the cavity of the bladder is further re- der, under the impression that this was an moved from you than in the natural state; organic and unyielding stricture, but the you require, therefore, a much longer inpatient in his restlessness withdrew it, after strument to reach it. I have seen many it had been in for three or four hours. The

ter; anu patient's roo. instruments o. catgut bougies, castic gum catheter. silver catheters, an 'londy. The instruments have come out filled with blood, but that has been from laceration at the neck of the bladder. On introducing such a catheter as this, however, the water has come away naturally; not perfectly trans-parent, because it is mixed up with mucus of a dark colour. It contains a great quantity of saline matter, and it is in consequence of this change in the quality of the water, when it has been long retained, that such rapid mischief arises on its being discharged into the cellular tissue.

Now there is another cause of retention. and that is, the

Loss of Power in the Bladder

to expel the urine. We had a case showing this very well the other day. The retention was supposed to arise from stricture of the urethra, but my opinion, from the first, was, that it did not arise from that cause. patient stated, that for a long time he had difficulty in making water, and he attributed it to his having been prevented from time to time from emptying his bladder. of ladies into the country, and he could not very decently get off the box to empty his bladder. Upon several of these occasions he had retained his water much longer than he otherwise would have done, and at last, when he came to pass his water, he found that he did so with difficulty. On this ocneck of the viscus, and paralysis of the casion it stopped entirely, and he applied to a surgeon, who introduced a catheter, but did not succeed in getting it into the bladder. When I saw him, the glans pe-In general, in such cases, you can succeed his was swelled considerably, the whole ornot wonder—he was a man pretty well ad-vanced in life—if he had been straining venereal encounter, which it is not very safe in old men to attempt to any great extent. However, in consequence, the parts had become inflamed. He at first passed his water pretty well, although, perhaps, he could not empty his bladder entirely, but at last the water stopped altogether. An at-When the patient was admitted, Mr. WAL-LIS, my house-surgeon, with some little cases where it was supposed that the blad- consequence was that the urine reaccumu-

ply mentioning the fact. In one case we and the patient ONS. observed an absence of the middle and nos-legion of moyar teriophotes of the middle and nos-legion of moyar teriophotes of the middle and nos-legion of the mi terior lobes of mentals of the control of the There was no gonowhites, but the parts were in a state of excitement, and a slight inflammation of the lining membrane of the passage existed, probably from the cause alluded to, and from the use of the instru-

ments. I passed a catheter of a pretty large size into the bladder without any difficulty, and I found that there was no such resistance, or grasping, as is met with in cases of bad stricture. The catheter was retained, and in the course of two days a much larger instrument was passed without difficulty. He says he has had symptoms of stricture for twenty years, especially if he caught cold, and from which he had some difficulty in making water. He has had very little surgical assistance until the retention became severe. He is of very temperate habits. On Sunday last he got wet from the rain, and on Monday he passed his water with difficulty. On Wednesday he applied to a medical man, who attempted to introduce a catheter, but without success, and at about seven or eight o'clock, he was brought to the hospital." Number 3 catheter was then passed in, to about an inch from the orifice, and it was supposed that he had a stricture, though I could not find any. Indeed, I think that if there had been, the passage would not have yielded quite so readily. "He was then put into a warm bath. A little water followed the withdrawal of the catheter. Half a grain of muriate of morphia was then given to him, and fomentations were applied to the region of the bladder. When under the influence of the morphia, a small catheter was passed in, and a great quantity of water was drawn off. The catheter was tied in, but the man became restless, and it came out at 9 a.m. He passed a very good night. Number 4 catheter was put in on the next day, and four pints of water were drawn off."

Now my reason for thinking that there was no stricture, and that the disease was merely a want of power in the coats of the bladder, was that in stricture you very seldom find the bladder so capacious as it was in this case. It is generally contracted, in order to overcome the resistance arising from the stricture. There were four pints of water drawn off here, and in such cases the bladder frequently contains most likely not more than from four to twelve ounces.

I thought it was much more prudent, in is ase, to retain the catheter in the bladder. In cases of over-distended bladder, where the canal is sound, the bladder recovers its tone better when the instrument

o doing so, and it terios lobes of mental percury, 1876. Assort won to do one so, an it time. In woolen, the cash et al. that the bladder could be tent empty, and the world thus have an opportunity of recovering its tone. In a short true a full district was introduced. The bladder was amation of the lining membrane of the state of relieving itself its full and free stream. The patient was any dingly and the made of the lines of the lines are the stream. dismissed cured, after but a very residence in the hospital.

CASE IN WHICH

GOUTY CONCRETIONS WERE EXTENSIVELY DEPOSITED IN

VARIOUS PARTS OF THE BODY.

To the Editor of THE LANCET.

SIR, - I beg to transmit the following particulars of an interesting case, which I obtained on seeing the invalid during a late visit in the country, for insertion in your valuable Journal. I am, Sir, your obedient servant.

T. HERBERT BARKER. North-London Hospital, Feb. 11, 1836.

Mrs. C., ætat. 45, resides at Hemel Hempstead, Herts. She is emaciated, and of sallow complexion. She has never enjoyed very good health. She has had three children, all of which died either at birth, or in early infancy. She has never been accustomed to luxurious living. About fifteen years ago she had an attack of inflammation of the great-toe of the right foot, and of the carpo-phalangeal and phalangeal joints of the middle finger of the right hand, which lasted for some time, and left the parts a little red and swollen. She subsequently had irregular paroxysms, of a similar character, affecting the smaller joints of the hands and feet, and the ankles and heels. About seven years ago, after a severe paroxysm of heat, redness, pain, and swelling, in the joints first affected (those of the right middle finger), she perceived some "chalky matter" deposited in the parts affected, which, previous to its escape, very much aggravated the pain. hy breaking the integuments immediately covering it. Since she first perceived the concretions, their formation has been so extensive, that there is scarcely a square inch of the surface of the fingers, the hands, the toes, or the feet, in which they may not be observed, particularly at the metacarpo and metatarso phalangeal, and the phalangeal joints, which is introduced only as occasion requires, I are so extensively studded with protubcsay twice or thrice in twenty-four hours; rances of various sizes caused by the conbut here the difficulty, experienced by the cretions, as to cause great deformity. She house-surgeon in introducing the catheter, has had not less than a dozen openings in

the feet, and nearly

hands from which great quantities or misse part of 11, 126 has necconcretions have excaped. Their formation five weeks, and discharges a

duri the last six or seven years, the of about the size of a walnut, but is not reds elt ws, the shoulders, the knees, the hips, neither is it, like most of the other protut'& nose, the cheeks, and the gums, have peen the scats of similar pain, heat, red-ness, and swelling, followed by concretions in the right elbow and knee, and on the

left side of the nose.

Her grandmother was a native of Dunstable, and was terribly afflicted with a similar disease. The parents of Mrs. C. were entirely free from the diseases They had never had an attack of gout in their lives. She has been repeatedly told by her friends that the disease was caused by her use of the water of Dunstable, because it was impregnated with saline matter, in consequence of the abundant calcarcous strata in that part of the country.

She has been most egregiously neglected, never having had any medical attendance for her very painful malady. A long time ago, some friends recommended the application of Goulard's lotion, which she used once or twice, with temporary relief from the pain, but she desisted from its further employment, the danger of such applications being represented to her by some other friends as being considerable.

She says that nine or ten years ago she had a severe and long illness, with " brain fever," which was caused by insolation; and that, during the last two years, she has scarcely been free for an entire month from erysipelas of the head and face, or of the parts affected in the hands, where it has generally assumed a severe form.

At the present time, there is a protuberance of about the size of a horse-bean. situated just beneath the skin, opposite the inferior margin of the left nasal bone. It is hard and moveable, and the light-coloured concretion, similar to that which is so plentifully distributed over the hands and feet, is seen through the transparent cuticle. covering it. The fingers are exceedingly deformed, there being clusters of indurated protuberances at almost all of the phalangeal and metacarpo-phalangeal joints; several masses of similar substance are situated upon the dorsa of the hands, and about the wrist. The white saline matter may be observed underneath the disphanous epidermis, of various size and figure, in different

thas always be a preceded by most excru-ciating pain, of the pain has always been relieved by a explication of cold, and much and probably holding some person of aggravate by the application of heat.

Beside the existence of the disease in white colour. The metacarpo-phalau rulent fluid mixed w. ... the saline matter, and probably holding some portion of it in solution, imparting to the fluid a challeywhite colour. The metacarpo-phalangeal which have been enumerated joint of the little-finger of the same hand is berances, painful on pressure even, although it was the seat of excruciating pain at an earlier period of the affection.

The feet are similarly deformed, and the white masses may be seen, as in the hands, covering the toes, heels, sides, and dorsal surfaces.

There are three tubercles of similar concretion; the largest of about the size of a small pea, situated opposite the external condyle of the right humerus. And there is a small concretion deposited on the inner side of the right knee. The pulse is 78, and rather feeble; she has a slight cough, and expectoration in the mornings, in consequence of having caught cold a short time since; the skin is cool and dry, she never perspires excepting during the violent paroxysms of pain, when perspiration and cold shivering frequently come on alternately; and she generally has shiverings and finshes of heat alternate with each other for a short time previous to the attacks of erysipelatous inflammation. The tongue is dry, and covered with a whitish fur; the appetite has always been impaired: she is almost constantly distressed with urgent thirst; the bowels are generally somewhat relaxed; the urine is usually rather small in quantity, and high-coloured, depositing a heavy brown sediment; she has at no time had any difficulty in voiding it. The function of menstruction has usually been pretty regularly performed; at the present there is some little irregularity, which she attributes to the age at which she has arrived.

Remarks .- Similar cases to the above are not very frequently met with. The concretions usually occur only in one or two of the smaller joints, but here there is scarcely a small joint of the extremities that is not involved, together with one of the knees, one of the elbows, and the nose. The age of this poor woman, too, is rather early for their formation.

It presents an instance of this hereditary disease passing over a generation. A tilbugill the patient could not give me much information concerning the case of her grandsituations. The mass, situated at the joint mother, still she assured me that she was between the metacarpal hone and the first greatly afflicted with it. The parents of the phalanx of the left index-finger, is of about patient lived to a good old age, and were the size of a hen's egg,—hot, red, and very completely free from it. This passing: painful, with a small but deep ulceration of hereditary affections over alternate. ply mentioning the fact. In one case we and the patient observed an absence of the middle and pos-

teriorlobes of it in the teriorlobes of it in the teriorlobes of it in the terior time. It is popular in the chalk list which are very somerous in Bedfordire and some adjoining counties), that this lease is induced by the water of those arts, but we need not resort to such an rplaustion, since the chemical composition these concretions, explains the pathogical relation which subsists between gout nd gravel. Moreover, it would be difficult explain their peculiar composition from it imbibition of water from a calcareous oil. The only cases, however, which I have en (three), and one of which I have heard. conred in persons who belonged to such Dr. Wollaston first demoncalities. trated that the real composition of "chalk tones" was uric acid, combined with amionia, potash, or soda, generally with the ormer. It is sometimes combined with me, and phosphate of lime enters into the omposition of some of them. I brought) town with me a few grains of the concreions which have escaped from the hands nd feet of this woman; they are in light passes, of a white colour, soft, friable, and atersected abundantly with cellular tissue, asoluble in cold, but slightly soluble in oiling water. On adding to the solution a aw drops of nitric acid, and evaporating it o dryness, the beautiful purple colour of he purpurate of ammonia made its appearnce, formed by the decomposition of the iric acid, and highly characteristic of its resence. On placing a portion of the conretion upon platinum, and directing a flame y means of the blowpipe upon it, it gave ut a strong animal odour, partly dependng upon the cellular tissue entering into its prination. On continuing the flame it was pparently destroyed; not a particle renained, proving the absence of phosphate of lime; it did not entirely fly off, proving he whole of the alkaline base not to be mmonia. The surface immediately surounding the spot on which the concretion vas placed, was covered with a small quanity of a fosed substance, which was soluble n warm water, and was proved to be disinctly alkaline. It is, then, very probable hat the lithic acid in this case was in comsination with sods or potash. The woman and not been in the habit of preserving the oncrations after their escape, and the quanity that I obtained was so very small, that it was impossible to prove their exact chemical composition. An able chemist has kindly fer to make a quantitative analysis of acse concretions when I shall have obained a sufficient quantity; and probably it a future period I shall be able to publish uore satisfactory information on this point.

To the Editor of THE I WEET.

LOOD:

Sig.—A short time ago, while a perimenting on the human blood, I separate ed from it a peculiar species of petroleumin ad on referring to the analysis given by a eral eminent chemists, I found that this principle was not at all noticed by them. I therefore am led to suppose that it has not befor been separated from the blood, unless very recently, and published in some work which I have not had an opportunity of seeing.

Process.-One pound of blood was taken from a man about fifty years of age, and before separation took place, it was well mixed with one ounce, by weight, of concentrated sulphuric acid, and stood frequently for twenty-four hours. To this mixture was added two ounces of carbonate of lime, and the whole again was well stirred up till effervescence ceased. A glazed earthenware retort was then procured, having its beak lengthened with a tin tube, about three feet long, the extremity of which was introduced into a quart bottle. and the bulb of the retort into a small sand bath, which was placed in a charcoal furnace. A strong fire was gradually raised, while the heak was kept cold by means of wet cloths. Carbonic acid gas first came over, which was allowed to escape; then a most disagreeable smell was evolved, when it was found necessary to lute the receiver to the retort, to prevent its escape. At length a fluid distilled over, and with it the tar. Some floated on the surface, while some formed into globules and went to the bottom. When the distillation was complete, the tar was separated, by filling the bottle quite full of water, and taking the tar from off the surface by means of a slip of glass.

This is the process which I used for extracting tar from blood. For some time I thought it was an oil, and laid it aside as such; but the laws of chemistry do not allow us to judge of substances simply from their appearance, and further experiments proved to me that the product was decidedly tar, and not oil.

I afterwards repeated the experiment, by noting upon eight pounds of sheep's blood; and using the same proportions of acid and carbonate of lime to each pound. From this I certainly expected to obtain a large quantity of tar, but the retort not being glazed, a portion escaped through the pores. Consequently, I was unable to ascertain in what proportion it existed in the blood, but the quantity thus extracted was one fluid drachm.

Animal tar is adhesive to the touch, and lighter than water, and possesses about the same degree of consistency as common:

^{*} See Dr. Copland's invaluable "Dictionary of Practical Medicine," art. " Epilepsy," page 780.

vegetable tar, but it very materially I have, in some cases, seen inflammation of from the latter ip smell, extremely disagreable. It is soluble in alcohol, and tur a of a thick brownish white colour when axed well with water. By evaporating he spirit, the tar again floats on the sure. When ignited it burns like commor r, leaving a smell not unlike that of bur teathers. The quantity obtained bein coo small for redistillation, I was oblized to heat a little in a bulb glass to the tg uperature of chullition, when a spirit was given off which took fire when brought in contact with a lighted taper.

I hope that my experiments will be repeated, provided the result is yet otherwise unknown; not that I think it of great consequence, but we must always feel interested in seeing the secrets of nature unfolded. Transmitting this account for in-sertion in your excellent journal, I remain, Sir, your obedient humble servant,

HENRY OSBORN, Chemist. Southampton, Feb. 16th.

BROWN BREAD.

To the Editor of THE LANCET.

SIR,-Allow me, through the medium of your valuable journal, to call the attention of the profession to the uses and effects of brown bread, both as a remedy in habitual costiveness, and also as an article of diet. I am induced to make these observations, in consequence of having myself experienced both its value as a remedy in the abovementioned state of the bowels, and its iniurious effects when used for any length of time as an article of diet. Its medicinal virtues are really surprising. It scarcely ever fails to remove, in a very short time, that habitual costiveness which so generally accompanies a sedentary life. But when its use is continued for some time after the costive state of the bowels has been removed, its effects are most injurious. It then produces all the symptoms of dyspepsia, and irritation of the whole alimentary canal. The laxative effect arises from the particles of bran which it contains, acting as a mechanical stimulant, and increasing the peristaltic action of the intestines. Now the very manner of its action as a laxative, proves its unfitness as an article of diet : as it is necessary for all substances, in order that they may have any mechanical effect upon the howels, to possess the power of resisting the action of the gastric juice, and all substances that have this power (for instance the rind of vegetables, under which denomination bran comes) also posment of the alimentary canal, and I believe of action.

continued us. of bread coning bran.
Brown bread is any extensively this city, and is an ander the name.
"Constitutional bread," a second that is not deserving. I will at some future period furnish you with cases illustrative of its effects. Believe me, Sir, your obedient servant,

CHARLES WRIGHT.

Harcourt-street, Dublin, Feb. 13, 1835.

SYPHILIS.

"A gentleman who had been cured of a chancre at a distance from home, called to consult me whether he might consider himself as perfectly free from the disease. Whilst he was taking great pains to explain to me how he had been salivated, and how long he had continued the use of mercury after the chancre was healed. I interrupted him by observing, that if he had continued the use of mercury till now, I could not pretend to say whether he was free from the disease. 'How then,' said the gentleman, 'am I to ascertain my real situation?" 'If,' replied I, 'you find no symptoms in the course of three months, the probability is that you will remain well till you expose yourself to a new source of infection." about six weeks he returned, with a sore throat and copper spots. I explained to him that he should not blame his surgeon, who, even if he had known what was to happen, could not have prevented it. The patient went through a necessary course of mercury, till he was cured of every symptom; and then demanded, with some impatience, whether he was secure. 'You are secure,' replied I, 'from every return on the genitals, and on your skin and throat; but, as it is impossible for me to know whether your bones are contaminated, I cannot pretend to say whether you will have nodes in a few weeks' time.' He now began to comprehend the doctrine, and submitted to await the result. In about six weeks he actually had nodes; after the cure of which, by a severe salivation, I made no scruple to assure him, he was perfectly free from the disease."-Mr. Hunter's last conversation with Dr. Adams.

The effects of the venercal poison upon the human body, Mr. Hunter describes under the three different states of "contamis nation," "disposition," and "action." By contamination, he implied the entrance of the poison into, and its contact with, some part of the body. By disposition, the inter-mediate state between contamination and sees the power of producing great derange- the breaking out of the disease, or the state

First, of the state of contamination.

Mr. Hunter was of opinion that mercury, if given immediate the control of the con

—Page 429, recond edition, by Dr. Adams. Dr. Adams, commenting on this opinion, observes,—"This is a fair inference, but its truth can never be ascertained, because the primary diseased action, whether chancre or gonorrinea, has always commenced before

mercury is applied."-Page 433.

The experience of the military surgeons, especially of Mr. Guthrie and Mr. Rose, although of no very recent date, throws considerable light on this important point. Mr. Guthrie, in an interesting paper, in the Medico-Chirurgical Transactions, I believe, vol. viii, observes, — "During the last eighteen months, in the York Hospital, Chelsea, Mr. Dease, Dr. Arthur, Dr. Gordon, and myself, have been in the habit of treating all cases of ulcers on the penis, whatever form or appearance they might have, by simple mild means; that is, by dry lint, or ointment, or lotions, for the most part not containing mercury, in order to obviate the objections that might be made to the application of mercury in any form; and of hear one hundred cases which have been treated in this manner, all the ulcers healed without the use of mercury. The primary sores were of every description, from the superficial older of the prepuce and glans, to the raised ulcer of the prepuce, the excavated nicer of the glans, and the irritable and aloughing alcer of those parts.

"The secondary symptoms, in the cases alluded to, amounting to one-tenth of the whole, and which were treated on the anti-phlogistic plan, have hitherto been nearly confined to the first order of parts—that is, the bones have in two cases only been attacked, and they have equally been cured

without mercury."

"A gentleman, aged 27, contracted venepal sores in the month of June, 1833, and his out under a mercurial course, during which time the sores healed, but he still continued the mercury. While under the influence of that medicine, he indulged in impure connection, the consequence of which was a fresh crop of venereal sores, three or four. The mercurial course was

prolonged until the stelling of these second sores. About two me to as after this, second-side the stelling of the second-side the second-side the second-side the second-side second se

The observation of Mr. Hunter, "that not one in fifty cases of chancre would earner the lucs venerea, if cured locally," when placed in opposition with the experience of the military surgeons above stated, appears to prove one of two things, either that Mr. Hunter was mistaken, or that the poison has become much milder in its

effects

First-Was Mr. Hunter mistaken? Speaking of the acrimony of the poison, he obscrees. " Venereal matter must in all cases be the same; one quantity of matter cannot have a greater degree of poisonous quality than another; and if there be any difference, it is only in being more or less dilated, which produces no difference in its effects. One can however conceive, that it may be so far diluted as not to have the power of irritation. The variation of the symptoms in different persons depends upon the constitution and habit of the patient at the time. What happens in the inoculation of small-pox strengthens this opinion. Let the symptoms of the patient, from whom the matter is taken be good or bad, let it be from one who has had many pustules, or from one who has had but few. let it be from the confluent or the distinct kind, applied in a large quantity or a small one, it produces always the same effect.

In a small pamphlet submitted to your notice, I have stated my conviction, that the poison or poisons producing gonorrhea and chancre do vary in their acrimony, and are arising de novo daily. That the majority of venereal sores are not true syphilis, or, in other words, are not followed by secondary symptoms, and, therefore, require for their cure little or no mercury.

Now, if we can throw off the idea of the venereal poison being like small-pox, a specific, uniform, and unvering poison, and believe that it varies in acrimony, not only from the constitution, but from the habits of life of the patient, then nothing is more reasonable than the belief that the effect will also vary in severity.

It is well known that the disease is milder in France than in this country, which would appear in a great measure to be owing as

No. 651.

the necessity on the p

e very cleanliness and person ver that they may now be pr

pox or paint, three persons, having connection with one female, may have gonornection with one female, may have gonor-rhosa conancre, or bubo; and even these ware lies may vary in acrimony. Now, wille the cause which produces these disfies is one and the same, when once re-Smoved from the woman, it does not necessueffect is not necessarily the same as the cause; for, if so, the excertation from veneral gonorrhoza must be chancre, and the rily maintain its original character; the real gonorrhosa must be chancre, and the excoriation of a chancre must be chancre also, or, if the discharge of the atter comes in contact with the mucous lining of the urethrs, it should produce gonorrhosa, whereas, either of these effects is, as far as I have seen, extremely arre. While, therefore, it is possible Mr. Hunter might overrate the comparative number of cases, which, in the absence of mercury, would be followed by lues venerea, I hold it to be extremely probable that, at the time he wrote (now about fifty years since), the venereal disease or poison possessed a higher degree disease or poison possessed a higher degree cres of acrimony.

At page 274 of Mr. Abernethy's Lectures on Surgery, speaking of the vencreal dis-I had an opportunity of observing in the earlier part of my life."

that venereal bubo is a sign of the absorp-tion of the poison, or, in other words, of the contamination of the system; there is, however, I believe, little reliance to be placed into in the language of Dr. Titley), "is inthe first place, any into in the language of Dr. Titley), irrilation in the urethra or on the penis founded as there handlesis, that the cland may produce a bubo; in the next, secondary stated on sheer hypothesis, that gland-symptoms frequently follow a sore without that chargement depends upon the absorp-bubo; in the third place, bubo, or inflammation of a specific virus."—Page 119. tion of the glands in the groin, or indeed of any part of the body, frequently arises from cold or rheumatism, or any like common causes. While such explanations are at hand, why have recourse to hypothesis, for after all that has been said and done, I contend, that the opinion that the venereal poison is absorbed into the body, is not substantiated by facts or warranted by symptoms.

condary symptoms have arisen from bubo, blished, explain at once the difficulty that

that they may not the females for unaccompanied by any primary sore, I am that they may not of the semales for unaccompanied by any primary sore, I am unaccompanied b nion as hypothetical.

> For lst. I have inoculated a sound person three separate times from three distinct buboes (following venereal sores), without in either case producing contamination.

2ndly. "With respect to absorption, even

Again, as to the venereal bubo containing chancrous matter, it might as well be argued, that when supportation takes place case as described by Hunter, he observes, in any purt of the glandular system dur-"This disease has almost become extinct, ing variola, scarlatina, and rubcola, such or is so much modified as to be unlike that matter would possess the specific property which Mr. Hunter has described, and which of each disease; or, to go on with the argument, that the matter formed from suppuration of a gland, from a dissecting wound, It is an opinion very generally entertained must necessarily contain matter of the same quality as the original. The same reasoning. for aught I see, might be applied to natural poisons, the poison of the viper, &c. treatment of bubo then, in my humble opi-

2ndly. Of the state of disposition.

Mercury cures the action but not the dis-position. "Hence when a part is contaminated, and under the disposition to disease which should show itself at a certain time. mercury will protract that period, and the disease will not show itself so long as the constitution is under the influence of mercury. But all this time the disease will not I shall here take leave, I trust not un- be cured. After the mercurial irritation courteously, to express, freely and unequi has ceased, the venereal disposition, which vocally, my dissent from the views and has existed ever since the parts were contreatment of bubo as inculcated at page 205 taminated, will come into action; that is, of Mr. Judd's recent work on Urethritis and the disease will appear, and in this state will Syphilis. Unless it can be proved that seBrilly Of the state of activ

"Mercapy" cares the ve creal action." we define motive insteady what is veneral action, it at instead action, it at instead definitely of the action is mercury, since daily experience convince time, that many supported by the facts which he produces, effects imputed to the venereal poison, are neither more nor less than productions of the mercury. I conclude then, lst. That the occurrence of venereal sores

while the body is under the influence of mercury, proves that mercury does not pre-

vent contamination.

2ndly. That inercury does not prevent the disease from running a certain course. By this I mean the occurrence of lucs venerca. If this be true, it follows,

3rdly. That the continuance of the mer-cury for three weeks after the primary sores have healed, with a view to eradicate the virus, is perfectly unjustifiable both in theory and practice,

4thly. That there is no legitimate ground for believing that the venereal poison is ever

absorbed into the body.

5thly. That the majority of venereal sores are not followed by lues venerea.

6thly. That the venereal poison varies in acrimony.

7thly. That the majority of venercal sores, which are not followed by lucs venerea, are, in all probability, the production of the some poison that produces true chancre, only in a minor degree of acrimony.

It was my intention to have stated the facts on which I found the opinion, that the more properly speaking, mercurial,-a consequence of the remedy and not of the discase. As, however, these remarks have extended to a length beyond my original intention, I cannot presume to trespass farther! at present on your valuable space.

FRANCIS EAGLE.

29, Poultry, Feb. 9, 1836.

NEW RESEARCHES ON THE

MOVEMENTS OF THE HEART.

FOUNT, and MAGENDIE, each of whom has bodies. formed a different theory. The researches the newest explanation, which is always which is very remarkable, and affects at

existed, whilst attempts were made to crassomething in the vice of an hypothesis. dicate the virus." Page 333. In the mean time BRAU, one of the most intelligent internes of the school of Paris, after having made see val experiments on cold and warm bloode animals, has however contradictory some of the may detail the experiments which form basis of this long memoir, but will refer them in such a manner as will render ou description of M. BEAU's ideas intelligible.

The heart is the seat of two principal movements, which alternate with each other, and on whose existence all writers are agreed; in one, the inferior part of the heart or its apex is carried forwards; in the other it is the superior part or base of the heart which advances, while the point retires towards the dorsal parietes of the chest; we may call the sound which attends the first of these movements the inferior sound (the first or dull bruit of authors); the second gives the superior bruit (the second, or clear sound). It is also very generally admitted that the first is a movement of contraction (systole); the second, a movement of dilatation. Laying aside the manner in which other authors have endeavoured to explain the mechanism of these two movements, and particularly of disease called "venereal rheumatism" is that by which the point of the heart is carried forwards against the parietes of the chest, let us see how M. Beau renders an account of the latter phenomenon. In physiology, all reasoning should be founded on observation and experiment. This grand truth, first established by our countryman Bacon, for the natural sciences, is at the present day applied with success to the investigation of the laws that govern medicine and physiology, by two distinguished physicians, Messrs. Louis and Magendie: the necessity of abandoning hypothesis for observation is daily gaining more Tue theory of the movements and bruits ground, and the time is doubtless not far off of the heart still remains in great obscurity, when the science of life will progress in notwithstanding the labours of Messrs, proportion as we abandon idle speculation BOULLAUD, PIGBAUX, MARC D'ESPINE, for the study of the phenomena of living

The first experiments made by M. BEAU of the Dublin Commission, composed of were performed on frogs. On exposing the Drs. Corrigan, Law, Nolan, &c., ought heart of one of those animals we are struck to give birth, if not to the best, at least to with a double movement of dilatation,

these two movements, we find they depend contraction : parietes or the ventricles on the auricle and ventricle, which act in are shortened in Il directions; the appear the following hnanner, viz. : contraction of drawn up towards the base, and performs a the auricle with dilatation of the ventricle; movement from below upwards, and from contract. Tof the latter followed by dilata- before backwards: on the contrary, the tion of auricle, and the repetition of the impulse of the heart's point takes place sameoprovement. When the heart is ex- immediately before the systole, and depends amflied in the same animal, after the upon the manner in which the blood is Ascular system has been emptied by divi- driven from the auricle against the parietes Gions of the aorts, we can still follow the of the ventricle. This is a point in which movements of the organ for a few minutes: the author is completely in contradiction the auricle first contracts, then the ventricle, with the opinions commonly received; it but not immediately: thus we observe the fol- remains for future experiments to confirm lowing series; -- contraction of the suricle; or overthrow his ideas. Let us repeat them repose; contraction of the ventricle; repose, again to avoid all misunderstanding:more long than the former one: then continuation of the same series. Here there is the ventricle, without any projection foran essential difference between the move-ments of the heart when full and empty: in 2nd. In the diastole the ments of the heart when full and empty: in 2nd. In the diastole there is a general theformer we have a dilatation of the auricles expansion of the ventricle, particularly of and ventricles; in the latter case the dilataties point, which is carried forward and tion is marked by a repose, and hence we strikes against the chest. are led to the conclusion that the dilatations But the above propositions are not the of the heart are passive, and depend on the conly ones in which M. BEAU finds himself force with which the blood is driven into opposed to other writers. If we turn to them. Having thus exposed the nature of the succession of the heart's movements, the heart's movements in a state of plenitude we find a difference which is worthy of atand vacuity, the author asks " How do we tention. explain the projection forwards of the apex M. BEAU, as well as all other writers, adduring contraction of the ventricles? But mit two movements, an inferior and a suhere another question presents itself-Is the perior one; now if we analyze these two systole? M. BEAU thinks decidedly not. sent in the following order :-

apex of the heart really thrown forwards movements, we shall find each composed of against the parietes of the chest during the two other movements, which we may repre-

Inferior movement Dilatation of the ventricle; Contraction of the ventricle.

Superior movement \dots $\begin{cases} \text{Dilatation of auricle;} \\ \text{Rest;} \\ \text{Contraction of auricle.} \end{cases}$

Now if we analyze the succession of movements adopted by authors, we have.

Repore.

Here also the difference between the two systems is striking. M. Brau places the ments of M. Brau were made on animals ventricular diastole between the systoles of with a single heart. To obviate this the the auricle and that of the ventricle; while in M. Hope's explanation we have the ventricular systole placed between the systole rabbits, and birds (experiments for which ceivable.

But it may be objected that the experiauthor continued his researches on dogs, of the suricle and the dilatation of the ven- we must refer to his memoir), and found tricle, a succession which is not very con- that in animals with a double heart, the movements succeed in the following order:-

Inferior movement, compr

Superior movement ...

iorwords; (Augmentation of all the Diminution of the ventricular state. Return of the point to its natura

A beginning, coinciding with the Lilatation of the auricles; middle repose, very sensible;

A termination, coinciding with the col of the auricles.

From the above theory it is easy to deduce the difficulty of diagnosticating disease the author's explanation of the sounds of the nervous system, but surely never was shock of the heart against the thoracic pa- about to detail:rietes; the inferior movement produces the M. BEAU explains the former by the dilatation of the ventricles, and the latter by the dilatation of the auricles.

The first bruit corresponds to an elevation The second bruit is not commonly attended with a similar phenomenon; however, M. BEAU assures us that in six cases he has observed an alternate elevation between the 2nd and 3rd intercostal spaces, corresponding to the second sound of the heart.

The duration of the different sounds, and the repose, as determined by auscultation, by repose of all the parts; one-half by contraction of the ventricles; one quarter by contraction of the auricles (1st and 2nd bruit). The author's researches furnish a different result. According to M. BEAU, if a pulsation measures one second, it composes a true measure à trois temps, and the first bruit, the second bruit, and the repose, will be represented by counting 1, 2, 3.

the heart: it differs little from that given case so grossly mistaken by men of high by M. MAGENDIE: the foundation is the rank in the profession, as the one we are

In the month of April, 1814, the author first sound: the superior movement the se- (M. Bieske) was called on to attend Colonel cond: so far the author agrees with M. Count BLUCHER, son of the celebrated Magenbie; he only differs from him in the Prince of that name. The patient laboured explanation of the manner in which the was troubled with hemorrhoids. The symptwo shocks are produced. M. MAGENDIE at- toms were easily removed by blood-letting tributes one to the contraction of the ven- and purgatives, and the patient returned to tricles, the other to their dilatation: while the amusements of Paris, where he was then stationed; in a short time however he again began to complain of tightness and pain about the head, with impossibility of sleeping. The pulse was now quick and full; the skin warm and dry; the inflammaof the soft parts over the heart's point, tory symptoms were removed by mild diaphoretics and a warm regimen; however, a little confusion in the ideas seemed to remain after the recovery of the patient from this slight attack. Dr. BIESKE considered this symptom, which was soon joined by a return of anxiety, insomnia. and tightness (f the head, as depending upon hypochondria, and hoped, both by acting upon the abdominal cavity and by sulphurcous baths, mineral waters, and relief of the patient's mind, is, according to LAENNEC, as follows; in a to obtain a complete cure. He took this complete pulsation one-fourth is occupied opportunity of examinin; the state of tho wounds which Colonel BLUCHER had received some time before at the battle of Dresden. They were healed, but the cicatrices still betrayed the extent and nature of each injury. One sabre-wound existed near the junction of the occipital and right parietal boucs: it was excessively deep, and had probably penetrated through the inner table of the skull. A second sabre-cut, on the left parietal bone, seemed more superficial; a third, near the junction of the parietal with the frontal bone, on the right side, was also deep, and had probably penewas also a cicatrix on the neck from a lancewound, and a second on the right side of the chest: this latter had penetrated deeply into the substance of the lungs, as was shown by the violent hemoptysis and other lated by M. Bigske, from the last Number symptoms which accompanied and followed the wound. The patient, thus severely of the Berlin Gazette of Medicine which the wound, and taken prisoner, was brought has reached us. (No. 52, Dec. 30, 1835.) into Dresden, where he was attended and

DERANGEMENT OF INTELLECT RESULTING FROM

SABRE CUTS ON THE HEAD.

We extract the following curious case, re-Physicians in an countries are agreed on cured by Baron Labrey, Dr. Oule, &c. Colonel BLUCHER now exchanged better his amortic returned, and, faithful to for a French General, his hearts a control unity the ordenna. of Dr. Bons, he drafik every established, and he followed the allied army day a bottle of commanders! light followed the allied army figures of a winter campaign amidst all the fa from the Rhipe to the walls of Paris.

In the month of May. 1814, the patient left Paris with the intention of taking mine-ral baths, but was prevented by some in-dispositor; he also now conceived the strapes idea that he was possessed of a secree which would preserve the kingdom of Bussia from all dangers, and that his neighcours were constantly at work either to found himself much relieved; however, the force this secret from him, or to deprive him of life, and discover it in his entrails. It was impossible to convince the patient, hy any moral reasoning, of the folly of the ideas by which he was possessed; his physician, therefore, ordered some compound tinct, of bark, with tinct. of rhubarb and wine. The patient now, for a short time, thought himself cured, but his irregular ideas soon returned, and it became necessary to hold a consultation of the most eminent physicians in Berlin; their prescriptions, however, were not followed by any beneficial result, and the patient continued to regard them as fiends and persecuting denions. Dr. Bieske, who still preserved some share of the patient's confidence, hoped to obtain an amelioration, by acting on the intestinal canal, and by exercise; yet it was impossible to overcome the morbid mistrust which constantly occupied his mind; in the intervals of lucidity, he often complained of confusion in the head, vertigo, and sparks crossing the eyes.

Here we cannot help remarking on the stinacy of his medical attendants, in attributing all these symptoms to hypochondria, state of the brain, which had evidently suffered from the wounds received at the battle of Dresden. Far from pursuing an antiphlogistic treatment, the opposite method case) Dr. Bohn, one of the attending physicians, advised him to drink champaigne; under the stimulating influence of which beverage, he felt himself comfortable for a short time; but, on the following night, the patient was very uneasy and agitated, and the attacks of vertigo were excessively violent; the pulse was now full and hard; the face and eyes were much injected; the circulating system was greatly excited. Dr. Bieske ordered some blood to be drawn from the arm, but the patient obstinately refused; he was, therefore, obliged to apply cooling diet. The patient now felt muc's after a lapse of a year without any benefit.

day a bottle of c. mpaigne!!!

The baneful effects of such treatment were not long without manifesting themselves; the vertigo again appeared with excessive violence, and M. Bohn was compelled to order venesection, with a cooling diet, and the use of sulphur. After the abstruction of some blood, and the administration of a few doses of sulphur, the patient sudden change from champaigne to cold water inspired his mind with fresh distrust; he now refused every kind of medicament, determined on treating himself, and for this purpose made a journey on foot into Silicia, from which he returned in eleven days much more ill than he set out.

The patient's state now seemed very serious, and a fresh consultation of the Berlin physicians was called by Prince Blucher. On the 14th of November, 1814, the patient was examined with care, and the physiciangeneral gave it as his opinion, that the disease had no connection with the wounds received at the battle of Dresden, but consisted in an aberration of the intelligence. which would best be treated by occupation, and the effect of moral agents. These latter, however, had no influence on the disease; the patient became so nuraly and distrustful, as to endanger his own life and that of others; he often walked about at night with loaded arms, and once challenged a superior officer in duel, who, he imagined, threw some shade on the glory of his father. A medical examination of the patient again took place, in consequence of this circumstance; a decided opinion of mental deinstead of turning their attention to the rangement was given, and the duel of course prevented; this enraged him to such a degree, that he formed the resolution of insulting, or even killing, his adversary, whenever he might meet him. This design was frustrated by proper precautions, and was pursued with a fatal perseverance; the impossibility of avenging his honour had thus (to resume our author's history of the such an effect on the unfortunate patient's mind, that in the midst of a breakfast given to his friends, he fire: a pistol loaded with ball into the left side of the chest near the clavicle; the wound, although dangerous, was not mortal; the bullet did not penetrate through and through the chest, but seemed to remained lodged under the left scapula; the hemoptysis and other symp-toms evidently showed a wound of the lungs, of which however the patient the completely cured. It is unnecessary to got through the various methods of treatment by turns proposed, but all fruitlessly; confined at one time, at another allowed absolute liberty, the patient was at length sent twelve leeches, and recommend a more neighbourhood of the Rhine, but returned

He now lived without observing any regimen; aspectic goef; dept.

to enjoy excellent health. However, he geemed frequently to anter in the head; the hand was constantly carried to the forehead or head, and the patient at these times expressed his suffering by crying, "Oh, God, my head" (9 flott, mein kop?). His folly now became of an absurd kind; be believed, not only that his food and drink were poisoned, but that a portion of his strength was removed each time the hair was cut, and hence refused to be shaved or have his bair cut; he also conceived that a part of his secret was contained in his excrement, and always satisfied nature in a remote and unfrequented place, after which he carefully buried the precious deposit.

In this melancholy state the patient survived, without any remarkable change, from the year 1814 to the 10th October 1829. The author does not make any allusion to the symptoms which immediately preceded death. The body was examined on the 11th of October.

Antopsy.

External Examination .- A deep cicatrix, two inches long, on the right parietal bone; a second of similar extent near the junction of the parietal and occipital bones on the right side; a third cicatrix one inch and a half over the left parietal bone; on the body a large cicatrix adherent to the second and third ribs on the left side of the breast near the clavicles; behind, near the twelfth dorsal vertebra, two cicatrices; above the right elbow-joint, a transverse large cicatrix adherent to the os humeri; the fingers of the right hand, except the thumb and index-finger, were contracted, and united together by cicatrices; on the outer side of the left calf a round cicatrix, which seemed to have resulted from a gunshot wound, a second over the left knee-joint, from a penetrating wound. On removing the skullcap the dura mater was found to be united to the bone more closely at the points corresponding to the wounds; the anterior one had evidently penetrated into the cavity; the posterior cut on the right parietal bone had also penetrated, but not that on the left side. The whole anterior surface of the hemispheres, superiorly, was covered with a whitish firm layer, about the thickness of a knife-blade, and similar to that produced by ted nothing abnormal. On dividing the difference of the brain the white matter was found somewhat injected, and the ventricles contained a little more fluid than usual. The cerebellum healthy.

In the cavity of the chest the lungs were closely united to the costal parietes; in the small-pox has reconsists the third and fourth ribs, was found a The experience

He now lived without observing any regi- leaden bullet, which appeared in several men; appetite good? dept to enjoy excellent health. However, he instrument. The third and fourth ribs hard goemed frequently to a wer in the head; the been evidently fractured inwards, and were hand was constantly varried to the forehead on head, and the patient at these times ex
The examination of the other organs repressed his sugging by crying. "Oh, God, vealed nothing worthy of notices."

The cause of the leaion of interligence in this curious case, was evidently chronic inflammation of the membranes capring the cerebral hemispheres. Unfortunitely this cause was completely overlooked by physicians who attended General Bluche and a treatment was adopted which was rather calculated to aggravate than to allay the morbid irritation of the sensorium. This is the more remarkable, as the French surgeons who treated the patient in 1813, after the battle of Dresden, expressed their fears that at some future time the wounds of the head might give rise to a derangement of the intellect. The length of time (sixteen years) during which a large musket-ball remained imbedded in the substance of the lung without giving rise to any symptoms, is also another curious circumstance.

To the Editor of THE LANCET.

SMALL-POX AND VACCINATION
HOSPITAL, ST. PANCRAS.

Report of Dr. GREGORY, Physician, issued Feb. 1836. (Abridged.)

During the past year 401 persons have been treated within these walls, and so many centres of infection removed from the metropolis. Of that number 89 have died, and 312 have been restored.

4140 persons were vaccinated at the hospital in 1835; and 1767 persons, chiefly medical practitioners, were supplied with vaccine lymph, for use, at home and abroad.

The records of the hospital, during the past year, sufficiently attest that the hopes once entertained of banishing the small-pox from the earth are visionary. Thirty-six years have claused since the general diffusion of vaccination throughout this country; yet small-pox still exists, and, by the bills of mortality, may be shown to have proved fatal to 863 persons in London alone during the last year. In various parts of the country it has shown itself during the same period. Nor do other quarters of the globe enjoy an exemption from the disease. On the continents both of Europe and Asia small-pox has recently occasioned considerable devastations.

The experience of the past year shows,

in and about London and the power of vaccination has in no degree diminished. The numbers vaccinated at the hospital in 1835 exceed that of any former year, and in no instance has any doubt or distrust been manifested by the parents of the child-

The r ords of the hospital show further that t) security of vaccination, though so remy, kable in the early periods of life, is not so complete and permanent in after-life as one time might have been anticipated. 144 persons labouring under small-pox have been admitted during the year, who in early life have been vaccinated. All of them, with few exceptions, were adults, an interval, varying from ten to thirty years, having elapsed since the date of their vaccination. Two-thirds of this number had small-pox in a mild form, wholly devoid of danger. The remaining third were less fortunate, having passed through the disease with greater or less degrees of severity. Still the mortality in this class of patients was very small, hardly amounting to 5 in each 100; while the unvaccinated perished in the proportion of 33 in 100. These considerations tend to show that vaccination is still entitled to the highest praise as a means of diminishing both the quantity and the severity of small-pox; that it is an object of national importance to encourage and foster it; and, lastly, that the attention of medical men cannot be too strongly called to the necessity of carefully selecting the lymph they employ, and accurately investigating the several causes on which its diminished efficiency in the more advanced periods of life may depend.

31, Weymouth-street, Feb. 4, 1836.

THE LANCET.

London, Saturday, February 20, 1836.

ANOTHER inquest has been held upon the body of another victim of the satanic system of quackery, and another upright English jury has returned a verdict of "manslaughter" against one of the parties implicated in the abominable proceeding.

But how is it, we ask, that the chief culprit is allowed to escape in these atrocious malpractices? How is it that the principal offender is allowed to pass unscathed from

certainly, that the confidence of the public norant tool of the mercenary destroyer, is on wheel? DE ULITY PAR.

> Many computes have reached us respecting the conduct of the Coroners at these quack victim inquests. Charges of ignorance, allegations of partiality, and imnutations even of corruption, are thrown out against some of those functionaries. That non-medical Coroners must act as blockheads in their offices, is a necessary consequence of their ignorance; but we had hoped that they would so conduct themselves as at least to remain free from accusations of knavery. That many of the non-medical Coroners are most respectable men we freely admit, and hitherto we have seen no just ground for excluding Mr. BAKER from amongst that class. We must freely tell him, however, that his behaviour at the late inquest on the body of Captain MACKENZIE, at the Ratcliffe workhouse, has been viewed by many persons with suspicion, and that reports unfavourable to his official character on that occasion, are in a rapid course of circulation. If Mr. BAKER be capable of forming an opinion on such s subject, we would ask him what he would think of the moral principles of a mar who, in a sound state of mind, would advertise one medicine as a cure for all diseases If Mr. BAKER be not lost to reason, -if his mind be not divested of every portion o common sense, he must know that if there be people so devoid of understanding, se credulous as to place any belief in the in famous puff of the mercenary quack who sets forth such an advertisement, they must necessarily, in numerous instances, pay the penalty of DEATH for their folly.

Under this view of the case, the crimought to be brought home to the offender in the first degree, and whenever it i proved in such coases that the cause of deat is to be found in the poison, or in the effects of Morison's Pills, THE VERDICT OF MAN SLAUGHTER SECULD BE RETURNED AGAINST MORISON HIMSELY. This would be at the inquiry, and that the mere agent, the ig- application of the law to the source of an of the calamities which is at this moment so of Captain Maces were, which concluded, severely affecting society. There any latter several days' sittings, on Wednesday aking so redeeming in the character and last, some hours after midnight, in a verconduct of Monison, that its should be dict of " manalaughter," But we ask, made an exception to the adjusty rules of Is society to continue to endure this evil law at coroners' inquests? Ought he not without making an effort to through it of,to be treated as a Fellow of the College of a calamity almost as fatal in its results, Physicians, or a member of the College of as the plague of the cholera? Whatever is Surgeons, would be treated under similar circumstances? Take the case of either of those legally qualified practitioners, and let us see what would be done. Say that one of the parties in question imagines that he has discovered a remedy for all diseases. He prescribes it in a multitude of cases. It is proved by indubitable testimony, that death, on several occasions, has been the dreadful result of the use of the medicine. Still the practitioner persists. He puffs his own skill, extols the power of his nostrum, and directs the medicine to be again taken. A chemist supplies the drug, in conformity with the direction of his employer. The unsuspecting patient swallows the poison and dies. An inquest is held on the body. Who was guilty of the manslaughter in this case? The chemist or the doctor? The principal or the agent? There can be but one reply to such a question.

But is it manslaughter ! Is it not murder ! We repeat the deliberate and solemn inquiry,-Is not the person who kills under the circumstances we have just stated, guilty of committing the crime of murder? We believe, that some of the best-informed jurists in this kingdom will answer in the affirmative, as we are not aware that any line of distinction can be drawn between the man who, in order to make money, destroys life by poison, and the man who, with a view to enrich himself, plunges a knife into the bosom of his neighbour.

ject further, with reference to any inquests which have been recently held, but we hope was taken at the late inquest on the body was referred to in the Globe newspaper

secret in medicine is based in knavery, and we unhesitatingly state that the time ha come when the system of quackery in medicine must be put down by the arm of the law. At any rate an attempt shall be made to ascertain whether the law be powerf enough to arrest the proceedings and subvert the machinations of a few mercenary and sanguinary adventurers, who now, to the disgrace of the medical profession of England, circulate their baneful and odious trash under the sanction of a Government stamp. Cannot the members of the profession petition both Houses of Parliament for the suppression of quackery? Av. can they! and with every prospect of succes:. In order to accomplish this object, however. there must be co-operation among medical men. Unity of action and energy must be manifested in giving the proceedings proper publicity and influence. If they consider that quack medicines ought to be sold, let them remain passive. If, on the other hand, they consider that the use of quack medicines is injurious to the welfare of society, and is the cause of death to hundreds of their fellow creatures, they are called upon by every sense of duty, justice. and humanity, to take immediate measures for the suppression of this no longer supportable evil.

THE Charter of the Metropolitan Uni-We shall not at present pursue this sub- versity will be laid on the table of the House of Commons on or before the 24th instant. A letter, written by Mr. WARBURTON, on to be able to publish in the next number of the subject of the contents of this instru-THE LANCET, a report of the evidence which ment, to the Lord Provost of Edinburgh,

about a week since. In the absence accurate information on the expect, Mr. WARRURTON has merely adverted to what may probably constitute some of the conditions of the Charter, in general terms. Mibe assured, that no member of the legislature could have been consulted with greater advantage than Mr. WARBUR-Tow. At any rate, that gentleman will have he consolation of knowing, that if the new Charter should fall short of the expectation of the literary portion of the public, he will in no respect be concerned as the author of the disappointment. It is deeply to be regretted, that Ministers should feel that they are too tightly bound down by old customs to make the Parliament acquainted with the principles on which they are about to exercise the royal prerogative in founding a Metropolitan University. It is ever the case in this country, that although we see the coming evil, we have not the mower to avert it, though, to be sure, after it has arrived, we have the privilege of complaining, which must be a great consolation to the neople of a free nation.

The following is the statement which appeared in The Globe :-

" EDINBURGH TOWN COUNCIL, TUES-DAY .- A letter from Mr. Warburton, M.P., in answer to a letter from the Lord Provost, was read, in which he assures the Council that no one could be more anxious to prevent the establishment of any new monopoly of teaching, and to see instituted some uniform system of medical instruction and examination, to serve as a basis for granting to persons properly instructed and examined the enjoyment of equal professional immunities in every part of the United Kingdom. Whether such a plan could be carried into effect by means of any Crown charter, might reasonably be doubted. He thought government would scarcely be justified in delaying to constitute the proposed new University of Lon-don, for the purpose of maturing beforehand, and incorporating with the scheme of that university, a comprehensive measure of medical reform. The Government, he thought, should constitute the new University, investing it with all the privileges appertaining to such institutions, reserving to itself the power of modifying its laws and fordinances, so as to render them generally consonant to any general plan of medical

after be approved of. in points, he was not int that he was aware of bets of specifical schools het no medical achool whatev entioned in the charter by er of importance for which the Landon University was contouding was the Landon University was that no teacher of any medical school, and that no teacher of any hospital shall be a member of the Board of Examiners. The Council directed copies of this letter to be communicated to the Secretary of the University for the information of the Senatus, to the Royal College of Physicians, and the College of Surgeons.

A BODY of young gentlemen having admission to the halls of the University of Lundon, have, after the lapse of a month, come forward in aid of the plea that public examinations should form an imperative feature in the constitution of our governing medical bodies. These gentlemen formed no part of the meeting of medical students who were assembled at the Crown-and-Anchor Tavern on the 18th lustant, for on that occasion the resolution for a petition to the House of Commons in favour of public medical examinations was carried unanimously, and the Chairman was directed to sign the document on behalf of the meeting, without ten hands being raised against the proposition. There is this difference, however, between the proceedings of the thousand and some hundred students who were assembled in the Strand, and the party of students who have since done something else in support of the demand for public examinations. The prayer of the one must be regarded by all as the emanation of a noble courage; the protest of the other is the result of what too many will . ascribe to youthful fear. The demand of the one is addressed to the House of Commons; the decimation of the other to the House of Apothecaries. The car of "marked men" has been raised at the University of London, and the timid and the apprehensive have fallen at the feet of the Examiners at Blackfriars-bridge, with

ESCHEUL LE

College.

this assurance: "We aided not to the con"demantion of your secret "Seconds in
general, or of your put an existing of
"our fellow student Ms. Second in par"ticular."

In speaking of the document, just submitted to the view of the Apotheraries' Company as an aid of the prayer,—and a most valuable aid it is,—of the great meeting of students, we do so from regarding it as an important proof of the iniquitous power and influence possessed by those secret tribunals which can, by exciting the terror of some candidates for examination, extort such a declaration from one third in number of the intelligent students of the most liberal public seminary for instruction in the kinedom.

WHEN a black man encounters a lion, or meets with a bull, he lies down on his back, and pretends to be dead, believing that the giant animal will then only smell and pass on. In the College of Physicians,-to go from a great topic to a little one,-Sir HENRY HALFORD enacts the trembling man. and medical reform the lion, and whenever the lion wags his tail, the cunning President pretends to sleep. But the lion will eat him up notwithstanding. The last occasion on which Sir HENRY " slept " in the chair, was during the late motion "that " Licentiates of five years' standing should " be eligible to be balloted for as Fellows." The mover and seconder having enforced the proposition as a measure of reform which was particularly appropriate at a moment when it was desirable to convince the Government that the disposition of the College was decidedly liberal, arguments in support or reply were awaited, or a tacit assent at once to the motion. However, it had been arranged beforehand by Sir HENRY, that nobody should reply, that the President should prelend to sleep, that every refractory fellow should be borne down with a cry of "question," and that even this trumpery motion for reform should be premptly rejected by the ballot. True to the word of command, mercesolution was acquired by a majority of nearly three to one. The result was

The majority was partly composed of the following members of the Halford faction, samongst others:—Drs. Latham, Wayersteld, Watson, Hue, Fanny, Madmickael, Tunnen, and George Major Bracket, Tunnen, and George Major Bracket, whose name deserves to be written in dail,—while The, Cuarisans, Sarmous, M. Garcon, Horney, and even Dr. Paris, having begun to see the signs of the thung, purposely staid gwey. Drs. Latham and Watson were particularly consulcations in

their outcries against any discussion of so

contemptible a subject as reform in the

Ur to the present hour, we have received no denial from Dr. W. Cummin, of the "Aldersgate School," of the correctness of the allegation, that he is the official colleague of Dr. Macleon in editing a journal which has been systematically devoted, from the first moment of its existence, to slandering the general practitioners in medicine in this empire, and, latterly, especially, to calumniating and vilifying, and fabricating falsehoods directed against, the characters of the students of medicine assembled in the motropolis.

LATE ELECTION

AT THE

RICHMOND HOSPITAL, DUBLIN.

We had not room last week for any part of the letter of our correspondent Observafor in reply to the letters of Messys. CrampTon, Colles, and Carmichael. We now, however, insert an analysis of its contents:—

Observator says that he felt it to be a matter of duty to publish the account which appeared under his signature.—not designing to inflict obloquy on the gentlemen concerned, but to describe facts with fidelity, desiring at the same time to afford the implicated parties an opportanty of publicly rebutting, if possible, the statements which prevailed against them in Dublin. He says that he believed and still believes that his description of the former proceedings as regards hospital elections, of two of the Commissioners, Messrs. Crampton and Colles, were such as should have prevented their nomination on

this occasion, and he alleges that those press like a sentiments on political subjects, two Commissioners in their reprinted to Observation with the whatever Mr. Adams, relieved themselves from the column of the may have expressed, he always voted in allegation that they are "jobbers in public Dublin for anti-referent randicates. Observations of the column of the allegation that they are "jobbers in public medical offices." For instance, he says that at the Meath Hospital, Mr. CRAMPTON and three of his apprentices (one c nephew) fill four of the six medical offices. Observator argues that the appointment of the "Commissioners," though denied, is proved by their admission that they carried on an " official " correspondence with the governtent on the subject of Mr. Adams's fitness for the vacant office. He adds, "I beg also most distinctly to state that Mr. ADAMS was not a candidate until after the Commissioners were appointed," Mr. ADAMS himself declaring to his friends that it would be useless to annoy himself by any application on the subject, as he would have no chance of success with the present Government; and Observator says that he has reason to believe that Mr. ADAMS became a candidate solely in consequence of receiving a communication from one of the Commissioners immediately after their appointment. must, however, be perfectly plain to Observator, that some of the statements in his letter form no reply to the third paragraph of the letter at page 680 of THE LANCET.

Observator stated in his former letter that the commissioners wrote to the government, recommending Mr. Adams's appointment on the grounds that, it was necessary for the support of "the Medical School of Dublin." He says, "I now reassert that they did do. This official letter was in Dublin." Mr. Adams's own possession for some days, and he took great pains to exhibit it, as a trophy, to his friends, more especially to his pupils, as evidence in favour of his capability as a lecturer."

With regard to Mr. Carmichael, Obser-

vator thinks that the following passage in Mr. C.'s letter justifies a considerable portion of the remarks made on the resignation of Mr. CARMICHAEL: I resigned my situation of attending, for that of consulting surgeon; because, by doing so I secured the appointment of two gentlemen, whose long connection with the hospital, and well-tried competency and worth, had been fully established; while, by the arrangements that have been subsequently made, I shall continue my visits to the hospital, &c.

With respect to the remark of Mr. CAR-MICHAEL on the long connection of Messrs. Adams and M'Donnell with the Hospital, Observator says, " I am well aware that those gentlemen have been attached for some time to a school in the neighbourhood of the hospital; but it is a perfectly distinct establishment, and not even situated in the same street with it; nor did they ever hold in it

pater was not the author of the letter in the Freeman's Journal, not was he aware of its existence until he read it as a note to Mr. CARNICHARL'S letter.

Observator concludes by saying,-"You have mentioned in a late number that the authenticity of the petition presented to the Government, purporting to come from the Sisters of Charity, in favour of Mr. FER-RALL, has been denied. I believed the petition was genuine.

We have here reduced into a comparatively brief space, those points in the letter of our correspondent, which we deem it fair, apart from the authority of his name, to publish in reply to authenticated documents, adding that while we know our correspondent to be a gentleman of the highest respectability in one of the professional circles of Dublin, there can be no doubt that he was misinformed on some points discussed in his former communication. With regard to Mr. CARMICHARL, we feel bound to say that we have never before heard even a charge of jobbing in medical elections brought against him, and we are perfectly sure that no surgeon in these kingdoms will hail with greater pleasure the adjustment of medical law and hospital appointments on a just and honourable basis, with greater delight than that gentleman. At the same time we express a belief, founded on pretty good grounds, that no very long period will elapse before the task of exposing errors of medical migovernment under the present system, will no longer need to be one of the duties of the medical reformers of Dublin.

PRESENT TO SIR CHARLES CLARKE.

To the Editor .- Sir, You have been uncessing in your endeavours to elevate the medical profession in public estimation, by fearlessly exposing, on the one hand, its corruption and majoractice to ridicule and contempt, ask as the after, materially por moting its interests by showing a prosper worthy liberality in commending good coduct, and i, therefore, am convinced that you will derive a satisfaction in communicating to your numerous readers the followeven the offices of assistant surgeon." Re- ing event, so honourable to the eminent inpecting the testimony of Mr. CARMICHARL dividual who forms the chief object in it, that he has always heard Mr. Adams ex- which has lately taken place in this county.

Sir Charles Clarke, ever since he became i felt much at a loss to elucidate the mystery, one of our land-holders here here resided as my patient said that Mr. Evans Riadore amongst us during the green prison of war sound unknown to him, and that he each year, and it is not surprising that his wigh professional character should have prompted not only the medical practitioners in his neighbourhood to seek his advice in all cases of difficulty and danger, but that his council should be equally desired by our nobility and gentry. His active disposition made him always ready to attend to the calls of distress, and, to his credit be it told, he has been in the constant habit of lending his valuable services to all those who have sought his advice, without even excepting a fee. In consideration of this liberal conduct, the great bulk of the ladies of Norfolk unanimously agreed to present Sir Charles with a piece of plate, for which a large subscription was immediately made, and an order given to Storr and Mortimer, the goldsmiths, in Bond-street, to execute the same from a design made purposely by Chantrey, the eminent sculptor. I have the honour to be, Sir, your obedient servant.

CHIRCRGUS.

--- House, Norfolk, Feb. 12, 1836.

KING'S COLLEGE, STRAND.

To the Editor .- Sin, -As your numerous readers are extremely anxious at this moment to become acquainted with every circumstance that can elucidate facts relative to the conduct of certain individuals who pretend to be liberal, you may perhaps think it worth mentioning that the Worshipful Company of Apothecaries are pro-prietors in King's College, Strand. This simple fact may of itself be sufficient to account for the King's College students having come forward on the late occasion to land the disinterestedness of the Rhubarb Hall examiners.

I have also heard it rumoured, that in consequence of the want of money at the institution, Sir Henry Halford has been making an indirect application to the proprietors of the Drug Shop' in Blackfriars, to get them to purchase some more King's College shares. I am, Sir, yours, &c.

AUSCULTATOR. Ficcadilly, Peb. 16th.

PROFESSIONAL ADVERTISEMENTS.

To the Editor .- SIR,-While paying s professional visit this morning to an elderly gentleman of fortune, a very small publi-cation, showily bound and gilt, containing three "Introductory Lectures," by Mr. Evans Rindore, was placed in my hands.

could in no way account for the present. I thought at first that there must be a mistake, but in the title page it was plainly enough addressed

"To - Esq., F. A. S. From the Author."

I then suggested that there might be another F. A. S. of the same name as my patient, or that Mr. Evans Riadore, being an F. A. S. himself, he had sent his brockure (a scarcely allowable proceeding, however) to the rest of the fellows; but, on examining the list, neither of these surmises was found to be correct. Upon a cursory examination of these lectures, I observed that they were composed with a considerable regard for effect, and that the author's address was duly given. Now, Sir, I beg to inquire the meaning of all this; and whether Mr. Evans Riadore has presented his introductory lectures to any other gentlemen who are totally unknown to him; and, in fine, whether it is becoming in a member of a liberal profession to follow in the track of the circularcirculating wine-merchants and merchanttailors of the metropolis? - I am, Sir. yours INVESTIGATOR.

London, Feb. 16, 1836.

METROPOLITAN MEDICAL UNION.

To the Editor of THE LANCET.

Sir,-In my address on the state and wants of the medical profession, delivered in the Council Room of the Town Hall, lpswich, in the year 1834. I most earnestly recommended that a provincial association, similar to that already existing in the western division of the kingdom, should be formed. This, with me a very favourite and important object, has been most happily accomplished; but it seems that something yet remains to be effected. The western and eastern associations require a point or bond of union; and where could this be so completely established as in the metropolis? I do most sincerely hope that some leading members of the profession in London will immediately set about the formation of a Metropolitan Association, similar in principle to the Eastern and Western associations. For general and literary purposes we might unite, while we may hold our annual meetings in our own provinces, with the exception of every third or fourth year, when we might meet our metropolitan brethren in London.

Favour me by allowing a space in the pages of THE LANCET for the insertion of this suggestion, and if it should be so fortunate as to meet with your approbation, I trust that you will support it with your

838 GUY'S HOSPIT .- MR. WATTS. - MEDICAL CORONER. - INQUESTS.

wonted ability. I have the henour to re- to connive at and applaud the ungentlemanly main, Sir, yours very respectfully. J. BEDINGFIELD.

Stowmarket, Jan. 26th, 1836.

EULOGISTS OF RHUBARB HALL.

674

To the Editor of THE LANCET.

SIR,-In Roderick's journal of last week and is between war,—or they might perhaps, it wosers any processional injury, not to ere this, have been enabled, with the aid of point out the system as one which is degradal little favour at court, to pass the ordeal at high to the profession, and injurious to the Rhubarb Hall,—have got up this document poor. I am, Sir, your obedient servant, expressly to court that very favour. I am sorry that their abilities and diligence need Frampton-upon-Severn, it. In that document they term the 94 who have signed it, a "large majority" of the students of Guy's, but to say the least of it. this is untrue. They also call the proceedings of that meeting "ill judged and riolent," and state that they were "characterized throughout by party violence, which is notoriously false. Now, Sir, from which is notoriously false. which is notoriously taise. Now, our non-the admission of two individuals whose I beg to state that the Coroner for hames are attached to that document. I can assert that neither of them was present at the meeting; consequently they rely on the reports of others in making the allegations of a leagth of time. I am, Sir, yours, to which they have attached their names; obediently, and I believe that very many more, if not the majority of those who signed that paper, were not present at that meeting; and I can positively say that not a few repent having signed it; I have learnt this from their own lips. In addition to this, I may remark, that Messrs. Muggand and Bent induced several javenile pupils (fresh from the country) to sign the paper in question, solely on the ground that they could not do wrong by following in the footsteps of their seniors. These young gentlemen will learn wisdom from experience. I refrain from saying any thing more on the subject of this "protest," than that we are greatly surprised in the Borough that any medical students, of whatever party, should be found

and puttouthe manner in which the worshipped extra mer at Apothecaries' Hall acted when he adestioned god rejected Mr. Smith. I am, Sir, your very beaucafully.

A Gre's Agents A Student.

Guy's Hospital, Pob. 1994, 1836.

NOTE FROM MR. WATER To the Billor. -Sir,-On reading over my litter in your is printed a document headed "Protest of excellent publication, I beg to say that I the Students of Guy's Hospital against the committed a quite unintentional mistake, late proceedings at the Crown-and-Anchor" when I stated that I had attended nine said by Roderick to have attached to it the parishes for eighteen years. Several of them signatures of 94 of the students of that I have so attended, and others in intermehospital: now Sir, I think it right that diate spaces of time. This was what I deyou should be acquainted with the hole-and corner manner in which this "protest" to assure you and my professional brethren has been got up by its promoters, Messieurs that my object in giving publicity to the H. C. Muggand and J. Bent. These buzzing Wheatenburst Poor-Law-Union proceeding. busy bodies, who attend to every person's was not with the slightest intention of doing affairs but their own, - or they might perhaps, Mr. Moseley any professional injury, but to

Feb. 17, 1836.

A STUDENT OF MEDICINE.

MEDICAL WITNESSES BILL.

To the Editor .- Sir, I enclose you a copy of a Petition to the House of Commons, prepared at a meeting of the committee of the "Backs Medical Association," lately is id at Aylesbury. It is now in course of signature, and will shortly be ready for presentation. The support of its prayer will be carnestly requested of the command borough members. I have the honour to be, Sir, your obedient fervant,

ROBERT CERLY, Hon. Sec.

Aylesbury, Feb. 15, 1836.

"." The petitioners draw the attention of quently, a source of useless expense, and

^{* 94} does not form a fourth part of the number of 400, which Guy's Hospital used the House to the fact that a coroner's into boast that it fostered per session. No quest, without efficient medical evidence, wonder that medical reform is a repugnant, can be but an empty form, and is, consetopic in some nooks in that quarter.

The prompiness and spirit with which this petition has been framed, deserve untversal imitation in the profession.

HOUSE OF COMMONS.

Thursday, Feb. 18th, 1836 .- Mr. WAKLEY this day gave notice of a motion for the 17th of March, for leave to bring in a bill for suppressing the sale of secret medicines, commonly called " quack medicines.'

NEW METROPOLITAN UNIVERSITY.

Mr. WAKLEY .- Sir, the petition which I those institutions, and I, for one, never hear.) will consent to the throwing of power into the hands of those who are hostile to the assure the House that the people of Scot-Institutions. (Hear, hear, hear.) But I laboured, should be removed as soon as would ask, in establishing a new university possible. in this metropolis, are we to have another

"in common with the medical profession, they consider it a great hardship ferred must be considered as a monopoly, that the law describe for the following for their important services. They considered as a monopoly, that the law describes of their important services. They are the chancellar of the Exchanged in the specifically, but the present the profession of the control of the Exchanged in the chancellar of the Exchanged is not here, as the promised me that are his intentions tail relief from the restaure, as the Honourable from the restaure in the Chancellar of the Exchanged is the restaure in the restaure should be framed in secret, and that the members of the House are to know nothing of its conditions until the charter has received the sign manual? If that be the case, the abuse of the Royal prerogative cannot too soon be corrected. (Hear, hear.) Indeed I hope the House will now interfere in this matter, and call for a draft of the charter to be laid before it previous to its receiving the sign manual, for such a legal and authoritative instrument should not be promulgated until at least the legislature has been made aware of its express terms. (Hear, hear, hear.) In the constitution of the new university, there can be no law that will compel the students to reside under the immediate observation of the professors, a regulation so essential to their correct hold in my hand is from the Rev. JAMES government and moral conduct; and yet, if ALEXANDER EMERSON, of the Hanwell in charter be one of exclusion, the students Schools, in the county of Middlesex. And at the private schools, where the dormitories he petitioner states, that he has heard with are under the direct control of the masters, surprise and regret that it is intended to will be excluded from the honours of the limit the terms of the proposed Metropoli- university, while those who are under no tan University Charter to two institutions personal restraint or moral management on in London. He therefore prays, that the little part of the professors will receive all House will take into consideration the injustice to other scholastic institutions, of only add that I trust Ministers will cangranting such exclusive privileges to those didly and honourably state to the House two. Sir, I will take the liberty of saying what are the conditions of the Charter, hea word or two on this subject. It is very cause although it is easy enough to say that well known that, in April last, it was resolved by this House that an Address should responsible should it contain any improper be presented to the Crown, praying that clauses, yet I do not know how they are to his Majesty would be pleased to grant a be made so, either to this House or to the Charter to the London University. On public, when the document is completed. I that occasion, a very large majority of the beg to observe, in conclusion, that the genmembers of this House voted in favour of tleman from whom this petition comes, representing that address; and solicitations quests me to state that he forwards it withcame from all parts of the United Kingdom out entertaining any political feeling whatfor the establishment of such an Universever on the subject. He has none. He is sity, in consequence of the manner in which sincerely attached to the Universities of the Dissenters had been excluded from the Oxford and Cambridge, and he desires only privileges of the universities of Oxford and that the public good may be consulted in Cambridge. Sir, I do not complain of the measures that may be adopted. (Hear,

Sir George said, that he could poper authorities of the Universities of land were extremely urgent that the disabi-based and Cambridge or adverse to those lities under which the Dissenters at present

Mr. Tooks said, he apprehended that the scholastic monopoly set up in this king-petitioner had put an erroneous construc-dom? And if a Charter is to be granted, tion on the intended Charter, the petitioner which is only to embrace two or three believing that because two schools only would

be neminated in the Charter, vis., the London University and King's College, that there fore the privileges of the Charter would be confined solely to those schools. The fact was that power would be served to the Examiners of the Mistropolitan University to mane, from time to time, such other schools as should be considered, from their standing and reputation, fit to be added to the number of privileged schools, and which should be entitled to participate in the benefits and honours to be derived from the Charter.

The petition was then ordered to lie upon the table.

THE NEW QUACKERY.—Westminster Medical Society, Feb. 13.—HAHNEMANISM.—We have room this week only for the following:—

Dr. Johnson having moved the adjournment of the debate on this subject last week, he was now requested to take it up. In doing so, he briefly said that homocopathy, he believed, was not the real subject of dehate on the last evening; but the proceed-ings then, rather formed an episode to it, something like a romance engrafted on history. He should leave others to hunt after the bubble, believing that it would burst in grasping. The doctrine of Hahnemanism was founded in error, and too often pursued in knavery, and he was convinced that the home-opathists treated the more urgent cases with our own remedies, and after our own fashion; yet who could expose the fact, for they took the precaution to furnish their patients not only with advice, but with the medicines. When they got old chronic or nervous cases, and not unfrequently imaginary ones, the doctrines of Hahneman were pursued. Chiefly from these reasons, he (Dr. J.) pronounced it to be a system of knavery and deception.

THE governors of the institution entitled the "Free Hospital," situated in Greville Street, Hatton Garden, will commit a gross error if they attempt to purify the air of their establishment by adopting the meathres prescribed in the motion "relating to Mr. Tweeder," to be submitted to their notice on Tuesday next. There is another way of doing that. Mr. Tweepie has in the most straight-forward, prompt, and honourable manner atoned for the exceedingly incautious act which want of experience allowed him.-in common with Mr. J. H. GREEN, Mr. BRANSSY COOPER, and some other exceedingly "orthodox" but older and therefore less excusable gentlemen,-

to commit, and it would be a most united proceeding, after that step, to inflict the supposed punishment on Mr. Tweeder. Let the point be hand distout prejudice; against the charge the cuite sure that the instigations of the surface that the instigations of the honourable-minded arbitrators. The chief parties in the affair should be advised to hesistate about pressing the matter any farther. The candour of Mr. Tweeder, in the admission of his error, and his attempt to redeem it, are, unless we be much deceive! worthy of imitation on the part of the gentlemen who may be his opponents. But why his opponents now?

The Birmingham Journal, of Feb. 13, contains a copy of a memorial presented to the King from the governors, trustees, and medical officers, of the Birmingham School of Medicine, containing a prayer, that " in " order to give additional weight and effici-" ency to the institution," his Majesty would become a patron of the school, and allow it to be styled the "Royal School of Medicine and Surgery of Birmingham." The King consented, through Earle Howe, and at a subsequent meeting of the an morialists. their "humble and grateful acknowledgments" were unanimously voted to be " laid at his Majesty's feet," for his condescension on this occasion.

From a Correspondent. It is generally rumoured at the London University and Hospital, that it is the intention of the Council of the College of Surgeons to grant to the late pupil of Mr. Liston, a public examination. Their amouncement of the fact is awaited with anxiety.

CORRESPONDENTS.

THE session of Parliament having commenced, it is earnestly requested that all communications, and WARLEY may be addressed to him at all residence, 35, BEDFORD SQUARE.

Mr. —. Nothing could have been more

Mr. — . Nothing could have been more spirited or proper than the application to the Board of Guardians, and the refusal &c., under the circumstances stated.

BRRATA - Page 785, line 15, for months read sects. Line 40, for liniments read invenents.

LECTURES

Vot. I.

0.8

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

YOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL.

Physician in Chief to the Honital de la Pitie, and Protessor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine of Paris.

LECTURE XIII.

ATROPHY OF THE BRAIN AND SPINAL MARROW.

(Continued.)

GENTLEMEN.-In our last lecture we were occupied with a consideration of drophy of the nervous centres. We described the anatomical lesions which chaacterize that lesion, and the symptoms tecompanying it, but we were not able to complete our subject in a single lecture; et us now then pass to the history of atrophy n other parts of the cerebro-spinal axis, ncluding the pons varolii, the cerebellum, and the spinal marrow.

Atrophy of the Mesocephale

(the pons) has been observed, but this is a very rare lesion; indeed we are acquainted with only one case of this kind; it has been sublished by M. CRUVEILHIER, to whom we we so many interesting facts connected with pathological anatomy. In the case 10w alluded to, M. CRUVELLHIER found the 10ns varolii considerably deformed; it was A least one-third smaller than we find it in the normal state; this diminished volume of the mesocephale coincided with a remark thle atrophy of the anterior pyramidal body m the left side. The subject of this observaility than an atrophy of the annular pro- of Nicussens, we find it has lost in two di-

tuberance. The intellectual faculties were intact; the individual seemed capable of reasoning and judging as perfectly as most men, but a remarkable phenomenon manifested itself in the functions of the organ of language; the patient was quite dumb, incapable of uttering articulate sounds to express his wants, his desires, &c.; yet M. CRUVELHIER remarks that before the first symptoms of hemiplegia had set in, this individual spoke perfectly well. In our former lectures you saw an impossibility of speaking connected with other lesions of the nervous centres; with congestion, hemorrhage, encephalitis, &c. Here the organic change was quite of a different nature, yet the symptom to which it gave rise was the same; another proof of what we have said on the frequency with which various lesions of the brain produce an identical derangement of function.

We have now touched upon the history of atrophy as it manifests itself in the cerebrum and mesocephale; but if we desire to attain an intimate knowledge of this lesion. and avoid all source of error in the manner of estimating its degree, or even sometimes its existence, we must remember that certain parts of the cerebro-spinal axis exhibit a marked difference of volume, according as we examine them at different periods of life. It is certain that the nutrition of the nervous centres is not the same in all individuals and at all ages; hence arises a difference in the

Form, Volume, and Consistence of the Nerrous Centres

with which we should be acquainted, otherwise we may mistake a normal modification for an organic lesion of the brain. You will find this subject treated in a masterly manner, in the thesis of M. CAZAUVIERL, to which we have already more than once alluded. You will there find it proved in the clearest manner that the volume of the brain differs as we examine it in the child, the adult, and the old person. In extreme old age the dimensions of the cercbrum are eviion was affected with hemiplegia; half the dently modified; if we measure the diamenody was paralytic, although no other lesion | ters of the brain, in a person far advanced misted to explain the modification of mo- in life, at the level of the centrum ovale of

rections; the transverse and longitudinal completely absent, the hemispheres of the diameters of this part are diminished by cerebrum are equally absent at the same some lines; the brain is less than that of an time; the disappearance of one sportion adult, both in its thickness and its length. seems necessarily to bring with it the ab.

This difference of volume is not confined to the portion of the brain just mentioned. We the individual is totally incapable of living find a reduction of bulk in various other im- when separated from the mother-stock; portant parts; thus the corpora striats, the malformation, carried to such a degree, adoptic thalami, the mesocephale, all these mits of fetal life and no other. The child differ as we examine them in the young perishes of necessity a few hours after it person, in the adult, and in the old man. The assertions we have just made are not mere ideas, vague and imperfect maxims, unsupported by proof; they are founded bellum has been more or less absent, alupon accurate and repeated measurements which have been made of these different developed in a normal manner; a case of portions of the brain, at different periods of this kind, which is perhaps unique in the

There is, however, one circumstance connected with this subject so remarkable that we cannot pass it over without notice. While the various parts of the cerebrum increase from childhood to adolescence, from youth to full-grown manhood, and In its place nothing was found but a quanthen diminish in advanced old age, the tity of scrous sluid contained in the memcerebellum is the only portion of the brain branes; on each side a pedancle, not larger that does not undergo any change,—that than a pea, was attached to the corpora remains the same in old age, as at any other restiformia, all the rest seemed replaced by a

period of life.

The reduction of the various diameters of tenerum was absent, and the movement the cerebrum in old age has also been estating the content was absented, and the movement the cereblished by another mode of investigation. The properties of the case of cleven years: thus you see that who had passed their seventieth year, the agenesia, or total want of the cerebellum, specific gravity of the brain is reduced by does not necessarily render existence imple to the from the average weight of the adult possible, provided the other parts of the brain. ("Anatomy of the Nervous System pervous centres be well conformed. The in Vertebrated Animals," t. 11, p. 620.) individual may even live for a considerable This diminution of the normal volume is length of time; the child here was near certainly connected with a change of func- twelve years of age, and we have reason for sition depending on individual conforma-tion, the influence of age, &c., we may be bable the child could have survived so long. What were the phenomena observed durfunction whose causes are now involved ing life in this case of complete atrophy of in obscurity because the examination of the the cerebellum and incsocephale? dead body does not reveal any appreciable effect did it produce on the intellect? lesion to which we can refer them. Let us modification in the function of motion? now turn to

Atrophy of the Cerebellum

in the brain, less a true atrophy or diminu- The motility was also modified; the power tion of substance once well conformed, than of motion was considerably weakened in the an effect of imperfect development. The lower limbs, which did not possess their reduced volume of the cerebellum or spinal natural force and wigour: hence the him marrow, then, depends, not on a lesion of was unable to support itself with any firm nutrition, but on a diminished activity or ness; it fell down frequently; the legs crossed each other during walking, and were moved first remark we have to make, in connection in an irregular unateady gait. At length with atrophy of the cerebellum is, that in the child was compelled to confine itself alall cases where the cerebellum has been together to bed, and after some time was

has been placed in relation with the external world.

Cases have been observed where the cerethough the hemispheres of the cerebrum are annals of the science, has been published by Dr. COMBETTE; you will find it in the Rerue Medicale, No. for April, 1831. Here we find the

Cerebellum completely Absent.

serous sac. The pons varolii as well as the The reduction of the various diameters of cerebellum was absent, and the individual tion, and perhaps the time may come, when, considering the disease as congenital, for better acquainted with the normal dispo- bad it been acquired, had this absence of sition of the several parts that compose the the whole cerebellum depended on an acbrain, and with the varieties of this dispo-tual destruction of the nervous substance

The intellectual faculties were obtuse, though not to a remarkable degree; the answers slow and difficult; the whole counand spinal marrow. Atrophy of one or tenance expressive of stupidity: in a word, both these portions of the cerebro-spinal the child, though not exactly idiotic, atili axis may be, as we have already seen it to be showed a deviation of the mental powers.

zontal position: thus you see the modification of motility consisted in a gradual abolition of motion : to this were joined epileptiform convulsions, which continued for some time, and finally carried off the patient. The sensation of the integumental covering was not modified in any way whatever. There was no increase of sensibility in the commencement, no obtuseness or diminution of feeling, even when paralysis was most complete: the senses also remained intact. The child could see, hear, and taste in a perfect manner. The functions of nutrition, on without any notable disturbance; how-

gans? Gentlemen, the uterus, the fallopian sity bring after it a lesion of generation, tubes, the ovaries; in a word the whole generative system was normally conformed; de Médecine, p. 99, you will find a case of sex, and was given to masturbation.

an instant and consider what general con-clusions may be deduced from the phe- or any derangement of the generative appathe mental faculties may even be moderately developed. Secondly. The power of Atrophy of the Cerebellum on one Side, and motion in the lower limbs was lost; hence we conclude that the cerebellum acts on the faculty of motion, and is more or less neces- and its effects, we stated the curious, though sary to its perfect accomplishment. Thirdly, well-established fact, that when effusion of There was no paralysis of sensibility, and blood takes place simultaneously into oppohence the general feeling is not connected site sides of the cerebellum and the cerewith the cerebellum.

bellum, as seen in the case just detailed, we cerebrum), the latter organ acts alone, seems may have a

Simple Diminution of its Volume.

earts of the organ are generally reduced in bulk. In the case communicated by Baron PORT of this latter author, the posterior Dortion of the cerabellum was considerably diminished. Here the lesion was accompanied by a change of form in the osseous parietes, and could be discovered by an extal organs were also imperfectly developed. | ence over the motions of the body; its effect

unable to stir, even when lying in an hori- GALL moreover asserts, that in individuals who have been castrated, the external occipital region undergoes a diminution of volume. According to him this phenomenon is constant; however, we would not undertake to render ourselves responsible for its accuracy. In page 271 of his great work on the anatomy of the brain, you will find another example of coincidence of a diminution of one of the lobes of the cerebellum, with a diminution of the testicle in the opposite side of the body; but he does not mention whether this partial atrophy of the cerebellum was attended with any modifiof circulation, and respiration, were carried cation of the intelligence, of sensibility, or of motility. Carried away by the pursuit of a ever, the child is mentioned as being weak favourite idea, he sees nothing but the reand delicate in constitution; a circumstance which is conformable to the opinion of older may present, without occupying himself physiologists, who have attributed to the with the phenomena of still more important cerebellum the power of regulating nutritive systems. Other authors mention cases of atrophy of one or both lobes of the cerebel-In what manner were the generative lum, yet they do not mention any change functions influenced? This is a question of in the form or disposition of the genital orpeculiar interest in the present case, he- | gans, or any derangement in their function. cause the cerebellum was completely absent. Indeed it is certain that a congenital lesion How then do we find the reproductive or- of this part of the brain docs not of neces-

and, moreover, the child, who, if you remem- diminution of one of the lobes of the cereber, was only eleven years of age, showed a bellum, where the principal phenomenon precocious tendency to the passions of her was a loss of sight (and remember how blindness is connected with numerous le-The case we have just noticed is one of sions of this part of the brain); the indittoo interesting a nature not to dwell upon it vidual was an idiot from birth, but did not nomena by which it was accompanied ratus. An interne, M. Peror, has also de-They are the following: -First. That aboli- scribed a similar case of partial diminution tion of the intelligence does not necessarily of the cerebellar lobes, and here again we attend complete absence of the cerebellum: do not find any lesion of the genital organs.

its Connection with Paralysis.

When treating of cerebral hemorrhage brum (as, for example, into the left lobe of Instead of complete absence of the cere-the cerebellum and right hemisphere of the to absorb the power of the former, and loss of motion occurs only on the side opposite the lesion in the cerebrum; on the other Sometimes this atrophy is general; all hand, when hemorrhage takes place into the substance of the cerebellum alone (the cerebrum remaining intact), we have constantly paralysis in the opposite side of the body. It is remarkable that the same phenomena occur in atrophy of the brain; thus, when the cerebollum is atrophied on the left side, and the cerebrum is, at the same time, diminished in volume on the right ternal examination of the head. The geni- side, the former does not exercise any influseems lost in that of the cerebram, and we tween the parietes of the vertebral cavity. opposite the lesion in this latter portion of the nervous centres. We have examined the archives of our science to determine how far the law now announced, which is fully true with respect to cerebral hemorrhage, may be applicable to atrophy of the cere-bellum. We have been able to discover only three cases of atrophy of one hemisphere of the cerebellum, coexisting with atrophy in the opposite hemisphere of the cerebrum, and in all these three cases only one side of the body was paralyzed-viz that opposite the diminution of the cerebrum. One of these cases is recorded in volume fourteen of the Archives Générales de Médecine; it is also described in the thesis of M. CAZAUVIERL on agenesia; here the patient, a female, was affected with hemiplegia of the left side of the body; there existed in the brain atrophy of the left hemisphere of the cerebellum, and at the same time atrophy of the right hemisphere of the cerebrum. The second case was communicated to the Anatomical Society, hy M. Bonzy, interne in the hospitals, and may be found in the annual report of the Society for the year 1830; this individual had hemiplegia on the right side, but, on the left, motion and sensation were intact; after death were found atrophy of the right lobe of the cerebellum, and, at the same time, atrophy of the cerebral hemisphere on the left side. Finally, our third case has been published by Mr. BELL, of the Saltpetriere, in the " Bulletin" of the Anatomical Society for May 1831; the subject of this observabody. On examining the body, Mr. Bell. found a considerable atrophy of the right cerebral hemisphere, and a diminution of volume, with flattening of the left hemisphere of the cerchellum. In this latter case, the individual was subject to apoplectic fits, and here let us remark the coincidence of epilepsy with a lesion quite different from that to which it is commonly attributed.

Atrophy of the Cerebellum alone, or conjoined.

Sometimes partial atrophy of the cerebellum exists alone, or is accompanied with an opposite state of another portion of the cerebro-spinal axis-viz. hypertrophy of the spinal marrow. M. Hutin has given us an example of this kind in a journal, entitled, " Nouvelle Bibliotheque Medicale," t. 1, p. 34, January, 1824. Here the atrophy occupied the medullary centre of each lobe of the cerebellum; the white substance of the corpus rhomboideum did not exist, but that body was represented by a small pyriform, hard, brown-gray mass; the whole extent of the spinal column was hypertrophied; Imperfect Development of the Spinal Marrow. the chord, instead of leaving a considerable interval, as it does in the normal state, be- spinal marrow may present merely an in-

only find paralysis on the side of the body completely filled it, and was, at the same time, indurated. What were the symptoms in this case? The chief phenomenon was an excessive sensibility of the whole sking The patient was unable to stand upright, because the soles of the feet were too tender to bear his weight. When any part of the skin was touched, he gave signs of excessive sensitiveness, and even great pain, sometimes manifested by convulsive movements. At length the external world became, at every instant, a cause of pain; the unfortunate patient was unable to stir, or place himself in relation with a single object, and he at length died, wasted, exhausted, and literally worn down by painful sensations. This fact is a very remarkable one, and although the history of the case is given by M. HUTIN, with some details, yet we find no mention whatever made of the genital organs.

These are the principal facts we know connected with atrophy of the cerebellum; we may add, that the lesion may exist alone, or in union with atrouby of some other part of the nervous centres: thus, for example, it is not uncommon to find a diminished volume of the cerebellum coincide with atrophy of the spinal marrow. In some cases it is a true agenesia of the chord that we observe, not an arrest of development. Here we do not find any trace of the cerebrospinal axis; the cerebrum, the cerebellum, and the spinal marrow, are all equally wanting; and the fixtus, like those which we have already noticed, is incapable of sustaining an extra-uterine existence. This tion was paralytic at the left side of the lesion is denominated "Amyelia," that is to say, a condition in which

The whole Spinal Merrow is Absent,

while a fluid, contained in a membrane, somewhat similar to the meninges, fills its place, and the nerves, which in a normal state are attached to the chord, seem to derive their origin from the rudimentary membrane. We find, at the same time, two different conditions of the osseous parietes which enclose the chord. In the first, the bones comprising the vertebral cavity are involved in the same lesion as that which has affected their contents, and we find the whole cavity open at its posterior part, or more or less imperfectly formed in the different regions; in the second case, the vertebral canal has attained its perfect degree of development, although the substance of the chord may be reduced to its maximum of atrophy; this is the tame thing that we have already observed for the brain, phere absence of the encephalon coincides with well-formed skull, or with various lesions of the cranial parietes.

Instead of being completely absent, the

perfect development of one or more parts; | gaged chiefly the lumbar renfirment, which the lesion is then called "atelomyclia," and was reduced to the size of a common pen. may exist with a great variety of degrees. Thus in some cases we may find a greater or less portion of the spinal marrow divided, as in the fetus, into two leteral portions, from the absence of the gray substance that unites the two distinct chords; which, at an early period, constitute the spinal marrow. These two primitive chords or lateral portions form, by their approximation, a kind of farrow, which, at a later period, is transformed into a canal; this canal is really permanent in many animals, but in the human subject it is ordinarily obliterated at birth; however, it may persist, and then we find a canal of greater or less extent occupying the centre of the spinal marrow, commencing at the upper part, and seeming to form a junction with the fourth ventricle. In several cases the white or medullary substance appears to be perfectly well develoved, and the lesion of nutrition affects exclusively the gray matter of the chord. Is it to a want of development that we should refer the presence of a canal in each lateral portion of the spinal marrow? GALL described these canals as existing in the normal state, but this is now found to be an chest becoming finally implicated, respiraerror; however this may be, M. CALMEIL tion was rendered more and more difficult, other it was impossible to follow them be- less degree of paralysis. This loss of moyoud the cervical region.

Instead of imperfect development, we may find a

Simple Diminution of the Volume of the Smul Marrow.

without any change of its organization; this diminution may be either general or partial; when general, the lesion is very easily discovered. We see that the bulk of the chord sions of the nervous centres opposed to one is evidently reduced below the normal stand- another in their anatomical characters, but ard. M. MAGENDIE has recorded a case of not so different as you might be inclined this general atrophy of the chord, in which to imagine, in the functional modifications the lesion was accompanied by paralysis of which they produce. We have concluded the limbs. M. OLIVIER has also seen two the history of hypertrophy and atrophy-examples of the same kind; in one, the vo- We must now turn to another class of lelume of the chord was reduced to at least sions, where the number of molecules reone half of its normal bulk; in the second, maining the same, they present a change of the whole chord was one-third less than it consistence, and become either hardened or ought to have been. We have already resoftened. We have already touched upon marked, that atrophy of the spinal marrow several points intimately connected with may be partial, occupying only a small softening of the nervous centres, for it is abportion, or a particular region, of the chord. solutely impossible to lay aside the conside-You know that the portion of the nervous ration of ramollissement, to separate the pa-contres contained in the vertebral canal thological history and the symptoms of this presents a kind of swelling (renflement), or

Protuberance at the Origin of the Nerves

M. Hurin, the diminution of volume en- however, we must study ramollissement

In another case, cited by the same author, the brachial and lumbar protuberances were atrophied at the same time.

The Medulla Oblongata

(bulba rachidienne) may also be reduced to such a degree of smallness, as to seem wanting. M. CRUVEILHIER has described a case of this kind in a child, in whom the atrophy of the bulb coincided with an excessive density of this part; in fact, it presented almost a stony hardness; it was also accompanied by a conversion of nearly the whole substance into gray matter. We have already mentioned a case where atrophy of the cerebellum gave rise to loss of speech. In the case just mentioned a similar phenomenon was observed, or rather the child was affected with a great difficulty of speaking; she spoke excessively slowly; pronounced each word syllable by syllable. The power of the muscles that act on the larynx and pharynx was gradually abolished, and the child died from a difficulty of deglutition, joined to a loss of mechanical power of respiration; the muscles of the saw the lateral canals in the bodies of two and death took place in a state of true insane patients (Journal des Progres et des asphyxia. Indeed it may be laid down as Institutions Médicales); in one they existed a general rule, that atrophy of the spinal all along the two sides of the chord; in the marrow in most cases produces a greater or tion becomes gradually more extensive, more intense. The respiratory muscles are at length implicated in the general disorder; a difficulty of breathing sets in ; the patient soon loses the power of dilating his chest, and dies asphyxiated.

Ramollissement of the Brain.

We have now studied two principal leaffection, when we speak of various other diseases of the brain, as, for example, encephalitis, apoplexy, meningitis, &c. They which are attached to it. In cases of partial approach so closely in certain points, that atrophy, one or more of those protuberances we cannot trace a faithful history of the one, may be absent. Thus in a case observed by without frequently introducing the other; apart, if we desire to obtain a correct know- scertain, from either nurse or patient, the ledge of its progress, symptoms, and termination. We must examine it independently of inflammation of the brain, of abnormal injection of the nervous pulp, independently of congestion and sanguineous effusion. In a word, we must study this important lesion by itself, apart from all others, and we shall endeavour to push our investigations as far as the actual state of medicine will permit, although we may occasionally have to repeat our observations, and emptoy, again, certain illustrations which you have already heard in a former part of the course. We will commence with ramollissement of the nervous centres in our next lecture.

CLINICAL LECTURES

SURGICAL CASES,

DELIVERED IN 1836, AT THE

JERVIS-STREET HOSPITAL, DUBLIN,

RY

WILLIAM WALLACE, M.D., M.R.I.A.,

Surgeon to the Hospital, and to the Inturnary for Diseases of the Skin, Venereal Diseases, and Diseases of the Urinary and Genital Organs.

TETANIC SYMPTOMS, OR LOCKED JAW, RESULTING FROM INJURED NERI ES.

GENTLEMEN,-I will commence this day's lecture by relating to you the heads of a very rare and interesting case :-

Philip O'Neill,

A tall muscular countryman, of a sanguineous temperament, and very blue eyes, aged between thirty and forty years, was thrown down, while leading a cart-horse over Essex bridge, when the wheel of the cart traversed his left leg a little below its middle, causing a fracture of both bones, with a communicating wound. He was immediately conveyed to this hospital, and being placed in bed, was treated according to the common practice.

No remarkable symptom occurred until the morning of the seventh day, when I was much surprised to find the bandages and splints greatly deranged. I was the more surprised at this, as up to that period the position of the limb had not sensibly varied from one visit to another, nor did the patient complain, at any time, of any uneasy feelings from position or bandages. Indeed, every thing had progressed in the most favourable manner, from the day of his admission, until that on which the disbegun to granulate, and even to cicatrize. every time he attempted deglarition, a violent Although I made strict inquiry, I could not spasm took place in his threat, by which the

cause of displacement. The bandages were resulting definition and the sandage were resulting definition. The sandage were a proper section and thus the patient was left, and the relief and particular anxiety about 15 turns state.

On the fellowing morning, that is, on the cighth day lefts his admission, I found the

limb again displaced; and I was informed that he had had a very restless night; that there were frequent spasmodic twitchings in the fractured leg; and that he found it impossible to preserve it during the night in the position in which it had been placed.

Such was the commencement of a series of as untoward symptoms as any I have ever witnessed. I shall not detain you with the daily reports of the case, -suffice it to say, that this patient, who had been advancing in the most favourable manner for seven days after admission, died four days after the spasms commenced in his leg; that is, on the eleventh day after the injury was received. The spasms gradually increased, from the morning of the eighth day, and in the course of thirty-six hours arrived at a state which it is difficult either to conceive or describe. Spasm is a bad, or insufficient, term to use. The limb was convulsed, and so constantly and so much, that for scarcely a minute could it be kept either by the efforts of the patient or by the pressure of assistants, firmly in any one position. Indeed, all such attempts seemed greatly to increase the convulsion. It was not only tossed to and fro, but occasionally raised with convulsive force, even some feet, from the surface of the bed. The bandages and splints could no longer be kept on. The wound in the soft parts (which parts had now altogether lost their healthy aspect and had become pale and glassy) as well as the fractured bones, appeared to be quite disregarded, so violent were the pains which the muscular actions produced. The lower fragment of the limb was thrown during the spasms into every possible position; with regard to the upper, it was knocked about like the loose arm of a flail used by a thrasher of corn, at one time being bent forwards, at another backwards, or to one side or the other, at angles of various degrees; and the bones at these periods protruded at the wound to a great extent.

The convulsions of the limb in a short time extended upwards, and then the muscles of the thigh co-operated with those of the leg, in producing the most violent and unrestrainable tossing or dishing about of the whole limb. At the end of the second day after the spasms had commenced, his countenance acquired a tetanic aspect, and he began to complain that his jaws were rigid, and that he could not swallow. Upon placement occurred. The wound had also trying him with a little drink, I found that

violent and constant pain and spasmodic action by exhaustion from absence of all sleep, and from want of nutriment, his countenance became pale and sunken, and his pulse tremulous, rapid, and weak. But the spasms in his limb and all muscular rigidity having at the same time ceased, and the power of degluttion having returned, I could not avoid having some hope, notwithstanding the degree to which he had been worn, that a favourable change was about to take place. On the following morning, however, my expectations were dashed, by finding that the poor fellow was no more; that he had died a few minutes before I entered the hospital, that is about twenty-four hours after the muscular system had become quiet.

I examined the body on the subsequent day, and have preserved this drawing, and the following notes of the

Morbid Appearances.



"The muscular system in general is rigid. and the muscles are marked, as if in a state of contraction. His countenance still presents a tetrate aspect. The pupil of the right eye is confiderably more contracted than that of the left.

further progress of the liquid was tible is protruded one inch through the structed. The situation of the poor tible wound. This leg is some inches shorter than the other, and the state of the muscles and other parts is such, that the limb cannot be by any means devide the state of the muscles and other parts is such, that the limb cannot be brought to its natural length. Having made an incision in the skin, on the outside of the fore-part of the limb, both upwards and downwards, so as to increase the extent of the wound, and having dissected a flap on escil side, the bones are found to overlan nearly two inches. Having next removed the peronei muscles from the middle third of the fibula, the fracture of this bone is observed to correspond to the part where it is crossed by the fibular nerve, as it turns round to the front of the leg; and this nerve lies on the upper end of the lower portion of the fractured fibula, which end is remarkably sharp. The nervo in this situation, and for an inch or two above and below, is preternaturally vascular and much thickened, and the surrounding are soft parts infiltrated with blood, and diseased from suppuration having taken place among them. It is very evident (I have observed in my note of the dissection), from the manner in which the muscles covered and crossed the nerve and the sharp end of the fibula, that every time they contracted they must have pressed the nerve firmly against the bone.

" Head and Spine .- A quantity of a serous bloody fluid exists in the cavity of the arachnoid. The vessels of the membranes of the cerebrum, cerebellum, medulla spinalis, and oblongata, are very turgid. Great effusion between the pia mater and arachnoid-particularly on the superior surface of the hemispheres. An effusion of blood on the outside of the sheath of the spinal marrow, nearly opposite to the middle of the chest. The plexus choroides livid from congestion; some reddish serum in the ventricle; the substance of the brain very firm. and over-vascular.

" Abdomen. - The gall-bladder contains much bile. The capillary vessels of some of the small intestines are in a state of congestion. The intestines are, in general, irregularly dilated and contracted, the transverse arch of the colon, and the cæcum, are much dilated, and the end of the ilium and several parts of the large intestines are irregularly contracted."

Was this a Case of genuine Tetanus or not?

In many points of view it strictly resembled tetanus, but not in others, provided we confine our views of tetanus within the bounds placed by some to the characters of this discase-or, in other words, if we deny the name of tetanus to every disease which does not present certain symptoms, in general considered pathognomonic. The period at which the spasmodic symptoms set in, viz. on the seventh day, and when the wound "Right Leg. The upper portion of the was granulating and even cicatrizing, is the period and the state of the wound at which traumatic tetanus in general commences. The permanent rigidity of the jaws, the difficulty of swallowing, and, above all, the peculiar cast of countenance, were also in a high degree characteristic of tetanus. On the other hand, the manner in which the spasms commenced-that is, in the wounded limb, their gradual extension to the head, the absence of pain in the epigastric region, and of rigidity in the muscles of the abdomen, as well as of any decided spasms of the trunk, are all phenomena unlike what we commonly observe in genuine tetanus. The ceasation of spasms, and the restoration of the power of deglutition, so long before death, are also symptoms which I have not observed in true tetanus. Nor have we any good reason for supposing that in this disease the cause of mischief is scated, as was evidently the case in the present instance, in an irritated or injured nerve, or that there exists such a state of the brain as was on dissection observed in this case. Such are the reflections which occur to me, when I compare the case of O'Neil with the numerous cases of ordinary tetanus which I have witnessed.

The case of Hagerty, noted in the hospital case-book, seems to me to have many points of analogy with the case of O'Neil, and what is important to us on the present occasion, it furnishes those symptoms which have been considered pathognomonic of tetanus, viewing this disease in the common manner, which were wanting in the case of O'Neil; while O'Neil's case affords symptoms, considered equally characteristic of tetanus, which were wanting in the case of Hagerty. I shall read you the heads of

Hayerty's Cuse.

This patient, who was a labourer, aged fifty-four years, was admitted with the soft parts covering the left great toe, much contused and torn, and with a wound of the same shin, or of the front of the leg. These injuries had been caused by the limb having been jammed between a lamp-post and a cart. He had lost a large quantity of blood, and he complained much of pain extending up the leg. On the ninth day, when the wounds were suppurating and granulating healthily, the nitrate of silver was applied, by my directions, to some exuberant granulations on the skin. This application seemed to cause great pain, evinced by loud and repeated cries.

Tenth day. He still complained of pain, and he described it as shooting from the front of the foot and leg along the calf, ham, thigh, and back, up to the neck.

Eleventh day. He had several spasmodic twitches in the limb, which extended up the trunk.

Twelfth day. The spasms in the limb be-

Fourteenth day. The jaws were much more fixed, and the muscles of the neek and abdomen were very rigid. On this day he had frequent general spasms, commencing in the limb.

Fifteenth day. He was as on the 14th, with the addition of pain in scrobiculo

cordis.

Sixteenth day. Stiffness of jaws was increased, but the spasms were milder since yesterday. Slight drooping of the upper evelid; pain in scrobiculo cordis less, Salivation commencing, from the calomel and Dover's powder, which he had been taking since the twelfth day.

Seventeenth day. Rigidity of neck diminished. Rigi-lity of abdomen nearly the same. Had four mild spasmodic paroxysms

since yesterday.

Nineteenth day. Spasms much milder and less frequent; scarcely any rigidity of the muscular system; copious perspirations. Complains of sickness of stomach, or of what he calls a water-brash.

Twentieth day. Occasional, but very mild spasms. Rigidity of jaws, neck, and abdo-

men, diminished.

Twenty-fifth day. No spasms; no muscular rigidity. Suffers much from profuse salivation. Was discharged cured on the 16th of May, about six weeks after admission.

The Symptoms, if combined, in the foregoing Cases, are those of Genuine Telanus.

You may observe, that this case presented, as I have said certain characteristics of tetanus, which were wanting in the case of O'Neil. Thus, there existed in Hagerty's case, abdominal rigidity, pain in scrobiculo cordis, and convulsions of the trunk, during which the body was bent backwards; while certain symptoms were wanting which were found in the case of O'Neil, and which are considered equally pathognomonic as those which did exist. Of these, the most remarkwhich the absence of the tetanic countenant, which was prongly marked in O'Neil, and was partially in Hagerty simply by a drooping of the syelid, and this observable only on the strength day, and perhaps not deserving of the considered expressive of a tetanic countenance.

When the case of Hagerty was passing under my observation, the impression was made on me, that the symptoms originated in an inflammation or morbid state of the peroneal nerve, as in the case of O'Neil; that this inflammation had a limitenced in the nerve so low as in the dorsum of the came more frequent and severe, and he great-toe; that some of its branches, which

passed shrough the wound on the share had two violent paroxysms. One which he had heen irritated by the application to the nitrate of silver; the adaptive of the case-book. His body is so violently bent tritation had sub-relative extended along the scientic persist through the replication of the case-book. His body is so violently bent backwards, that his occiput and heels the scientic persist through the replication to the hed, his trunk and lower space, and up the high to the said-marrow; and that thence resulted the more general muscular affections.

Now it is evident, that if we combine the symptoms of the cases of O'Neil and Hagerty, we shall have all those that occur in the most genuine forms of tetanus. shall, however, have also

One most important Symptom present, which does not exist in ordinary Tetanus,

so far as I have had an opportunity of witnessing the disease for more than fifteen years in this hospital, so famed for accidents. I allude to a spasmodic affection of the muscles of the part injured, and it was with this symptom that the general spasms commenced in the cases of O'Neil and Hagerty; whereas rigidity of the muscles of the jaws. or of the back of the neck, without any pain or convulsion of the limb, however severe or trifling the wound may have been, is the almost uniform mode of commencement of what is called genuine tetanus. In support of this fact, let me recall to you from the case book of the hospital the heads of two or

Three Cases of Genuine Telanus.

Case 1 -Gannon, a strong and healthy child, aged three years, was admitted with a wound four inches long, which penetrated through the integuments, on the outer side of the kner-joint. The joint was not injured. A quantity of dirt and gravel was imbedded in the wound. There did not exist any apparent constitutional disturbance.

Third day. Suppuration commencing. Seventh day. Wound granulating at its upper angle, slongby at its inferior end.

The child looks pale and sickly.

Eighth and ninth days. Restless and pec-

Tenth day. Unable to open his mouth, and when he attempts to take a drink, a slight convulsion ensues, with a tetanic expression of countenance. The power of moving his lips, however, continues perfect, and when he is at rest, his countenance has not any tetanic appearance. No rightity of muscles of either right or abdomen. Evening. His countenance has, even when at rest, the tetania aspect. There exists a Pridity of the souscles of his neck and ab-Monen: and when a convulsion is excited by any attempt to drink, the head is drawn back, and, even when quiet, he is unable to bend it forwards.

Eleventh day. He had several convulsions during the night, when attempting to drink, but was quiet then not excited. His parox-ysms became mine frequent and more sovere during the day. Evening. He has had tion. Pulse 120.

his neck, back, upper and lower limbs, are hard and rigid. All the features of his face are violently contorted. His eyes are turned upwards and inwards. Subsequently, his breathing became laboured and stertorous, and afterwards so faint, that, joined with a state of insensibility, it was supposed he was dead. After a minute or two, however, he recovered, turned on his side, and called to his mother for drink.

These violent paroxysms recurred with an interval of an hour, until about three o'clock in the morning, when he expired.

Case 2 .- Scully, aged eleven years, received a deep punctured wound in the hollow of the sole of his right foot, caused by leaping from a height on a thick blunt hook. He leaped from an ass-cart on the pavement to fasten the trace, which had become loose by the hook falling out on the ground, and it was on this hook he leaped.

Second, third, and fourth days. Accelerated pulse, restlessness, pain in the head, perspirations, foul tongue, sick stomach.

Fifth, sixth, and seventh days. Seemed to be progressing to recovery.

Eighth day. Frequent yawning, of which he himself complained.

Ninth day.-In the morning complained of stiffness in the back of his neck, and difficulty of deglutition. No inflammation in his throat to be observed. No pain in fauces. -Mid-day. Muscles of jaws rigid. Considerable difficulty of opening his mouth; pain felt in the epigastrium, when he attempts to sit up. Muscles of abdomen slightly rigid. The tetanic aspect exhibited in his countenance by a wrinkling of his cycbrows and forehead, and by a divarication of his nostrils .- Evening. Irritability of stomach. Rejects his drink. Very frequent convulsive paroxysms; each lasts, however, only a few seconds; during these, the muscles of the back are contracted suddenly, and, by a quick jerk, throw forward the abdomen. Each paroxysm is attended also by a quick expiration, and an increase of pain, which he refers to the epigastric region, and which elicits a groan. During the intervals of the paroxysms, the rigidity of the muscles of his abdomen and neck continues. He frequently asks to be placed sitting up in bed, and when the attempt to raise him is made, he becomes from head to foot as rigid as a board. When he wishes to take drink, which he can do only while sitting, he is unable to bend his head forward, and asks impatiently his father to bend it. His skin in general is moist, and his face and breast are in a state of perspiraTenth day.—He had a paroxysm every five or six minutes during the night, and, on one of these occasions, the opisthotonos was so violent, as to raise him almost entirely out of the bed. The least exertion he makes, on turning him, or asking him a question, or even any sudden noise, produces a pa-roxysm; and, independently of any excitement, he has one every three or four minntes, but each lasts only a very few seconds. He complains of baving bitten his tongne, and often cries out with pain, which he refers to his loins. He seems occasionally to drop for a minute into a doze-his eyes half closed, but, in an instant, he awakes with a sudden jerk. His stomach is very irritable, and occasionally rejects its contents .- Evening. Paroxysms more frequent-during five minutes he had no less than ten; his pulse during the paroxysm is 138, in the interval 108. Bowels confined; makes no mention whatever of his foot. The wound is nearly healed.

Eleventh day .- Is extremely weak; paroxysms have been very frequent during the night, but they were not so violent, nor did he cry out with them so much, as before. his neck. Has a strong desire to drink, but says there is a stoppage in his throat. Com-plains of itching in his face. His fingers are not engaged during the paroxysms, nor are they rigid in the intervals.

Not to detain you longer with particulars, this child died in a convulsion, on the fifth day from the commencement of the tetanic symptoms, and some time previous to death, great dyspnæa, with delirium, set in.

Case 3 .- Sadleir, aged 30, a strong and healthy labourer, had his right hand jammed between two beams of timber, in such a manner, as to cause the phalanges of the three fore-fingers to be over-extended or flexed backwards, so as to produce a comnound dislocation of their articulation with flexor tendons were torn across, where they cover the joints, and the cartilaginous sur faces of the bones were visible. The metacarpal ends of the phalanges were thrown on the palmar aspect of the metacarpal bones. There was a wound between the thumb and fore-finger, about half an inch long, through which a mass of muscular flesh was protruded in such a manner, that it seemed to be girt by the orifice of the wound. The bleeding was trifling. He complained much of a sense of numbress, but of no pain. The parts were easily restored to their natural position, and the injury appeared then so trifling to him, that when the propriety of removing the fingers was hinted at, he expressed himself so strongly against an operation, that it was not further spoken of.

Third day, Suppuration with much tume-

faction.

Fourth day. Increase of discharge, which is rather thin. The skin of his hand and forearm presents a slight blush of red as far as the elbow.

Fifth day. Matter formed on the dorsum of the hand, in the course of the tendens, and discharged by an incision

Eighth day. Complained of soreness and stiffness of the jaws and throat. His tonsils seemed inflamed and enlarged. In the evening he complained of pain in the epigastrium.

Night day Stiffness and rigidity of his jaws, and leadility to open his month increased. Profuse and general perspirations. Has had two convulsive paroxysms; pulse 102; complains of no pain.

Tenth day. He expired this morning, immediately after a spasmodic paroxysm. It was reported that he had had a spasm, almost every hour, from the evening of the ninth day, until the morning of the tenth: that they became more and more severe; that during the paroxysms his face became almost black; that all night the muscles of the back of the neck and of the abdomen had been in a state of great and constant Complains of pain in his belly, and back of rigidity; that at first the spasms had lasted about one minute, but subsequently not less than a minute and a half.

En passant, I wish to observe, that this was one of the most rapid cases of tetanus which I have ever witnessed, and the violence of the symptoms was by no means proportioned to the rapidity with which the disease ran its course. The patient was kept under the influence of tartar emetic from the first appearance of the disease, until his death, and from what I observed in this case, I would never again think of trying that remedy.

In none of these cases, and if necessary I might detail to you many others, did the wounded limb attract attention, either by pain or spasm. Were there no other circumstance than this, to distinguish them the corresponding metacarpal bones. The from such cases as those of O'Neil and Hagerty, this alone would be quite sufficient; and if the latter cases are to be viewed as examples, they should be considered to form a variety distinct from the former.

There has been much discussion respecting what is

The Wounded Time which is the immediate Cause of Telanus. 2.00 475

You are all aware that the opinion prevails that this disease is produced by wounds we tendinous parts. Are not such cases as those of O'Nell and Hagerly highly suited to cast light on this obscure point in pathology? For example, if the irritation or indammation of a large nerve in capable of influencing the centres of the nervous sys-tem in such a manual and cause a series of symptoms almost dendeal, if not entirely

the state of the s

n some such way that ordinary tetanus is produced. Nor does our incapability of liscovering in this disease organic lesions in he nerves of the injured parts, authorize is to conclude, in our still imperfect knowedge of minute structure, that no organic esion exists. And if the immediate cause of tetanus be seated in the spinal portion of he nervous system, as the inquiries of my riend Dr. Ruin of this city, and, subsequently, of others, go to prove, an additional erring that it is an injury of the pervous issue that gives erigin to tecanic disease, and not of either the tendinous, or, as some suppose, for example the late Dr. PARRY, of the muscular.

It is remarkable that the effects which we know to arise from an irritated nerve, are always more severe a few days after the injury has been inflicted, than immediately on its receipt. This corresponds with the phcnonicia presented by tetaniis. For the symptoms of this disease rarely indeed commence for some days after the infliction of the injury which causes it. In the cases of O'Neil and Hayerty, the nervous symptoms began, as I have already observed, about the same time, and in the same state of the wound, as we would have expected tetanus. Thus in O'Neil, the first symptom of nervous mischief was on the eighth day, and in Hagerty, on the tenth day, while in the cases of Scully and Sadleir, they commenced on the eighth day; and in the case of Gannon on the tenth day. This points out a close relationship among these affections.

In the memoirs of Baron LARREY, you will find many facts, which, in my mind, demonstrate the probability that a local injury of nerves is the immediate source of mischief in tetunus. He often noticed, for example, a remarkable connection between the character of the tetanic symptoms and the situation of the wound which caused them. He observed, both in Egypt and Germany, that when the wound involved nerves in the front of the body, the symptoms were emprosthotonic, and when those on the posterior part, opisthotonic; but that when both classes of nerves were injured, complete tetanus ensued. It was also a course of the larger nerves were very often followed in the climate of Egypt by tetanus. But; what is still more to the purpose, you will find on record some cases which are re-

gical Journal, where of tetanus in which he subject.

imilar, with those of genuine tetanus, we [performed amputation with temporary reare prompted by analogy to infer that it is lief, and when he examined the amputated limb, he found that the branch of the median nerve going to the thumb was torn two-thirds across, and its extremity inflamed and thickened for nearly an inch. He also, subsequent to the death of the patient, found about two inches of the same nerve at the bend of the arm, very vascular, but without effusion or thickening of the envelope.

Dr. HENNAN has, in his Military Surgery, mentioned that he found the radial nerve thickened, and a small splinter of bone sticking in it, in a man who died of tetanus.

Baron LARREY has recorded the case of the son of a general officer who died of tetanus, consequent on amputation; and upon examining the stump, the median nerve was found included in the ligature with the artery. He also mentions a case in which he suspected that tetanus was caused by a ligature on the crural nerve. He removed the ligature, cauterized the nerve, and the man recovered.

You will also find, in the first volume of LALLEMAND'S Researches on the Brain and its Appendages, the case of a soldier, aged about 38 years, whose subclavian artery was tied for aneurysm. When the ligature was drawn tight on the vessel, the patient experienced great pain in the neck. This pain diminished the next day, but on the fourth and fifth days it became very severe. On the seventh night, there was "perte de connaisance," particularly of the inferior limbs. (LALLEMAND conceived that the convulsions of the upper limbs had been prevented by the bandaging) Immoveable pupils, short and frequent respiration, small and irregular pulse. On the eighth day the head was drawn back hy spasms, and death took place in the evening. On dissection, it was found that the ligature on the subclavian artery had included the branch of the brachial plexus, which comes from the third pair. An abscess was found in the posterior lobe of the left hemisphere. The vessels of the cerebral substance, and those of the pia mater, were preternaturally developed, and the ventricles contained some reddish serosity.

There are probably other cases of an analogous kind on record, which I have remark made by him, that wounds in the either not read, or which may have escaped my memory. Those which I have mentioned are, however, quite sufficient, in connection with the two which we have ourselves witnessed, to authorize us to conclude The as cases of telanus, in which there that there does exist a form of tetanic dis-was an injury of same more or less similar ease, which is in very close relation with, to that which occurred in the case of it not entirely dependent on, an injury of a O'Neil, and probably also in that of Hagerty. nerve. May we not, as I have already said, Mr. Liston, one of the able professors of consider such cases as forming a peculiar surgery in the University of London, has variety of tetanus? This seems to me to given us, in the Military Medical and Sur- be the more correct way of considering this

When we reflect on the different results situated, and in the third, they were accomwhich have followed the same kind of treat- canied by a triding and rather agreeable ment in different cases of tetanus, I think we are compelled to believe that authors have included under this term many forms of disease which differ so essentially from each other, as to require dissimilar modes of treatment. This would certainly be a natural way of accounting for the discrepancy which exists among reported cases.

Of the various Modes of Treatment .

adopted, there are few that have afforded more discordant results than that by smputation. It is, in general, now never thought of; yet LARREY seems to have obtained advantage from the practice, and even from the division of the nerve leading from the injured part. I confess, that when I reflect on the facts connected with this subject, I am disposed to conjecture that the cases of tetanus in which this mode of treatment will be beneficial, are such as those we have been considering; and I have scarcely a doubt on my mind, that, if amputation had been performed at a sufficiently early period, or the irritating extremity of the fibula removed, or even if the injured nerve had been divided in some part of its course, between the spine and the seat of injury, the life of O'Neil might have been saved.

Should further investigations lead to the conclusion that there is a peculiar form of tetanic disease, which has for its cause an injury of a large nerve, and that these are the cases in which an early amputation, or the division of the nerve between the injured part and the brain, is likely to be useful, our attention will be directed to distinguish such cases from others; and I am induced to believe, from what I have seen, and for the reasons already advanced, that the situation or part in which the spasms commence will be a powerful assistance, as a

Means of Diagnosis,

if not of itself sufficient. It is to be regretted that in the recorded cases I have mentioned, and in which the symptoms were connected with an injured nerve, no notice has been taken as to the exact manner or situation in which the spasms commenced. They do not, therefore, afford us the assistance on this subject which we might otherwise obtain from them. RICHERAND says, that he has sometimes noticed in wounds which threaten tetanus, that a persevering extension of the lumb during sleep often manifested itself before other symptoms were observed. Do such cases belong to the class of tetanic affections which arise from injured nerves of large size? To the same class most probably belong also three cases of tetanus recorded by Sir GILBERT BLANE. in two of which the symptoms affected the side of the body in which the wound was

sensation in the part.

If there are the second of tetanus depend-at on the second of such an experience of the second rm calls as putation of the division of form calls? the injured nerve or the removal of the irritating cause, it must be clear, from the facts unfolded by the case of O'Neil and by the cases recorded by LALLEMAND, that such cases will not be benefited by such operations, unlimitately be executed early, or hefore the disease has extende I so far as to cause inflammation of the central portions of the nervous system. This precisely corresponds with the rule of practice given by LARREY: he advises that they be performed before inflammation commences.

Mercurial treatment has often been supnosed to be useful in tetanus; and in the case of Hagerly there could be little doubt, from the close connection observed between the improvement of his symptoms and the commencement of salivation, that material service was obtained from the action of the mercury. Will further experience sanction the conclusion, that it has been in cases of tetanic disease arising from the injury of a nerve, that mercurial treatment has been serviceable?

In conclusion, and as my only analogy for having occupied so much of your time with this lecture. I have to observe, that should it turn out, that it is in cases of tetanus from injury of a large nerve, that advantage is to be expected from mercury, or from amputation, or from the division of a nerve, cr the removal of causes of irritation; and that the diagnostic symptoms, which I have laid down, are sufficient to distinguish these varietics of tetanus from others; it will thus be admitted, that a step has been achieved in the study of the symptoms and in the treatment of a disease, respecting which every thing seems to be, as yet, in confusion. The facts which I have witnessed those which are on record, and the reflections which both have created in my mind encourage me greatly to endeavour on ever opportunity to ascertific the distinguished peculiarities of each care which may present itself to me. In sheet, I feel convinced that one cause of fallure in the treatment of this disease, has arisen from our great neglect of its varieties. 12. 118

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ST. GEORGE'S HOSPITAL

CLINICAL LEG

Delivered in the Session 1835-6. BY MR. WALKER.

GENTLEMEN,-It is my intention to bring under your notice this marring the par-ticulars of a very interesting case which presented itself a short time since amongst the out-patients under my carc. It was one of ruhlingual tumour, occupying the usual situation, but differing in some points from that form of disease which is known and described to you under the name of " Ranula."

The patient, Elizabeth Holloway, an inabout two years ago, that a small tumour was growing under her tongue. At this time it was no cause of pain or inconvenience, either in swallowing or speaking, nor would she even have been aware of its existence had not her attention been drawn; to it by a female relative who had herself a few years previously suffered from a tumour in the speech of the patient. A few mouths since, the tumour, from having remained quiescent, began gradually to increase in size, and materially to interfere with the functions of the parts in the vicinity of which it was situated. Swallowing caused her inconvenience rather than pain, and her voice, from its natural soft tone, changed into a note much resembling that of a frog's croak. It is, in fact, from this peculiarity that the disease has obtained its name of ranula. Her voice was thick and reedy from the pressure caused by the timour (which had now attained the size of a pullet's egg), upon the superior portion of the laryux. The living mucous membrane of the mouth moved easily over the surface of the tumour, and there appeared to be no impediment whatever to the natural flow of saliva. You may remember that at about this time I introduced a blunt probe into the ductus Whartoniensis. "It did not this title the tumour, but passed downwards to his lander surface, a circumthe tumour will structed in the cellular structure under the tongue, and altogether unconnected with and unattached to the sublingual ducts.

tumour removed, and I accordingly operated verified .- Rep. L.

in the following manner: - She was placed in a window fronting the light; the head was thrown backwards and supported; the motions of the tongue were checked, and commanded, by its apex being pressed against the bony palate of the roof of the mouth. Whilst in this position, the mucous lining of the mouth, which was kept on the stretch over the tumour, was divided in that situation by the laucet, and the cyst of the tumour was exposed. That was next divided, and a considerable quantity of thick atheromatous matter immediately escaped. On examination I found the cyst to be much firmer and denser in structure than is usually attained in these cases, and of sufficient tenacity to bear some firm manipulation. I secured it by a pair of common dissecting forceps at the opening previously made through the mucous membrane, and dissected it out with a flat aneurysmal probe. At its inferior position it was attached to the mucous membrane by a small peduncle, of about the size of a crowquill, which was divided by the scissors. teresting healthy-looking girl, about 19 The operation proved troublesome, from the years of age, perceived for the first time, escape of the contents of the cyst. and the escape of the contents of the cyst, and the inconvenient and awkward situation which it occupied, as the cellular structure at this part is loose, and but little force is required to detach or separate it from a tumour of this kind, and I should therefore always advise you to effect this by an instrument similar to the one which you saw me useviz., a flatened ancurysmal probe. The use occupying the same situation, and who was, of a knife in operating on these parts is therefore, more sensible of a slight lisping dangerous, from the chance you run of wounding any of the sublingual vessels, which are of a large size, and the little control which you can have over the movements of your patient, for I can safely promise you that you will find few so quiet and tractable as this patient was. After the tumour was removed, the situation it occupied was carefully examined, and finding that the whole of the cyst had been removed, and that there was no hemorrhage from the part, I ordered her to rinse her mouth out frequently with warm water, and to take a pill of calonicl and autimony at night, and a senna draught on the following morning, and at her very urgent request I allowed her to return home to her friends in the neighbourhood of Coldbath-fields.

Thus much of this case, gentlemen, you were most of you enabled to witness, and I regret the more that I could not prevail upon the patient to remain for a few days in the house, as it is during that period that the most important part of the treatment in such a case as this is called for.

^{*} On examining the tumour previous to its being placed in the Museum in Grosvenor-She was extremely anxious to have the place, we found the above remarks fully

Twelve hours after the operation she was completely relieved; and, as I before told you attacked with great difficulty of breathing; if your patient he young, vigorous, and pleand deglutition, which continued unabated until I saw her on the following day, about the take a large quantity of blood in a texenty-flour hours after the operation. It is to from the arm, and afterwards found her tongue enormously swollen, readering it impossible for me to examine the throat. Extra attempts which she made to with the approaching the property of a terminal expansion which she made to with the approaching the property of the and turgid; skin hot and school; pulse 120, rapid and thready; and an expensive nance expressive of the grant anxiety. Now, with symptoms such arxives it may frequently be requisite, in full, strong, and plethoric persons, to abstract blood largely from the system, and produce a decided impression at once, but in more delicate subjects topical bleeding will be found quite sufficient to answer this purpose; but even this you must do effectually, and check the inflammatory action at once. Twentyfour leeches were ordered to be applied to the throat, followed by a linsced meal cataplasm; six grains of calomel and five grains of James's powder were administered immediately, and were followed in four hours by a strong senna draught. The leeches were re-applied on the following morning, for although the painful sensation of suffocation about the throat was materially relieved, there still remained sufficient difficulty in deglutition and respiration to render their re-application a matter of prudence-She took the infusion of roses with sulphate of magnesia and diluted sulphuric acid every six hours, for a few days, when she continued to go on without any further let or hindrance to her perfect recovery.

The Symptoms which sometimes follow an Operation on Parts near the Throat,

where there is required any force or violence to separate the morbid from the healthy structures, are frequently of a distressing, and sometimes of an alarming character, and the consequent restorative inflammation, if I may use the term, which is naturally set up in the part for the reparation of the injury, frequently affects the surrounding important organs of respiration and deglutition, in the manner which I have already described to you occurred in this case; the same symptoms occurred in the patient M Donald, after I had removed the tumour, situated externally, near the region of the parotid gland, and dipping downwards and forwards under the angle of the jaw; but they were speedily and effectually relieved by the same means being employed as above detailed. In the treatment of these cases you must be active at the onset, and attack them vigorously; you must not be satisfied with putting on six or eight lecches, but you must apply a couple of dozen, and peat the application of them very soon, if course, Nature, and Transman you do not find the symptoms speedily and that disease I mean which the symptoms speedily and

action.

The Disease in the present Case

(Holloway's) did not partake of the ordinary character which is usually obtained by the sublingual tumour denominated ranula, but came more properly and particularly under that class of tumours which is denominated encysted. It was unconnected with the sublingual duct, and was situated in the toose versity states beneath the tongue. It is not very said man so meet with en-cysted samours earlying this situation, the cyst. however, at mountly found to be very thin and attenuated, and the contents are most commonly of an albuminous glairy character, resembling the white of an egg. Encysted tumours of this nature are frequently met with in other parts of the body; I have removed them from the labium pudendi, and from the inner surface of the lips; they seem to occur and form under surfaces covered by mucous membrane, and where glandular apparatus abounds, more frequently than in other parts. They seldom admit of removal by dissection, from the extreme delicacy of their texture, this circumstance rendering it very difficult, and almost impossible, to separate them from the surrounding parts without leaving some portion of the cyst behind; and when this happens, you may be pretty sure and certain that the disease will return again. The method of proceeding where extirpation is impracticable is the following; you must proceed in the first steps of the operation as I have already explained to you ;-freely divide the mucous membrane of the mouth and the cyst itself, empty the envity of all its contents, and allow all bleeding to cease. Then wipe out the cavity with a piece of lint, and rub over the whole of its inner cavity with a piece of caustic potash, so as completely and entirely to destroy the whole cyst. After this is done, you may if you please wash out the patient's mouth with some vinegar, which, by decomposing the caustic, will check its further action on the surrounding parts. The stigs of the cyst will separate in a few says, granulation will spring up from the option of the carly, cicarrization will take the care, and the cure will be thus effected. will be thus effected.

I will now details you a few minutes by explaining to you the

denominated "ranula." This, like the end shouphate of lime, are often met with; they cysted tumour, generally occupies some saidon produce any inconvenience, nor do part of the cyclic terminates and the said of the lower of the lower of the lower of the said a consequent accumulation in the duct, the secretion becomes inspissated, and mixed with the mucus poured out by the lining membrane of the canal, and in this way a tumour, sometimes of considerable magnitude, is produced. When it is practicable, some authors have recommended the introduction of a small probe that the mouth of the duct, and treat the constricted orifice by gradual dilatation, as in the cases of strictures of other macous canals. this way I have known the distended cavity to have become emptied, and a free exit established for the subsequent secretion of mucus to escape. When the orifice of the duct cannot, however, be re-established in this manner, the treatment of it by caustic potash is the best; or, if the tumour he a very large one, the excision of a portion of the mucous membrane, with the parietes of the cyst, may be substituted for simple incisiou. This is the method which I should advise you to adopt, but other plans besides these have been recommended. The nitrate of silver has been proposed, and will, I have no doubt, often succeed; its object is precisely the same as that of the caustic potash, that of destroying the cyst, but in this respect I rather believe that it is less to be depended upon than the kali purum. There is another mode of treatment which is sometimes adopted in these cases; it is one, however, which I feel it to be my duty strongly to caution you against -it is the introduction of a seton. A skein of silk, or part of one, is drawn through the substance of the tumour, and tied in a knot closely under the tongue. The object of this method of treatment is manifest; it is that of producing inflammation and consequent obliteration of the cyst. This is a very nasty mode of proceeding, independent of its being a very dangerous and inefficient one; I have seen it productive of great inflammation in all the surrounding parts, and attended with the severe treatment, would prevent my ever having recourse to it.

Besides the accumulation of saliva.

Earthy Deposits in the Salivary Ducts under the temperature pally formed of the

swence in the mouth. I have removed several, and one a short time since from a girl who presented herself among the out-patients. This was of a larger size than any which has previously fallen under my motion it was about the size of a horse-bean. There is of course no reason why they should not attain a much greater size than this. They may be removed by a very simple process. You have nothing to do but to divide the membrane of the duct with but to divide the membrane of the duct with the point of a lancet, and you can then easily dislodge the calculus by means of the edged extremity of a probe; it will generally escape without any assistance, after the division of the parts. It, however, sometimes happens that the presence of a calculus in the ductus Whartoniensis is productive of considerable inconvenience to the patient, and escapes from the duct without operation. This occurred in a case (the preparation of which I now show you) which was given me by a friend some short time since with the following history. The patient had suffered for several years from pain and uneasiness at the inferior surface of the tongue, and from a painful spasmodic affection of the miglo-hyoideus muscle, the stone was discharged during the night from the duct, and all her former painful sensations immediately left her.

ON THE

LAWS OF SICKNESS. ACCORDING TO AGE.

EXHIBITING A DOUBLE COINCIDENCE BE-TWEEN THE LAWS OF SICKNESS AND THE LAWS OF MORTALITY.

By T. R. Edmonds, Esq., late of Trinity College, Cambridge.

THE law of mortality of any population, consists in the expression, for successive ages of life, of the number dying out of a symptoms which I enumerated to you in a given number living. Similarly, the law of former part of this lecture as occurring in the face of the law of sickness will express the number constantly the face of feverish excitement at that age. The law of sickness, as will express the number living the face of the whole system at that age. The law of sickness, as will express the number living the face of the whole system at that age. The law of sickness, as will express the number constantly increased the second at the second control of the second c ately inform us how many individuals at a given age are yearly attacked by sickness. This law has regard to the duration, and not to the number of cases of sickness suffered by a given number of individuals.

There have been published only two

observations on the law of sickness, was According to this new theory, the mortality from returns collected by the Highlast Later by year of age, exceeds that of the Society of Scotland, the other from returns by the large year by 5(2.991) per conta which recently collected and just published by the large as saying that the mortality "Society for the Diffusion of Useful Know-ledge." In the former, 85,000 years of life, the training of the have been one-the observed. The period of life observed, extended from the age of 20 to the age of 80 years; but for ages above 60, the results absolute sickness at each age, as experienced are not deserving of much confidence. In in the Scottish and English benefit societies, are not deserving of muce considered. In in the scottiss and larging nemoticenes, both observations, the quantity of sickness together with the relative results according suffered by a given number living increases to theory. The absolute numbers for Engwith the age according to the samp gate. In the British Medical Abmanck for 1836, from of increase in the mortality according to age; the pen of the editor of that valuable work. and is expressible by the number or "con-stant" which I have used in the construc-tion of all my theoretical tables of mortality, between the ages of 15 and 55 years.

in in interval of acc, exceed a ding delimination of the state of the

	Relative Sickness and Death.					Absolute number constantly Sick, & dying annually, out of 100 living.			
Between Ages	20-30	30-40	40-50	50-60	Common Multiplier	20.30	30-40	40-50	50-60
Sickness Scotland	.57	.67	1.00	1.83	1.97	1.13	1.32	1.97	3.60
1 England	.60	.71	1.00	1.69	2.56	1.54	1.83	2.56	4.32
Deaths England	.51	.78	1.00	1.61	1.85	.95	1.45	1.85	2.98
Theory	.55	.74	1.00	1.43	-	-	-	_	

On inspection of the above table of exists a fixed proportion at every age relative sickness and death, it will be perceived that for the three decennial intervals number of deaths. If there are two years of age from 20 to 50, the coincidence of sickness to every death at any one age, between the theory and the observed facts the same proportion holds good for every is nearly perfect. Between the ages of 50 age; at least between the observed limits and 60 years there is an apparent, but no of 20 and 60 years. According to the real opposition. For according to the theory of mortality, a new rate of increase begins, or a new constant comes into operation at some variable age between 50 and 60 years. The above theoretical numbers are founded upon the assumption that the new constant comes into operation at the age of 55 complete years. If an earlier age (say 53) had been adopted, the theoretical numbers would have agreed with the facts for England. In the case of Scotland, we have no information respecting the contemporaneous rate of mortality. In England, the elevated ratio of sickness between 50 and 60 years, coincides with the clevated ratio of mortality at the same age. The establishment of this coincidence between the law of sickness and the law of mortality is the main object of the present remarks.

The fact being acknowledged, that the sickness suffered by a given number living, increases with the age, according to the

observation just made on English benefit societies, the constant proportion is that of one year and a half of sickness to each death at every age. From my own experience, I am inclined to the opinion, that two years of sickness to each death, is the proportion most generally prevalent. In the present inquiry, the exact amount of this proportion is a question of no importance; it is sufficient to know, that all observations (including a third unpublished extensive observation of mine) agree in showing this proportion to be constant at all ages.

Adopting as the the simple proportion of two years of sickness to the simple proportion of two years of sickness to the simple proportion of two years of sickness to the six obtain the following interesting come quences. If out of 100 living at anything at anything at anything at anything at anything at anything at the samuel as a fact, that the annual deaths will be two in numbers and reversely. If at any age, the proportion of sickness to each individual, amounts to the 25th part of same law which regulates the increase of a year, the mortality in one ray all amount mortality, it necessarily follows—that there to one in fify. If at any the mortality

26.0

in one year is represented by one per west may easily be distinguished from the tables of the living, the sickness due to carried any other agreed by the "constant" individual will be one week, which is waitly connecting together any two successive two buildredth parts of a year. The state of a purposer. For example, it near 380 from for hundredth parts of a year. may easily trace similar of adopting any other con than that a state tars to Four and the pub

an that the stars to Four for the stables beauty assurance, families apon the shove explained. The observation confidence might be reposed on the correctness of the relative results obtained from Under the age of 55, for every ten years this observation, more especially as they increase of age, the "Premiums for one mortality. But I entertained strong suspicions as to the correctness of the absolute results; and I felt persuaded, that the ON THE MORTALITY AT BACH AGE OUT OF absolute sickness therein expressed, was very much less than that generally prevalent in England. In my published health tables, English and Scottish observations, or rather Dr. Southwood Smith, Physician to the is that of the theory with which they so London Fever Hospital, which brings the nearly coincide. But I have adopted for the new theory of mortality, and the chief of its base of my tables, a number which is more three constants, in close apposition with than 50 per cent greater than that of the therapeutics and the practice of medicine. table of the "Highland Society," and 20 By means of this theory, whon the number per cent greater than that indicated by the lengthsh observation just published. The additional experience which I have since The reader may learn with some suracquired, has served to confirm the opinion prise that this new theory of mortality which I first hazarded respecting the ab- has been already extensively applied to solute sickness most generally suffered by practice, and has served as the basis of the English population. The results of my pecuniary engagements of great magnitude, theoretical tables do not substantially differ. For more than six years this theory has from the results of Dr. Price's tables of sick- | been the regulator of all the published lists ness, which have been in universal use for of prices offered by a London Life Insurance fifty years. But every two successive num- Company, as may be seen by the annexed bers in my tables, bear the exact same comparative table. The numbers in the relation to each other, which is not the case first and second columns are in the exact in Dr. Price's tables.

All my tables of life and health insurance in the third and fourth columns :-

charge other agreen by the constant of contacting together any two successive questions. For example, at page 28 of my "Life Tables," I have given the values at every age, of a life insurance of £100 for one year, deduced from the table of "Villes and the state of the contact of £100 for one year, deduced from the table of "Villes" the state of the contact of £100 for one year, deduced from the table of "Village Mortality," which is a theoretical table founded on Dr. Heysham's observation principles above explained. The observation at Carlisle. At the ages of 20 and 21, the of the "Highland Society" was at that values are .6529 and .6724 respectively; at time the only one extant, on which the the ages of 30 and 31, the values are 8757, graduation of sickness according to age and 9018 respectively. The reader will could be founded. I considered that great easily perceive that the excess in each case is measured by the constant 2.99 per cent. were in harmony with the theory of year" increase one third part, very nearly.

> A GIVEN NUMBER OF CASES OF SICK-NESS.

Within the last few days, I have met with the scale of relation is that exhibited by the an extensive observation lately published by

proportion of 6 to 5 to the original numbers

	Annual Premium for Insurance of 100%, according to							
Age.	The Advertisements is spectus in 1836, of the	n 1930, and the Pro- ie same Life Office.	My Theoretical Table B 24, published in 1832.					
	For One Year.	For Life.	For One Year.	For Life.				
20	2 A. d.	£ s. d.	£ .6529	£ 1.3222				
4. 30 (1 1 0	220	.8757	1.7493				
40	C 1 8 2	2 17 1	1.1741	2.3776				
50	1 17 9	4 2 0	1.5731	3 4159				
60	3 5 4	6 10 9	2.7225	5.4459				
74 /	J 18 4	10 18 6	5.7655	9.1041				

at any one age, the mortality at every age of life is also known. By means of the same theory, as I have proved above, the relative quantity of sickness suffered at each age of life is also known. The constant of mortality is identical with the constant of sickness: the same number which measures the increase of mortality according to age, measures also the increase in the quantity of sickness suffered by a given number of individuals. The new observation proves that the same constant, in the case of fever, measures the increase of deaths according to age, out of a given number attacked. It appears in the highest degree improbable that this number, of all others, should regulate the mortality in fevers, without being at the same time applicable to other extensive classes of disease. The materials for the decision of this question abound or ought to abound in all public hospitals.

The observation of Dr. Smith is founded upon 6000 cases of fever occurring during the ten years ending in January, 1834. subjoin the results in the form in which they have been published. I have added for comparison a column containing the numbers resulting from the theory, or from an increase of one third part (34.3 per cent) for every ten years increase of age.

Between Ages.	Out of 100 attacked by Fever, there die according to			
Delween Ages.	Fact.	Theory.		
5-16	8.3			
15-26	11.5	12.5		
25-36	17.1	16.8		
35-46	22.0	22.6		
45-56	30.5	30.3		
5566	40.7	40.7		
Above 65	44.6	- 1		
		!		

The coincidence between the facts and the theory is sufficiently close to prove all coincidence had been perfect at intervals of five years of age. The theoretical numbers are founded on the assumption that the cases were equably distributed over each decennial interval of age, of which no evidence is presented. Dr. Smith has omitted to state the absolute numbers at each age on which his results are founded. The facts were probably very deficient in number at the beginning and at the end of his table; so that the results here are entitled to little confidence. The information would have been complete if he had given his materials distributed in quinquennial gradations of age. In the column of rges Dr. Smith has adopted an erroneous form of expression;

instead of " between the ages of 15 and 26." he evidently intended to say, between the ages of 15 and 25 complete years, which is the form generally adopted.

If it admitted that the aggregate of several distributions of the several distribution applicable between the limits of 13 and 60 years of age. That a given number living at every year of age suffer the same number of attacks of sickness; and that the duration of each case of sickness at any age, is proportional to the mortality at that age. The deaths out of a given number living, vary with the age, in precisely the same degree as the deaths out of a given number attacked; consequently, the proportion between the number living and the number attacked is constant. The proportion of sickness (in duration) to the number of deaths has been proved to be constant at every age. And since the number of cases of sickness (out of a given number living) at each age is constant, the average duration of each case must be proportional to the number of deaths out of a given number living, that is, to the mortality. Assuming that one tenth part of the living at every age are yearly attacked by sickness, the tacts above announced may be thus illustrated. If 1000 living at the age of 20 suffer 100 attacks of sickness, 10 deaths and 1000 weeks of sickness; then 1000 living at the age of 43, will suffer 100 attacks of sickness, 20 deaths, and 2000 weeks of sickness.

If it be confirmed by future observation, that diseases in general are subject to the same law as fevers, the knowledge of the new theory of mortality will form an indisthat is required. The small existing varia- pensable branch of medical education. (This tions might have appeared, even if the theory has been explained and applied in Nos. 605, 614, 640, 641, and 548 of THE LANCET.) Without this knowledge it will be impossible for a medical man to form any correct idea of the value of different remedies, when his patients differ in age. This theory will inform him that if he loses by death double the propertion of patients atthe age of 43 than at the age of 20, the et of his remedies in each rate is the same.

Shark on the

46, Regent-square, London; 13th Peb., 1836.

09 - 2005

HOPITAL DES ENFANS MALADES. PARIS.

RESEARCHES INTO 2 WHITEPH

KNOWN PRINCIPLES OF ANATOMY AND PATHOLOGY

TYPHUS FEVER IN THE YOUNG.

THE disease which French physicians are in the habit of describing under the various names of "typhus fever," "follicular enteritis," "dothinenteritis," "intestinal exanthema," has hitherto been observed with care in the adult subject only. The facts on which the works of ANDRAL, Louis, Chomes, and others, on this affection, are founded, were exclusively collected in bospitals dedicated to the reception of adults. For many years, however, M. Guersent, during the course of his lectures, has been accustomed to point out the existence of this disease amongst children, and the researches which we have ourselves made, leave no doubt on our minds but that typhus fever occurs very frequently after the age of ten years. It may, we know, even occur so early as at tour years of age, but we have never observed an example below the latter nee, although we have examined more than 200 subjects, aged from twelve months to three years old.

The symptoms which characterize typhus fever in children, are nearly the same as those which are observed in adults. There are, however, in the former some peculiarities which depend on the age of the subject, and which we propose to illustrate in the following cases. We would also call attention to the points of resemblance which this disease is supposed to have with certain anomalous cases of hydrocephalus. our own part, with all due respect to the opinion of some distinguished writers and practitioners, we must confess that we have never seen a case of typhus fever, however were which could be confounded with the "Yentoms of mante meningitie, or hydrocephalus. The distinctive characters of the two lust-montioned affections have always been so clearly marked as not to give rise to the least embarrassment or hesitation in

my a boy labouring under inflammation of the brain, in its most acute form. The physician diagnosticated typhus fever, and the error was not discovered before two or three days had elapsed, but here Mons. G. was led astray by a false history of the case, which he did not examine or in any way regard. The slightest examination of the patient would have been sufficient to reveal the true nature of a disease which was so little obscure as to be diagnosticated by the nurse.

The treatment pursued by the physicians of the hospital Des Enfans varies. Mossicurs Guersent and Japelot still continue BROUSSAIS' method, and employ sanguineous emissions. M. BAUDELOCQUE prefers the purgative method, by Seltzer water in particular. Blisters to the legs and thighs are very frequently had recourse to, and bark is occasionally given, either by the mouth or in lavement, in the adynamic form. In cases of ataxic fever, baths, with cold effusion on the head, are a favourite remedy in the hospital.

Case 1 .- Louis Haquelle, 9 years of age, of a lymphatic temperament, hair light-coloured, skin white, &c., generally enjoys good health. He has been in Paris only tive months, and lives with his mother and brother in a small chamber, ill ventilated, and unwholesome. On the 1st of September, without any known cause, he experienced a sensation of uncomfortableness. with loss of appetite and headache. These symptoms persist during the four days that follow: however, the child continues to go to school, but on the 5th he is seized with continued fever, excessive headache, accompanied by ringing in the ears, complete anorexia. The child was now confined to bed, and placed upon diet. On the 6th an abundant epistaxis. On the 8th the patient was received into the hospital.

On the 9th we examined the boy for the first time, and observed the following circumstances :- Position of the child is relaxed, he lies on his back; great prostration of force; immobility of the countenance; face pale; answers slowly, but correcty, if the attention of the patient be fixed by any particular question; frontal headache; ringing in the cars very troublesome; the lips are dry, and covered with a crust; the tongue red, smooth, and dry; thirst very great; no vomiting or nausea; the abdomen is sonorous on percussion, and tender when pressed upon, especially about the umpilical region; no stools since his reception into the hosthe mind of the physician. Once indeed skin warm and dry; pulse 108; inspirations (and we shall expost the case at length) we 36; cough pratty frequent; the sonority of the cheet is normal. We he rale on both sides.—Asidulates is mal) 2 jugs; 8 lecches round the emollient cataplasm to the leach ment ; diet.

In the evening, exacerbation of the febrile movement; deligium, which continues dur-

ing the night.

10. The agitation of the night previous has been followed by a deep prostration; somnolence; stupor; eyelids closed; the force and frequency of the pulse have fallen; pulse 96. The leeches have drawn a great quantity of blood; no active treatment is employed.

11. The evening and night have been found in a still higher degree of agitation; October (the day of the patient's death), the patient left his bed several times, and it gangrenous eschars were formed on both was necessary to employ the strait-waistings, and on the cibox, as also at the coat; in the morning, alternations of agitation and prostration; the child cries when plied. The leach bites have become the ever the hand is applied to the abdomen, or seat of deep ulcerntion. The tunefaction any other point of the skin; two stools, one of the left parotid has subsided, but a purvery liquid; we now perceive some lenticulant fluid is discharged from the cars; the lar rose-spots on the abdomen; the cough pulse remains feeble and compressible; the dies the same as before, except leeches.

notice.

13. During the night a very abundant involuntary. epistaxis, followed by excessive prostration. The wounds are dressed with a pommade On the 14th, we find the patient still deli-containing bank; the ether draught is conrious at the morning visit; he is exces-tinued: a lavement of quinine given, and a sively agitated, and cries out constantly; it few spoonfuls of claret wine by the mouth. is with difficulty that we can count the The patient died on the 2nd of October, pulse, which is 132; venesoction was imme-in the most extreme degree of marasmus diately practised at the arm, and about five &c. ounces of blood taken away; the clot is soft; no trace of inflammatory crust.

15 and 16 The ataxo-adynamic symptoms are more prominent; the patient does parchment; pulse excessively feeble, varies from 112 to 120; temperature of the skin not much elevated; one liquid stool a day; the abdomen is tympanitic. Tepid bath, with cold affusion on the head; four ounces of an emollient draught; sinapisms to the legs.

17 and 18. The same remedies are continued. The patient is pretty calm; he

quent; the child has no diarrheea.

20. The patient lies nearly in a state of coma; the eye is fixed and dull; the cyclids half open; the papils dilated, but contractile; he does not answer when spoken to; emission of arine involuntary. The tongue and teeth covered with a dark crust; deglutition difficult; sensibility of the skin is now obtuse; pulse 118, small, irregular, to the disphragm by a pseudo-membranous A blister to each leg.

uty immoveable. A levement of id: two blisters to the last. efaction of the left parotid , somore; prostration the same;

24. The 2.05

complete loss Conscion utters a few feeble cries when he in bed; exceriations on both thighs, on the sacrum, and over the right elbow; the arms are raised up from time to time; the extremities are cold; pulse weak and very compressible, 112. Ether Draught; Lavement of Bark.

From the 28th of September to the 2nd of persists; pulse 112; respiration 36. Reme- skin almost cold. The patient remains in a state of absolute silence, though on the 12. No remarkable change worthy of 29th he seemed to recognise his mother. The diarrhoea is abundant, and the stools

Examination of the Body Eighteen Hours after Death.

The body is extremely emaciated; large not answer a single question, and is unable superficial ulcerations occupy the right to recognise his mother. The lips are elbow and both thighs. There are a few cracked, and furnish a sanguineous exudation; the tongue is dry, like a bit of the chest; cadaveric rigidity very well marked.

Skull .- Dura mater normal. The occipital fossa contains about two spoonfuls of fluid and clear serum. The arachnoid every where presents its normal colour, and is easily separated from the subjacent parts. The pia mater offers no other change than a slight scrous infiltration; the substance of answers some few questions, and does not the cerebral hemisphere is moderately inseem to suffer any pain. Still the tongue jected; when divided into three slices, we continues dry and dirty, and the pulse fre- find no trace of ramollissement or other morbid change. The central parts offer their normal colour and continuity. The cerebellum is more pair and more far the cerebrum. The point will normal the cerebrum. The point will normal their normal than the colour trades, and broach.

are pale, and lined with mucus; the bronchial glands normal; the two lungs are pale anteriorly. The base of the right lung is united blister to each leg.

21. The stupor persists; the pupils are we find a portion, about the lung of an apple, which has passed to a state of partial patiention; the two other lobes are bridged they contain but little blood; and let they rior lobe, in partially "like they be stated they be been partially "like they be said faccid, of a march of the heart a pleasant faccid, of a march of themses of this sorts does not present any change of colors."

Abdomen .- The anterior wall of the stomach (internally) offers a patchy injection: the remainder of the mucous membrane is pale, and of normal consistency; the dnodenum is tinged with bile; the jejunum and two upper thirds of the ileum are pale; in the inferior third of the latter intestine we observe no less than twentyseven ulcerations, occupying indistinctively the glandulas agminate and segregate; these ulcerations are superficial, and merely involve the mucous tissue, which is soft and injected for the extent of about twelve inches near the cacum; the ileo-cacal valve is riddled with ulcerations: the mucous lining of the cacum presents a livid colour, and is remarkably thickened; the glandula regregatar of the colon are very apparent, and marked in the centre by a dark point; n the intervals the mucous membrane is sale and of good consistency; the mesenæric ganglia are not more developed than n the normal state; two or three are of 1 livid colour, and rather hardened than oftened; the spleen, which offers its ordisary volume, is a little less firm than natural.

CASE 2.—François Chevalier, 4 years of age, was carried to the hospital Des Enfans Malades, on the 5th of November: he persons by whom he was conducted noton us that the child, who was convalescent from the hooping-cough only a few lays, while on the route from St. Omer to 'aris, was seized with vomiting, diarrhora, and fever; these two latter symptoms peristed for five days following the attack, and on the evening of the fifth day were accompanied by prostration and some convalsive movements.

7th. Position variable; alternations of rostration and of agitation; stupor; low ries now and then; the child does not unswer; the cyclide are half open, and the mylle are normally dilated; the sensibility of the skin is not changed; the lips are dry not cracked; the tongue dry and red; the hirst employe; the abdomen tender and yis parties; the abdomen tender and yis parties; the first employe; the abdomen tender normalised by the state of the leuticular rosepots; the state of the country; kin warm and thy; pulse very quick, about 40; cough rare, accompanied with a râle ibiliant at both sides of the chest. Game

braught; singuious to the leys; diet.
The same graptoms persist during the lays of the hand sth; we cannot observe my convolute movement, or change in the

The same of the state of the state of

citameous smalbility; the child does not recognise his parents who come to see him, and continues to atter low cries from time to time; the sense of hearing is obtuse, and that of sight seems perverted. The evacuations are still frequent and involuntary. The pulse varies between 136 and 140. On the night of the 8th the child fell from his bed in an access of delirium; in the morning we find the right check blue and excessively tumefied; the lips and gums furnish a sanguineous exudation; the tongue is very foul and dark; the pulse is every foul and dark; the pulse is every foul and dark; the pulse is every foul and the state of support the persist. The little patient sank in the evening of the 9th in a state of stuper.

Post-mortem Examination.

Ekull.—The versels which run along the surface of the brain are evidently injected. The arachnoid membrane retains its normal transparency, and is easily detached from the convolutions, the sub-arachnoid cellular tissue is very slightly infiltrated with serum; the pia mater does not contain any granulations or purulent secretion. Three ounces of serum at the base of the skull; one ounce in the ventricles; the cerebral substance itself is quite free from injection. No trace of tubercles or ramollissement.

Neck and Chest.—Larynx and trachea normal. The bronchial tubes are gorged with mucus. The right lung adheres to the parietes of the chest for an extent of about two square inches. We observe a few gray demi-transparent granulations underneath the pleura covering the lungs. Both these latter organs are congested in the posterior part: the bronchial glands contain tubercular matter.

Abdomen .- The mesenteric glands are a little augmented in volume, of a rosy colour. The spleen is enlarged, but its consistence is normal. Liver healthy. The interior of the stomach is marked by numerous folds, whose edges are red. The mucous membrane, however, is free from softening; the membrane lining the interior of the duodenum is remarkably pale; the same decolorstion exists in the jejunum and in two-thirds of the ilcum; the glandulæ segregatæ are here very much developed. In the inferior third of the ilcum, we count about twenty groups of an oval form, injected and prominent; three, placed near the ileo-cæcal valve, aro ulcerated partially. The membrane lining the great intestines is furnished with a great number of follicles not ulcerated, but presenting a moderate degree of injection and slight diminution of consistence.

We will add some other cases, and attach to them some remarks in our next number.

300 C

CABE OF

ANEURYSMAL TUMOUR IN THE

SUPERVENING INJURY OF THE READ, AND TREATED BY

LIGATURE OF THE COMMON CAROTID.

To the Editor of THE LANCES

Sin,—I should feel obliged by the institution of the following case in your publishin. If not too long, I think you will consider it sufficiently interesting. Having omitted all details of treatment, which was that usually pursued in similar cases, and having confined myself to an account of the principal occurrences, I am not aware that the history could be advantageously curtailed. I have the honour to be, Sir, your obedient servant,

George Busk, Surgeon to the Seaman's Hospital. H.M.S. Dreadnought, Feb. 19, 1836.

Richard Simmons, aged 20, a seaman, was admitted, July 13, 1835, labouring under the usual symptoms of concussion of the brain, with very considerable hemorrhage from the right ear, and a small wound behind the left. It was stated that he had received a very severe blow on the right side of the head, from the gaff of the vessel to which he belonged, by which he was rendered immediately insensible, and he was nearly so on admission, and could with difficulty be roused. At first he was very pale and cold, but in an hour or two he ral-lied. The hemorrhage from the right ear continued all night. On the following day he was quite sensible, but appeared dull, not complaining of any pain; pupils natural. On the 15th he was still dull, and completely deaf in the right car. The cyclids, and the integuments around the left orbit. were swollen, apparently from serous effusion; they were not discoloured or painful. The pupil of the left eye was dilated and fixed, vision however was unimpaired, but he was unable to move the globe of the eye in any direction, and had slight paralysis of the facial muscles on the left side.

On the 18th some increase of inflammatory symptoms required attention, but was readily subdued. The pupil was observed to have become irregular, the irregularity, consisting in an elongation downwards, and vision was not quite clear; there was seen-sionally a very partial rotatory motion of the globe, as if caused by the apparently involutary motion of the superior oblique muscle. He had some headache, confined principally to the left side.

On the 21st his mouth became slightly

affected, by mercury. On the 24th the heating was very triding, but the left side of the state o

able purulent districtings from the conOn the 25th the integuments of the first side of the face and head, extending to the vertex, were extremely tender to the tench, but without any morbid appearance. The continued unaltered on the 28th, the transported and the 18th the continued unaltered on the 28th, the transported from cedematons effunction, and on the 31st purulent matter was the posited between the lamine of the correct state of the cor

He term spot to complain of curious noises in the feet car, from which the discharge continued, and he was very deaf. The eye was not painful but the onyx was increased. In the beginning of September the paralysis and loss of sensibility were complete. The anterior lamina of the cornea had given way, and a deep ulcer occupied the site of the abscess, of a healthy character. No change of importance took place until about the 20th of November, when he became affected with small-pox, and was sent to the Small-Pox Hospital,

whence he returned on the 1st of December. On his readmission the state of the face unaltered; the eye generally was prominent and much inflamed, the ulcer on the cornea was large and in a very irritable state. The severity of these symptoms was soon pretty well subdued, and attempts were made by counter-irritation in every form, and other means, to remove the palsy of the face, without effect. Sensibility in some measure returned, preceded by anomalous painful feelings in the affected integuments. He continued in this state without any change in symptoms or appearance, except that the eye seemed to pro-trude rather more from the orbit than had been previously observed. The ulcer on the cornea filled up

His general health being quite restered, and medical treatment not appearing to have any effect, set file local complaint, he was desired effects of the local complaint, he was desired effects of the country and trust treatment of the country and trust treatment of a state. However, on the lated force of acture. However, on the lated force of acture. However, on the lated force of acture. However, on the lated force of the country on the late of the country of the co

of the loose conjunctive.

The substitution of the sumour panied by a very defined Pating could also be felt on the last the part in its immediate moighbourists. Through the stellar and the part in the stellar and th alse be heard in applying the instrument over the inner canthus of the other eye, and on the left side of the frontal bone, a large the roots of the hair, and nearly in the on the left side of the mount as the roots of the bair, and nearly the said the said to be a sai back as the ear. He has very har collect in the head in the right ear, resembling the sound of church bells, and in the left like the breaking of waves on the sea shore. He complains more of these incessant noises than of anything else.

Operation.—As pressure on the fall com-mon carotid put a stop to the paysation and sound of the aneurysus, and to the noises in the head, it appeared to me that the placing of a ligature on that vessel presented ground for hope, and perhaps the only hope, of affording him relief or even permanent cure. As a preparatory step, he being very well able to afford the loss, twenty ounces of blood were taken in the evening, and, on the next day, February 2nd, the left common carotid was tied. Immediately on tightening the ligature, the pulsation and sound of anenrysm ceased, as also did the internal noises.

In the evening, four hours after the operation, obscure pulsation could be felt in the tumour, which, however, was not so large. The whizzing sound could also be plainly heard with the stethoscope, and over as large an extent. There was no pulsation in the temporal artery. The internal noises were at intervals nearly as loud as before the artery was tied, and at others nearly absent. He felt great pain on swallowing; pulse 110. He took 5ss of Liquor. Opic Sedatir., and a wetted cloth was applied to the forehead and eye.

Feb. 3. In the morning, the pulsation was very obscure, and the sounds much di-minished. The internal noises were also much less. He had had no sleep, and complained much of pain on deglutition, and on coughing, and of severe pain in the left hypochordrigum. He has also a very trouble-some cough, which he has had for some time. Pulse 120, sharing lie was blocked for a with immediate will and in the

the stethostopy. The internal notes and in the evening was much easier in all respects.

It is not the property of the tumour could be could, nor spirit new sound be heard with the stethostopy. The internal noises are quite absent, and his hearing it somewhat improved. Pulse 100, soft, skin moist, and tongue clean. The pain had left the left slight hemorrhage isning from the mouth. hypochondriam, but he felt some he the In the beginning the saliva was only tinged right whereant ting. The wound was dress-with blood, but, soon afterwards, pure blood ed, and the left were removed; adion ran out uninterruptedly. Common renedles

cyclid was raised, it caused some projection had taken place to a great extent. In the evening the cough was occasionally severe. with mucous expectoration, and and rolerreu to the disphragm. Pulse 129, soft, skin moist; bowels not opened. He had some calomel and compound was of colocynth, and a mixture with sulphate of magness and tincture of digitalis, and a linctus for the cough.

5. Be felt very comfortable; has had seless prominent.

or Foots weak, but is quite free from pain; could acarly gone. The conjunctiva is much less vascular than before the operation, and the cornea is clearer. Some grumous blood was discharged from the left nostril during the night. Pulse 90.

7. Pulse 80. The lips of the wound are opened, but it is filled with healthy granulations; sleeps well; appetite too good.

Il. He sat up several hours, and on the

15th, the ligature came away. 18. The wound is all but cicatrized; he is quite free from pain or uneasiness; feels only hungry and weak; he is not yet allowed meat; pulse 70, soft. No remains of the ancurysm can be detected; the eye is returned wholly to its natural level; the upper half of the cornea is quite clear, the lower is occupied by a dense leucoma, to the centre of which runs a large red vessel from the conjunctiva. That membrane is hardly vascular, and vision is good through the clear part of the cornea when the lid is elevated ; the pupil natural. The left side of the face is paralyzed, but sensibility is perfect except on the left side of the nose, where he feels pricking pains when touched. He has no power of motion whatever over the globe of the eye, and is still very deaf, and more so in the left car than in the right, but has no noise in the head. His intellects have never been affected. Pulsation is very distinct behind the lower portion of the sternocleido-mastoid muscle, probably in the subclavian.

If any change of consequence takes place. while the man is under my care, I will take the liberty of communicating the particulars through the medium of this journal.

CASE OF

HEMORRHAGE FROM THE MOUTH. By Julius Wolff, M.D., Liverpool.

D., the commander of a vessel, twentyfive years of age. of robust constitution, being in good health, was attacked with a

The second second second

were applied, without success. He then stopped for thirty-six hours, and then began sent for his physician, who ordered astria- again with renewed violence. During this gent gargies, and the second of the second safterwards another physician was consulted, began into a recovered a little, but who ordered venesection, astringents to be in the chef, and immess of state. In the chef, and the continued of patient went on for a fortnight.

blood ran uninterruptedly out of his mouth, tea, with eggs, which was poured with teaand I could not discover the source. The spoons between the lips, and was swallowed patient did not complain of any uneasiness besides, but was much alarmed at the great and constant loss of blood, and durst not any cause. The patient was of a plethoric habit, and had frequently had bleeding at the nose, which was always difficult to be checked. I ordered a venesection, and a warm foot bath, and during the bleeding the hemorrhage ceased, the astringent remedies being continued. About an hour afterwards it began again.

I now saw distinctly that the blood came from the roof of the mouth, and from a small spot of the gingiva, near the third lower molar tooth. I proposed to touch the part with nitrate of silver, and to extract the third molar tooth. The former proposal my colleagues accepted, but the latter they objected to. After the application of the nitrate of silver, the bleeding stopped, but a quarter of an hour afterwards it began again. The patient's face was pale, and the pulse small. Other complaints, which generally attend such great losses of blood, were not present.

I was now determined to extract the tooth; but on account of the blood which gathered so rapidly, I could not see the lower set of teeth. I caught a tooth in the region where I suspected the blood to come from, and after I had extracted it, the bleeding stopped. I filled the socket with wax, applied mustard plasters to the soles of the feet, and the before-mentioned medicine was continued.

The patient slept for a few hours, and recovered a little. Eleven hours afterwards Hahnemanist. What an effect would the the hemorrhage began again. My colleagues 24th dilution of a grain of aconit napel have had by this time forsaken me, and the case being now left to my sole care, I had him placed in an arm-chair, and applied uninterruptedly every two minutes fresh ice to his cheeks, and let ice melt in his mouth, and soon afterwards the bleeding was checked. The room was kept as cool as possible, and the half-sitting position in the arm-chair and the application of ice were continued. From time to time the warm warm that the was put on low diet, and I gave him decoct, crystal tartar, c. syrup, rib., for a drink. The hemorrhage had by this time forsaken me, and the case produced here? or the quintillionth or the

mouth with wax in such a manner that the January the 20th, 1835, at nine o'clock in air could only go through the nose, and by the evening, I was sent for. I found the means of a bandage which I applied, nest patient sitting in bed, his face flushed, and the pulse full, but not very frequent. The The nourishment of the patient was beefvery well.

After ceasing for ninety hours, during which time the patient recovered a little, move. I could not trace the hemorrhage to the bleeding began again very severely. I now had recourse to the actual cautery, touching the socket of the tooth, and the whole roof of the mouth, until the bleeding stopped. In twelve hours it began again, but the cautery being repeated thirteen times, it was finally checked. The scab caused by the iron came off after the roof had obtained a new integument.

Mr. D. bore all this with admirable pationce, though the frequent return of the hemorrhage dejected him sometimes. It had lasted now, with the interruptions stated, for more than five weeks, the shortest intervals occurring in the first fortnight. The patient was kept during more than six weeks in the half-sitting position in an armchair in a cold room, where uninterruptedly the application of the ice and the astrin-

gent medicine were continued. After these six weeks, I allowed him to sleep in his bed again, but in a very cold room, I gave him acid. sulphur. dilut., and, afterwards, serum lactis alumin. (consisting of lactis vaccini, libram unam, ebulliat in vaso figulino; dein adde aluminis drachmam unam; colatura D. S., for a drink); ordered proper diet and rest; afterwards, proper exercise in the open air, and on the eighth week of my treatment Mr. D. visited his friends again, after having been reported frequently to be dead. A few months after he recovered the red bloom of his face.

In such a case I should like to consult a

and the last and the second of the

subject the following remarks:—The mether oil of rock, and was so called because it was of Mr. D., 62 years of age, of robust con- distilled from a mineral. Mr. Osborn, howstituton, experienced the cessation of men-ses 6 years ago, but was natil that seriod always regular, and the opinion. When young the discussive under from hemor-rhage. The nose. In the month of February are suffered from a very severe inflammation in her throat. I ordered leeches, but the surgeon refused to apply them. (There is in Germany a lower class of surgeons, who apply leeches, bleed, etc.) When I asked him the reason, he told me that he was " afraid that he might not be able to check the bleeding, because be knew from experience that it was not an easy matter to check a bleeding in this lady But he did not object to a venesection. He opened a vein, and I applied two leeches on the sternum, in order to convince myself of what the surgeon had stated. The wound of the vein bled for many hours after a bandage was applied, and I was obliged to make a strong compression before the desired effect could be produced. To the leech-bites constant compression, and many other remedies, were applied, yet eight days afterwards a little blood was now and then yielded.

Mr. D.'s sister, about 30 years of age, tall and stout, had had three children, and suffered, when young, frequently from bleeding at the nose. Her menses were regular, and not copious. When brought to bed, her loss of blood was not uncommonly great. She assured me, that a few years ago she cut her finger, and lost such a quantity of blood, that she fainted several times, and the hemorrhage was stopped only with very great difficulty.

Mr. D.'s younger brother, who frequently suffers from hemorrhages of the nose, had a molar tooth extracted. The bleeding was not stopped until the third day arrived, and repeated application of the actual cautery had been made.

Neither Mr. D.'s father, nor his elder brother, was liable to hemorrhages, but this tendency existed in the family of his mother, several of them having suffered from it, one of them a few years ago really dying from hemorrhage. The disposition is therefore inherited from the mother.

94, Duke Street, Feb. 1st, 1836.

MES ON ME. OSBORN'S LITALS OF BLOOD.

Sin, In THE LANCET for Feb. 20th there is a paper by Mr. Osborn, chemist, of The above, or "Petroleum in the Blood." introduced into a quart bottle the bulk of The above, detection somewhat surprised the retort into a sand-bath, which was me, as sentition really means a spirit or placed in a charcoal furnace." When ana-

ever, calls it a peculiar kind of petroleum, but fails, I think, to show that it in the least resembles petroleum in its character and properties. The first test which he made use of was that of touch, the second that of smell; the one was disagreeable, the other adhesive. If this he precision, then indeed chemistry is a superficial science. He next says, "it is soluble in alcohol, and turns of a THICK brownish white colour, when well mixed with water. By evaporating the spirit, the tar again floats on the surface." Of what? He does not say, neither does he tell us, whether it is the alcoholic solution of the tar or the tar itself which turns of this strange colour. He says very little else about its chemical and physical properties, except that "it burns like common tar (not like petroleum), leaving a smell not unlike that of burnt feathers." The smell of burning animal matter is much alike in all cases. He then ("the quantity obtained being too small for redistillation) heats a little in a bulb glass, to the temperature of ebullition, when a spirit was given off, which took fire when brought in contact with a lighted taper." What the temperature of "ebullition" is he leaves us in the dark, and how he can call that a "spirit" which might have been a gas (for he never condensed it. even if it were the vapour of a spirit). I am at a loss to determine.

The process made use of is most incompatible with any correct mode of searching for a minute quantity of matter in any body, and at the same time shows a want of knowledge of chemical equivalents which is quite at variance with his title of "chemist." begins, without any visible object in view, by adding "an ounce of concentrated suf-phuric acid to each pound of blood (of which he takes eight pounds) before separation;" which he allows to stand four-andtwenty hours, being frequently stirred; to this he adds for each ounce of sulphuric acid, two ounces of carbonate of lime, but why he was so liberal of chalk does not anpear, as equal weights, or at any rate a very slight quantity more in weight of chalk than of acid, would have formed a perfectly neutral salt, forty-nine parts by weight of oil of vitriol uniting with fifty of carbonate of lime, they being as nearly as possible equal weights.

Now as Mr. Osborn was working for proportions, as he afterwards states he was, he appears to me to have gone in a very clumsy way to attain his object: he makes use of "an earthenware retort" (capable, of course, of holding eight pounds of blood) having its beak lengthened with "a tin tube three feet long, the extremity of which was lysing for proportions, it is customery to with an important medification, which modi-use apparatus of glass to prevent conta- fluiding Dr. Williams asserts, in the paper use apparatus of glass to prevent contamination or loss. That Mr. Osborn cannot have had sufficient practice to entitle him to make and publish an analysis of the him to make and publish an analysis of the statements, is a think, from these statements, apparent; and as far as I am capable of his denoter view, that they will be much judging, he appears to have obtained were muscular sounds. Do, William Balan, nothing but the well-known animal oil of Dippel, as the substance, so far as can be gathered from his description, appears to resemble it in its characters and in matter.

I should not have intruded invself on the notice of your readers, but that I have observed lately a great number of persons, attempting an analysis of the blood, who have no pretensions to a scientific or practical knowledge of chemistry. Hoping that this analysis of Mr. Osborn's paper will obtain a place in your valuable and equitable journal, I remain, Sir, your obedient ser-W. C.

Brompton Square: February 22nd, 1836.

REMARKS

ON

DR. WILLIAMS'S RECLAMATION

RELATIVE TO DR. HOPE'S LATE EXPOSITION

OF THE

SOUNDS OF THE HEART.

To the Editor of THE LANCET.

SIR,-The perusal of some remarks by Dr. Williams on the newly-adopted opinions of Dr. Hope, in the Medical Gazette of September 12, 1835, to which my attention has just been directed, has induced me again to request of you the favour of a place in THE LANCET for a few observations on the heart's sounds.

In 1832 I forwarded to THE LANCET a paper containing an explanation of the heart's normal sounds, the correctness of which has been partially, and, I have little doubt, will, sooner or later, be generally adopted. Very similar views had, I have since found, a short time before been advanced by M. Rouanet, at Paris, in an inaugural thesis, and, previously to this, brought forward by Dr. Billing, when President of the Hunterian Society, in a paper rend at the annual meeting of that Society in 1832.

These views were then new, and opposed to the opinious of all other writers on this subject. The views of M. Rouanet and myself with regard to the heart's second sound, have been quoted and adopted by Drs. Hope and Williams. The explanation of the first sound, however, as given by M. Rouanet, has been adopted by Dr. Hope of the resistance, trings a

mentioned, is nothing more for less the plane or had explanation, first pub-lies of the property of the cheet in amongst others, the following remarks

"Dr. Hope, in his work published in 1832, ascribed both the first and the second sounds of the heart to the collision of the particles of fluid; and, until the publication of the "Appendix" in April last, he had not, in his several writings on the subject. expressed any distrust or qualification of his original opinion."—(These views, be it remembered, were, at one time, adopted by Dr. Williams, but they met with a complete and unanswered refutation by me, in a paper and examered refutation by me, in a paper in The Lavors of Sept. 22rd, 1833.)—Dr. Williams continues.—"Here, however, he comes to the signature of the signoid valves, and single first is compound, consisting, first, positive cleare of the signoid valves, and single first is compound, consisting, first, positive of a loud smart sound; secondly, of a loud smart sound, produced by the abstract act of sudden jerking extension of the muscular walls, in the same way that such a sound is produced by similar extension of the leather of a pair of bellows; to avoid circumfocution, he calls this the sound of extension; thirdly, a prolongation, and, possibly, an augmentation of this sound, by the sonorous vibrations peculiar to muscular fibre."

The same experiments which led Dr. Hope to adopt and modify the opinion of M. Rouanet as above, led Dr. Williams to the following conclusions: - "That the first sound is not dependent on the closing of auriculo ventricular valves is evident, from five observations in which the closure of these valves was partially or completely prevented, yet the first sound continued.

I have here to remark that the experiments referred to, as detailed by Dr. Williams, were not conclusive in favour of his view, but the contrary; for we have it on the authority of Dr. Hope, that the partial impediment to the action of the valves produced an equivalent alteration in the intensity and clearness of the heart's sounds.

These remarks are also at variance, with the following, which occur in the next

"If some of these circumstances be re-moved, as in my experiment, there the resistance of the colors for the property was taken away, the something that the be heard in the dollar, and a subdured character of common muscular sound. Probably, in common pulsations, the ventricles sonorus until the closing of the application that is valve; this closing of the application of the resistance, brings and the resistance, brings are the contraction of the resistance, brings are the contraction of the resistance.

te muscular tension, which continues us if contained in any of Dr. Williams's previous te contents of the ventricles are sufficiently contained of the heart's sounds, nor that typelled. This accounts for the heart's sounds, nor that typelled. This accounts for the heart's sounds, the content of the heart's sounds, but I think the reader of suggests flow the day of the will perceive that all the above explanatives contributes to its clearness. The strictles will perceive that all the above explanatives contributes to its clearness. The strictles of the contributes in the contribute of the contributes of the contrib apping commencement of the bridges, apping commencement of the bridges, apping commencement of the bridges, and alves contributes the distribute of the aricular values, the chorder bridges, and re insecting above of the ventricles; if shoy ie income, abres of the ventricles, if they sterior of the ventricles, may have an equal hare in the production of the first sound; ut I am disposed to think that what we car proceeds chiefly from the contracting enseness of the external walls of the heart. oth because they are nearer to the car, and ecause, in one observation, the contraction f the left ventricle upon my finger within ; was by no means so abrupt or strong as hat of the exterior, as felt by the other and, and still heard through the stethecope.

I cannot conceive how Dr. Williams can uestion, whether or not the littless attain degree of tension equal in the of the mus-ular substance of the periodic late. In a pa-ser, in The Larger of Jan. 12, 1832, I have h monstrated that the valves must attain a me abrupt and a greater tension than the ubstance of the ventricles, and I feel confibut that Dr. Williams's acquaintance with thysics would, after a short consideration on he point, lead him to the same conclusions. ir. Williams should remember, that his lager trammelled the action of the very alve whose degree of tension he assumes t to have measured. The ingenious argumats, in the latter part of the above quoation, appear to me to involve a petitio wincipit; they certainly do, if Dr. Williams vould wish to infer that the first sound is 10t of valvalar origin, because the sound read by the ear, is that occurring in the 'xternal fibres of the ventricles; for, the prestion is not, Where are the vibrations? out, What is the cause of those vibrations?

Again: "The cause of sound is resisted notion; and the strongest and quickest moion, most abruptly and forcibly resisted, will give the loudest sound. Hence the entricles, rapidly contracting from their laceld state, give most sound when their notion is first resisted by the mass and weight of the blood within them, which is confined within the auricular valves.

And when I would ask, is the motion art; resisted." Why, when the valves does And when is the blood "first conbust." Why when the valves does. And when is the blood "first conbust." Why want the valves close. Ergo, r. William is the blood of the blood pears to me to he a decided non sequilur. Dr. Williams further argues, that the above

The same of the same of the same of the same of

per to which Drs. Williams and Hope have referred, and from which the following quotation is taken:

"And fissible solid, suddenly brought from state of relaxation to a state of tension, vibrates, and its vibrations are sonorous or not-i. e. audible or not, according to its physical structure. At the commencement of the systole of the ventricles, their auricular valves are flapped into play, and, at the instant of their closure, the whole substance of the ventricles and the valves are suddenly brought to a state of tension, and then, consequently, they vibrate. I leave it to the reader to determine whether the vibrations of the valves, or of the muscular substance of the ventricles, would most contribute to the formation of the first sound.

The objections advanced by Drs. Hope, Williams, Bouillaud, and other writers, may be valid, and may apply to the theory of M. Rouanct, but they do not apply to mine. I remain, Sir, your obedient servant,

E. L. BRYAN. Stowmarket, Feb. 23, 1836.

GERMAN JOURNALS.

Press of matter prevents us from passing in review all the articles contained in the last numbers of the German journals which we have received; we shall, therefore, content ourselves with an enumeration of their contents, and a brief notice of the most important papers to be found amongst them.

Hecker's Annalen, Vol. II. Nos. 3 and 4; and Vol. III. No. 1.

1. On the Influence of Trades and Professions on the Health and Mortality of a Population. Part 1. By Dr. Fuchs. shall wait until the second part is published before giving an account of this interesting memoir.

2. On Gastro-enteritis. By Dr. KORLER of La Charité.

3. ON SCARLATINA.

By Professor LICHTENSTADE of Berlin. St. Petersburgh.

This is a long memoir, containing an ac-Drew Missons further argues, that the above three eightenesters to have a tong memors, containing an action table three eighteness actions are allowed in the columnic scarlatina which present a construction of the columnic scarlatina which presents a constaining and the columnic scarlatina which presents a constaining and disease which the columnic scarlatina as a disease which is eminently contagious; he cites several ance, especially for the diagnosis of scarle-cases, where it was transmitted from house that: We have almost invariably observed to house through the medium of visitors, who themselves remained unaffected; however, by using proper precautions, he was always fortunate enough to avoid the danger. The period of contagion is often protracted to a very considerable length of time; the professor was accustomed to consider six weeks as the maximum, but during this epidemic the disease was evidently transmitted from one individual to another, at the distance of eight weeks from the commencement of the attack; a long-continued exfoliation of the epidermis seems to favour the prolongation of the contagious period. The only method of checking the disease, is to avoid as much as possible all circumstances by which its contagious property may be propagated. Dr. Lichten-stadt has experimented with belladonnaa remedy much praised latterly as a preventive, but without any good effect.

The march of scarlatina may be divided into three periods; that of invasion, that of eruption, and, finally, the period of desquamation. The first rarely lasts beyond twentyfour hours; as a general rule, it may be laid down that the disease is dangerous in proportion to the shortness of the first period; however, this admits of several exceptions.

The second period, or that of eruption, lasts usually from seven to nine days, unless it is cut short by the child's death. In the latter case it may terminate in eighteen hours (one example of which kind the author observed), or in thirty-six hours after the commencement of the period. The colour and extent of the eruption are very various. Some writers advance that a deep red colour, uniformly spread over the whole body, is a favourable sign; on the contrary, the author thinks the danger is always increased in proportion to the intensity of the cruption.

The pulse, as is usual in this disease, was always quick, and not reduced by the appearance of the cruption; at 100, it was not an unfavourable symptom; the pulse often rose to 120, and this also without indicating any great danger; but the disease was always the more grave and fatal, in proportion as the pulse exceeded this latter degree

of frequency.

Bloody evacuations were sometimes observed during the course of this period, but they did not seem toexercise any remarkable influence in its march or termination; several children were seized with epistaxis, some recovered; others died. One patient, who died on the fourth day after copious loss of blood from the nose, was seized thirty-six hours later with violent hemorrhage from the vagina. The indications rhage from the vagina. The indications of the variety of the variety of the united of the united of the Administration of the united of the Administration of the variety exercition, do not present anything remarkable. The state of the tongue of the tongue of the variety of th

shee, depocially for the diagnosts or sense-tion. We have almost invariably observed the red, developed papille, at a very early single, horizing, the author, says, in the present spinishme, for the fight few days after the appendix of the semption, the tongue was covered with a whitten the re-white far, by no means characteristic of acartatina, and not differing from that observed in common fevers; however the anterior portion and edges of the tongue gradually assumed a reddish colour, which soon acquired the true scarlatina tint.

Some cases of gangrene of the fauces were observed, but the author saw hardly any example of the diphtheritic inflammation.described by BRETONNEAU as extending to the pharynx and larynx. In one case this gangrenous inflammation was complicated with croup. In several cases also, especially towards the end of the epidemic, the author observed a ringing cough excessively like croup, but all these terminated favourably. The duration of the desquamating period is various. In some cases the desquamation was not completed six weeks after the commencement of the disease; in others it was still more protracted. The complication of this period was, as usual, anasarca; general anasarca and abdominal dropsy often occurred, but never in a fatal form: one case of fatal thoracic effusion presented itself in the case of a child four years old; the cavity of the chest contained two pounds of clear fluid. No case of acute effusion into the cavity of the skull was obscrved.

The treatment pursued by the author seems very rational, and does not differ in any remarkable manner from that which would be adopted in this country. He justly condemns the antiphlogistic method, when pushed to too great an extent, preferring mild cooling regimen, and a moderate use of blood-letting when absolutely necessary. The experiments which he made with cold affusion do not seem to have given very favourable results, and he prefers rubbing the skin with warm oil. The inflammation of the throat did not appear to be alleviated in the least degree by leeches, and purgatives with emetics had not a much better effect. In a word, the result of the author's observations on the treatment of the second period is, "that medicine is only of negative value, and that when a cine does take place, we are indebted to assure for the fortunate result.

THE MOTOR AND NERVES. METENT

4. De Differentia et Nexu inter Mervot

and relations existing between the narves trary, when the crural is divided this motion and relations existing between the narves trary, when the crural is divided, this motion of animal and organic life (the motor and is lost, although the action of the foot and sentient acrees), the author proceeds to the lost and is lost, although the action of the foot and sentient acrees), the author proceeds to the lost life remains. It is not better to their functions, a single character of their functions, a single character is not better to the sent the companion of the control to the character of the sentition of the manner in which the never are distributed in the posterior extremity of the frog. The first and most extremed of these nerves (serves inguinalis) and hous. The removal of the right hemipasses out between the 7th and 8th vertebre, and is distributed to the muscles and in-last in smother rabbit, did not produce and is distributed to the muscles and in-last in smother rabbit, did not produce to last serves and is distributed to the muscles and in-last gives of pain, nor did the diand is distributed to the muscles and in- any external signs of pain, nor did the ditegument of the inguinal region and upper vision of the olfactory or facial nerves of part of the thigh. The second branch the same side give any sort of effect. The (nervus cruralis) passes to the muscles and animal lay quiet, but moved when the exskin of the thigh. The third (nervus is- tremities were pinched. Touching the corchiaticus) is lost in the integuments and pora quadrigemina, caused rapid motion of nuscles of the leg and foot. These three the limbs. An hour after the experiment, nerves have each a double root, while the animal closed the cyclids when light fourth, or pudic nerve, distributed to the was passed near the cycballs; the pupil conskin of the perineum, has only a single pos- tracted; during the night it lay quiet, and terior root. The latter is furnished with a died in thirty-one hours after the operation, whitish oblong ganglion situate outside the A portion of the cerebellum was removed coccyx, while the ganglia of the sensitive in another rabbit. The animal gave no roots of the other nerves are placed in the signs of suffering: on cutting down deeper, vertebral canal; these four nerves anasto- some lateral motion was produced: after mose with each other and with the sympa- some time the motions ceased, but the anithetic nerve. The author repeated the mal was unable, with all his efforts, to raise of the crural. When the superior part of the coate part of the leg, are paralyzed. The sympathetic nerve is altogether about the application and with one for the intestines. The sympathetic nerve is altogether about the application still fump. On the coates that the beginning, and only makes its

usual experiments on the anterior and pos-terior roots of the nerves in frogs, and ob-tained results exactly similar to those de-scribed by Müller and Panizza. He next although the animal lived for seven days. endeavours to ascertain the nature of the From the above experiments the author connection between the several nerves just concludes that the cerebrum is the organ of described. After dividing both roots of the volition; the cerebellum that of co-ordinating inguinal nerve, the frog was unable to draw motion; the spinal marrow the conductor; up the foot towards the abdomen. Division and the nerves the exciting agents of motion. In the second chapter, the author enthe thigh and leg. Division of the three deavours to show that the lower an animal branches was followed by paralysis of the is in the scale of creation, the less differwhole extremity; when the inguinal nerve ence do we find between the nerves of ani-was divided above its connection with the mal and organic life. When a simple nervcrurals, the motion of the foot towards the ous system exists, it serves equally for motor abdomen was equally destroyed. After divi- and sensitive functions: he regards the resion of the united branches of the inquinal current nerve of insects as the nervus and crural nerves, the animal could no longer | vagus, which possesses no evident sensation, move the thigh to the abdomen, and the according to his experiments; it has the same result was sometimes obtained by peculiarities of an organic as well as an cutting through the inguinal nerve above animal nerve. The independence of the its junction with the crural. The author vagus and sympathetic nerves is proporexplains this latter phenomenon by the fact tioned to the elevated scale which the that the inguinal nerve is often very large, animal holds (as Weber first proved), and and contains some of the primary filaments this fact is confirmative of the opinion advanced by our author in the connection bethe anatomous between the inguinal nerve tween the nerves of animal and organic and the crural is cut through, the whole life. As a proof of its truth, the author that is particulal just as if they were divided helps to the found; and hence observing the larve of the rana paradoxa. He found a lateral branch of the nervus ments of the crural transcription and the control of the crural paradoxa. in juxta position, but decussate each other, tomoses with the branches passing to the If the ischiatic nerve is divided shove its branchi, with one distributed to the head,

appearance in the course of the animal's despendent of the secondard when it is revolupment. The vague stairst grown impressional and animal a developed, and the animal assumes more the organization of a land animal, the vagus declines. The formation of the vagus and the sympathetic nerve are in inverse proportion, and the animal and vegetative nerves are the more independent of one another in proportion as the animal holds a higher rank in the scale of creation. The nuthor distinguishes three classes of nerves. according to the independence or non-independence of the animal and vegetative nervons systems: viz ,-lst. In the lower classes of animals we find guly one nervous system, both being united to form this one. 2nd. The distinction is imperfect in those cases where the vagus, detached from the central nervous system, possesses animal and organic functions. 3rd. Here there is a distinct sympathetic nerve, which is the tivity in the new-born child. more perfect and independent as the animal is placed higher amongst the mammalia.

The mutual connections between the orznic and animal nervous systems has a double object. On the one hand it endows the organic nerve with motor and sometimes even with sensitive properties. On the other hand it gives organic force to the animal nerves, without, however, interfering with the sympathetic affections.

nor any direct or indirect anastomosis with Commissioners are briefly recorded.

do not anastomese with the sensitive only would be committed to his charge, nerves: to those belong the third, fourth, and often not until it would, under Divine and sixth nerves; and, secondly, those that Providence, be too late to save the lives of unite with sensitive nerves. The motor paupers. And, lastly, my fears were expower of the organic nerves is derived pressed as to what might become of the from the motor cerebro-spinal nerves; every unhappy patients, for whose medical care noone knows that this property continues thing was to be paid. Certainly a most use a long time after the central nervous mass countablemethod of moviding has been removed. On the other hand, the aportion of the animal nerves possess certain organic properties, viz. the nerves which accompany ration for his remiedies the arteries. Neither the brain, nor the Commissioners Report to Lord John Russell spinal marrow, nor the sympathetic nerve, (Aug. 8, 1935) are the following words:—can with propriety be regarded as the centre. "In some Unions, as in the Westcombe can with propriety be regarded as the centre "In some Unions, as in the Wegcombe of nervous actions. Were the latter the Union, it has been provided, that the terms case, for example, for the called please, and of the contract should be a se

The destinal and oremic systems again the theory by the lighter arders if the to must look for help a point the palent and reputations and where the allered and argament thouse the control of the medile other nerves. This point is the medile other nerves. oblongata, which gives origin to the persua vagus. This is possessed of a power intermediate between that of the animal and organic nerves. Its animal function cannot be destroyed (as in animal nerves) without injury to its organic function; it is developed before the sympathetic. Respiration, the function over which it presides, is a mean between the animal and organic functions, and, besides this, it exercises an evident influence on the digestion and circulation, and is the first which enters into ac-

PAROCHIAL MEDICAL CONTRACTS.

" DA DENTRAM MISERO."

To the Editor of THE LANCET.

Sir,-In the concluding part of my last The sensorial nerves consist, 1st. In the communication (which you did me the hochief nerves of the senses which have no nour to insert in The LANCET of the 2nd connection with the other animal nerves, lultimo, some of the errors of the Poor Law the organic nerves. (The nervus centralis pointed out the increase produced in the perforates the optic, and probably a similar number of medical monopoles; the still state occurs in the so-called double anasto-further reduction of the late neiserably low mosis of the facial and auditory nerves, and The nerves which convey not only the farming out the care of sick pappers to the qualities of things, but also their effects on lowest bidders, by advertising for tenders, our bodies. These comprehend the nerves and the impropriety of employing young of taste and feeling; all these nerves, in men, immediately from the schools of mediaddition to their peculiar function, are post-cine, to attend in difficult and dangerous sessed of sensibility in general. 3rd. The cases of midwifery &c. I observed also, remaining sensitive nerves, which seem that by paying the surgeon a fixed price simply to possess the power of sensitive-per patient, while the power of granting orders for his aid was limited to the re-The motor nerves are, first, nerves that lieving-officer, severe and dangerous cases

2. 22.

a given sum per head, on the number who is receive medical shil; but with the proving that the gross charge shall not exceed a the check on "withholding proper orders?" and again, "that the first shall not exceed a tage is a proper orders?" and again, "that the first shall not exceed a tage is "proper attendance to green amount;" and again, "that the first shall not exceed a tage is the former expenditure for shall not exceed a tage of the former expenditure for shall not exceed a tage of the former expenditure for shall not exceed a tage of the former partially partially provided in the United States of the former partially provided in the United States of the former partially provided in the first 30 are to be paid for (eighty half-crowns being equal to 101), and the tage expenditure of the country." Credit in receiving an appointment from goardians as the rewith medicine gratial.

on some other points, introduced in the letters of tender, through public advertiseabove-named Report, concluding with re- ments, in precisely the same way as that in marks on the scheme proposed by your in- which bakers and butchers are appointed to genious correspondent " Runicola," in serve the Unions with bread and meat!!! the course of which his strictures on my It is admitted, by implication, that these plan, it is to be hoped, will be sufficiently envisible fields for the display of practice

answered. system of medical contracts are singularly unprofitable; which circumstance, together illustrated in their Report, by the evidence with the degrading condition of the paltry of a medical witness. "I approve of the pay annexed to those appointments, will system," says the witness; "but the amount sufficiently explain why many of the most in the present contract is inadequate. I respectable surgeons in the provinces are at think I shall lose a guinea a-week by it. In issue with the Commissioners. some of the parishes it is at present only; If medical men are to be paid so much one third of what I have received in former per patient, I would humbly request the years for the same time. But I approve of Commissioners' attention to the following the system for these reasons; it is a self-rate of pay, founded on the scale already acting check upon the relieving officer in constructed by me, and the relative number giving improper orders, or withholding property of sick annually occurring among a given peror-less upon application for medical relief, number of purpers. m making the patient feel that, in receiving Without quoting Dr. Rees, and other able it, he is a panper, and causing the parish a writers, on this point, and without pointing specific change for him; and upon the medi-jout causes which must ever produce vari-cal man, by causing an inquiry into each ations in calculations of the above kind, case, so that none can escape attention, and perhaps I may be permitted, at once, to by that means also secure proper attend-, set down the number of sick as one in every ance to the patient." Certainly no relieving three persons throughout the year. More officer, in the honest discharge of his duties, than this proportion occurs in the parochial will give improper orders in favour of medial practice of this town, and less in cal men. But, according to the Report, the adjoining rural parishes; but, as a "the inferior officers" (under the old sys-general average, the proportion of sickness tem) "have been fee'd by the medical offito health, occurring annually, is not overcers, to search out, and give them informa-rated, considering that paupers consist of tion of, cases, under the expressed, or the persons of all ages, and of both sexes, and implied condition, that they should be al- that they are exposed in a degree beyond lowed to charge whatever they pleased for all other classes of the poor, to the evils of attendance and treatment of non-parishio- poverty. My former scale of prices, per ners, under suspended orders of removal, or orders of medical relief given by the overseer." New suppose the relieving-officer
to be to 300, and thence descends through
fractions, as the scale ascends by single
hundreds, to 10,000 persons; the price, per
during a half-year, as would not otherto the state of the scale ascends by single
hundreds, to 10,000 persons; the price, per
pauper, at that number, being 94d, and a
fraction. For patients, therefore, I would what become "fae check" on giving descending in price, in like manner, as the "improper orders?" On the other hand, scale ascends, by every 33 patients, up to comment, and to curry of sickness among 100 paupers.

ith medicine gratial.

In this letter, Sie, allow rue to comment ward of a medical contract, entered into by (and horsemanship) at half-a-crown, or The advantages of the Commissioners' three shillings, per patient per annum, are

pauper, begins with 2s. for the care of from pauper, at that number, being 94d, and a fraction. For patients, therefore, I would raction. For patients, therefore, I would raction. For patients, therefore, I would raction. For 100, and below that number patients for 100, and below that number descending in price, in like manner, as the gine them at variance with each other, any number attended by the medical officer, is the missing officer is anxious only to thirty-three and a half being the proportion

urged in fevour of partition m drags, another viz., that those surgeons who do not d medicine, will thus have it in their p to accept of medico-perceital appoints I am, Sir, your obedient serv

Frome, Somerset, Feb. 12, 1836.

THE LANCET.

London, Saturday, February 27, 1836.

THE public mind has once more received a terrific shock in consequence of the fatal catastrophe which has just followed another infliction by the cat-o'-nine-tails, on the back of a marine in the barrack of Woolwich.

But was the flogging the cause of death? The medical witnesses who were examined at the inquest think that it was not. Eight of the jurymen were, in the first instance, of a contrary opinion, but a majority of that body ultimately decided, that "the unfor-"tunate man died by the visitation of God, " and not by the hands of any person or " persons whatsoever." This is the verdict. But whom will it satisfy? None but the advocates of human torture. None but the admirers of a brutal system of treating the soldiers and sailors of this country.

Some of the facts of this case we can state from personal observation. When it was stated in the Weekly Dispatch of Sunday the 21st instant, that another unfortunate criminal had been flogged at Woolwich under very distressing circumstances, and when we further saw, on Monday last, that the victim of cruelty had ceased to exist, and that an inquest was to be held on the body on that day, the Editor of this journal conaidered that as a member of the medical profession, and as the occupier of a seat in the Legislature, it was his duty to see the body of the deceased, and to inquire per- be incidented, and the inquest and affours sonally into the circumstances of the case. Accordingly he proceeded to Woolwich,

a bis arrival at two o'clock. he was mished to hear that the inary had been sitting f and a fall, bed tellimen g morning, to be again reman at nine o'clock. On repairing from the Ship Tavers, where the coroner and love had met, to the Infirmary of the barracks. we were at once admitted to a view of the body. No attempt was made at concealment, no desire was manifested to misrepresent the details, - none to withhold the knowledge of a single fact from any inquirer. The conduct of Mr. PARKIN, the chiefsurgeon of the barracks, was not characterized by the slightest reserve, and his conduct clearly manifested that he had in all respects discharged his duty to the sufferer. The advocates of the flogging system cannot, in this instance, cover the disgrace of the fatal event by accusing the surgeon of neglect, or the absence of a knowledge of his profession, or of unkindness of heart; and both the relatives of the unfortunate soldier and the public may be assured. that all was done in the Infirmary of the harracks, that could be accomplished by medical skill and humane attention, to divert the catastrophe which followed the flogging.

As the young man had died only on the previous morning, the body was perfectly fresh, and no sign of disease appeared upon it, from head to foot, except in the remains of the cruel blood-red wounds (which were situated immediately over the spinous proceases of the dorsal vertebrae), and in the inflamed surface by which those wounds were surrounded. So far, therefore, asternal appearances were concurred in a ing the body, the only se was observed whent ture had been a determined, therefore, by the jary, that examination of the internal organs sho s short time before we reach for the purpose of having

It was agreed, we understood, this memination was to be conducted by the parrack surgeons, by Mr. Bpggan (1) in surgeoul, and Mr. Ga Roll-Bireel Belgel of Ann santely, we'vere prevented free re the more surprised at this circumstance, rithin a very short distance from the baracks. We ask, then, was Mr. GRAINGER nd if so, why he was not questioned in reference to the comparatively inexperinced and unknown Mr. SAMUEL SOLLY? and who were the medical witnesses on arracks; Mr. James Lawrence, a naval urgeon, who was sent down by the head of he Navy Board ; Mr. BUTLER, the parishurgeon, of whom we have heard it said hat he is not unfavourable to the punishtent of flogging; and Mr. SAMUEL SOLLY. young person employed in the dissectingoom of St. Thomas's Hospital, whose eputation as a pathologist has yet to be reated.

After the medical testimony had been were of original that the death was roduced by the flogging, but the other set the verdic there above writ-IN was recorded.

we shall not freest any partion of it on the present ecossion; but shall west the can procure an afficial copy of the tiony, through the instrumentality of a insten in the House of Commons, and an tunder from the Crown. As the report, ar the adjourned inquest, but a brief re- however, in the Times agrees throughout in sert of the proceedings was published to stating that the medical witnesses all conhe Times of Wednesday. As no contra- curred in declaring positively, that the liction of any portion of that report has flogging was not the cause of death, but ince appeared in the journal in question, that the man died from the effects of a ve may, we suppose, take it for granted fever, and that the fever was the product of hat the abridgment of the testimony has some foulness of the air, or of the earth, or een correctly given. On looking at the of the waters under the earth, we cannot st of medical witnesses, however, we find refrain from saying a few words on this part o mention made of Mr. GRAINGER. We of the subject. We must tell these gentlemen, therefore, at once, that their opinions ecause, on returning from Woolwich, we met | are unsound and unphilosophical, and ut-Ir. Grainger travelling in the direction of terly at variance with those of every eshat place, and his private residence is situated | teemed writer on morbid anatomy, and if such evidence-if such nonsense can be termed evidence-were generally received in resent at the post-mortem examination, our courts of judicature, the science of medicine, and even medical practitioners themselves, would be converted into objects of scorn, derision, and disgrace.

Observe. The only apparent cause of the he occasion? Mr. PARKIN, surgeon of the fatal calamity,-the only cause which was subjected to the operation of the senses,-is discarded by these acute practitioners and witnesses, in order that, like so many ghosts, they may spirit themselves into the air, carth, and water, to discover, in absurd conjectures and wanton hypotheses, a reality which they have not the sagacity to detect in a plain matter of fact. What was the state of the health of the man when he was flogged? It was sound and excellent. Nay, it was alleged by all who knew him, that he wen, sight of the jurymen declared that was in rude and robust health. He was in this state on the 8th of February, the day on which his back was lacerated. On the going a verdict 20th he was a corpse. Now mark. The dence, and at medical witnesses are not content with merely saying that they cannot discover the cause of death on inspecting the body, but As the medical witnesses may allege that they take upon themselves to say that the Ann not been correctly re- florging was nor the cause of ceath! Absurdity can go no farther. If in such a respect them that their investigation was case they be incapable of maintaining the Forge than useless. It was only calculated affirmative proposition, how can they prove in standa. Do these gentlemen believe that the negative? We will not say that such the shine covering the spinal marrow may conduct is dishonest, but we cannot refrain be city in from alleging that it is most mischievous. Ah, had there been a medical Coroner in this case, we will undertake to say that the public mind would not have been shocked by such a verdict as has been recorded by the non-medical Coroner for Sarrey.

On the 8th of February, then, the day of the flogging, WILLIAM SAUNDRY WAS in a sound state of body, and when we saw the corpse, on the 20th instant, the day after his death, the blush of health was still apparent on his cheeks, and, as we before stated, there was no emaciation, no sign of disease or injury, except upon the back where the horrid punishment had been inflicted. The cat, as is well known, consists of nine strings of cord, with knots in each string, and a hundred strokes from this infernal machine, would necessarily produce nine hundred cuts on the skin. And on what part of the body was this dreadful nunishment inflicted? Why within a few inches of the brain, the great centre of the nervous system, and directly over the spinal marrow, whence so many nerves essential to the existence of life originate. Good God! The shock which the whole system must receive from the infliction of such torture would be enough to kill the hardiest, the least sensible, of the brute creation. Now. did the medical witnesses cut down through the skin at that part? Did they cut through the bodies of the vertebræ and examine the spinal chord and the membranes immediately under the wounds in the back? If they did make such an examination, how is it that the report in the Times makes no mention of it? And if they did not, how can they dare to allege, in the face of the sholition of the brain system of flogging, profession and the public, that the flogging as it is practised in the British army and was nor the cause of death? If they did navy not examine the state of the spinal mastow.

be cit, personed, and lacerated, with perfect, imputed a Do they think that there is an sympathy between the skin and the nervous system under such torture? Impossible! Their own every-day treatment of affections of the spinal marrow proves directly the reverse. They cup, blister, leech, and canterize the skin immediately where the scourge was applied in the instance before us, to relieve inflammation and other affections of the spinal marrow, and the membranes of that important structure. The bite of a leech, or a bit of blistering fly, can operate on the spinal marrow, but nine hundred cuts and jags in the same situation cannot produce trembling in a single fibre of the nervous system! Oh this monstrous mockery of the unerring principles of the science of medicine! Will these medical practitioners deny that the prick of a pin in the finger, that a fibre of wood in the same part, will often so affect the nervous system as to produce locked-jaw and death? But there is a case, of recent occurrence, quite to the point. What was the cause of death in the case of the unfortunate Miss CASHIN? The application of a stimulant lotion to the skin in the very situation in which this poor soldier was flogged. There was no wound in the back of that young lady. Yet she was literally stung to death by the caustic lotion, and the stings which the soldier received were scarcely less poisonous or severe.

When we are placed in possession of an official copy of the evidence taken at the inquest on the body of William Saunder, shall return to this painful subject but in the meantime, we nation will call,

DETECTION OF ARSENIC.

CONTRARY to the expectation Ministers themselves, the charter for & if the Metropolitan University completed by the 24th inst. ments, halleyer, are sufficiently almit of the choice of a CHAMORISON, and Lord BURLINGTON, who was a senior wrangler at one of the English Universities, and is distinguished for his literary and scientific attainments, will be the first individual appointed to fill that high and distinguished office.

SINGULAR CASE OF DOUBLE VISION. At the London Medical Society on the 22nd inst., Mr. Figur related a remarkable case of double vision, which in some particulars differs from the usual symptoms of such affections. The patient is a young man. aged 22, of abstemious habits, and so studious in playing and writing music, as frequently to lose a great portion of his night's rest. He first began to see objects double about two years ago, but he did not pay any attention to the circumstance. Since then the affection has continued to increase, and he now sees two distinct objects, one a few inches above the other; that which he takes to be the real object, appearing rather the brighter of the two. It is only at a certain distance that he experiences this phenomenon. When near, objects are not doubled. There are no symptoms of disease of the brain. The eye is dark, and the pupil does not contract to the usual extent of healthy What is most remarkable in the case is, the fact of both eyes being similarly affected; so that if the patient closes either, the same result follows as when they are both open. Various opinions were expressed in the Society with regard to the cause. Mr. KINGDON thought that the habit which the eye had acquired of looking at two bars of music at once, together with the absteconsiderable infinence in the production of the disease. Mr. Piccure considered it either to be diseased of incipient amaurosis, that the case of the ball of the free that the case of the that the case of the that the that of the that the case of the case humours. It was the general opinion of the Society, that the great application to music lately addressed by the Inspector of Austomy should be at once dispensed with by the in Dublin, to the Right Hon. Lord Monrats, patient.

After an operation at the Westminster exhibited to the students a new process designed for detecting arsenic in "the smallest possible quantity." The fluid supposed to contain the poison is put into a phial containing a small quantity of metallic zinc. Some diluted sulphuric acid is added, and hydrogen, with the arsenic, should any be present, is evolved. A small glass tube, in-serted into the cork of the phial, gives exit to the gas which is ignited, and a glass receiver is held over the flame. The hydrogen mixes with the oxygen of the atmosphere, and forms water, while the arsenic is deposited in its metallic state on the sides of the receiving vessel.

[Might not this test in many instancesh a fallacious, from the fact of zinc frequently

containing arsenic?-Rer. L.]

ANTIDOTE FOR THE POISON OF MORIson's Pills .- At the close of an eloquent and excellent expostulation on the folly of yielding credence to the falsehoods promulgated by the dealers in quack medicines. for which, however, we are unable to find room, a correspondent adds the following statement:-" I wish to make known generally, for the use of those who are guilty of the folly of habitually taking the Morison's pills, that the best means to be adopted to relieve the distressing vomiting and purging which frequently follow their employment, consist simply in taking copious draughts of lukewarm water (in the case of sickness) to assist the stomach in its attempts to dislodge the poison, and mucilaginous and gelatinous drinks, such as barleywater, linsced-tea, mutton and chicken-broth, will mitigate the severity of the purging, and afford some protection to the internal coat of the intestines from the acrid and irritating effects of the gamboge, aloes, and colocynth, which are found in the pills. Our correspondent most justly remarks that until the practices of quack doctors and the use of patent medicines are interdicted by Parliament, medical science can only be a by-word with the public, as astronomy for-merly was disgraced by the connection of astrological conjuration with its observations and study.

ANATOMY IN IRELAND.

Secretary for Ireland :-

Office of the Inspector of Ameterny, Dublin, Feb. 1st, 1836.

My Lond,—As Impector of Anapony I have the honour to sate the wound had report for the quarter ending the large During the last three months the number of subjects sent to the schools, succeeds that and during the spairs of the year beliefs last.

An attempt was lately and to revive the revolting practice of exhausting two of the party were sent to New and thought it prudent to permit them to join the Queen of Spain's troops, with their ringleader Malone (whom I had formestly convicted). Thus has this gang of desperadoes been transported with their own consent.

I am happy to sequaint your Lordship that the advantages presented to the Students of Anatomy in Dublin, are now equal to those of any other part of the world. The supply of subjects is regular without conflict, and abundant without outrage to public feeling, as formerly. The gratifying testimony to that effect of the Professors of the eight schools of Dublin was published in The Lakert of March 14, 1835.

The approbation expressed by the Dublin Professors has been further confirmed by the annexed testimonial from a very influential public body. The Inspector has only endeavoured to carry into effect the enlightened intentions of our liberal Government. I have the honour to be, my Lord, your obedient servant,

our obedient servant,

JAMES MUBRAY, M.D.,

Physician to the Lord Lieut, of Ireland.

ROYAL BELFAST ACADEMICAL INSTITU-TION; Joint Boards of Managers and Visitors, Feb, 2, 1836; Extract from the Minutes.

Resolved Unanimously,—"That the thanks of the Joint Boards are due to Sir James Murray, Inspector of the Schools of Annatomy, for his uniform attention to the interests of the Anatomical class of this Institution.

JOSEPH STEVINSON, Secretary."

Medical Compress in Irrland.—To the Editor.—Sir.—In compliance with a desire expressed in a late number of The Lander, I herewith send you a list of the Irish medical corners, with their places of residence, taken from Pettigrew and Oulton's "Dublin Directory" for this year. I am, Sit, your obediends servant,

Joun Browns, M.D. 25, Helles-st., Merrion-sq., Dublin; 30th Feb. 1836.

Cavan, John M.Tadden, M.D. (and another), Cootshill. Down, George Tyrrell, M.D. (and two collections); Sanbridge.
Dipblin, James M'Carthy, Apothecary (and included), Aurorated (and included), Aurorated (and included), Aurorated (and included), Dealert.

Manufactor, Robert Murray, M., Beech.

Watters, James Hamilton, M.D. (and two others), Gorey.

MR. MORGAN OF GUY'S HOSPITAL.

To the Editor of THE LANCET.

SIR,-I shall feel obliged, as will the rest of Mr. Morgan's bearers, by your giving insertion to the following statement, though it is with extreme reluctance that I make any complaint on the subject. I do, how-ever, most justly find fault. The apathy, disrespect, and apparent indolence, of Mr. Morgan towards his pupils, compel me to adopt this mode of troubling you for a small space in your valuable publication. Mr. Morgan announced at the beginning of the session that his lectures on ophthalmic surgery would be delivered on every Thursday evening, but after the first three lectures Mr. M. seldom has appeared for any two weeks consecutively. Consequently, he lately had to announce that, unless he lectured three evenings a week, it would be totally impossible for him to complete the course ere the middle of June, but if the pupils would listen to three lectures per week he could terminate the course by the end of March, and, as he did not feel particularly anxious to lecture to empty benches, he hoped that some gentleman present would take the sense of the meeting and communicate it to him in the museum, where he would await the proceeding, which ended by a great show of hands in favour of three lectures being given a week. Yet Mr. Morgan bas not given a lecture on a Thursday evening since, which will be three weeks up to Thursday, February the 4th. Mr. M. cannot have had the interest of his pupils in view by this neglect; he evidently has thought that he might neglect them at his pleasure. I shall forbear saying more at this time, awaiting some suclosis is M. at his next lecture, or ance of the three as are must be well aware th to arrange their thunds and most likely and most in ordered new arrabi

Contraction of the second

COLLEGE OF PHYSICIA

Ga Monday evening oduced at a visitor at the the season, of the College of Parele as I am but little accustomed to such proceedings—at all events have not been made insensible to their impropricties by habit and being, moreover, personally uninterested, and, therefore, it may be presumed, as impartial observer, you will perhaps favour me with an opportunity of stating what impression was made upon me by the scene. In doing this, if any one should think me an uncourteous guest, I would simply say, that I make no scruple in sacrificing courtesy to justice and professional usefulness, when both happen to be incompatible. There were present, as I am told is generally the case at their first meeting, a number of distinguished individuals, -the two archbishops, several bishops, the premier, and some other leading political characters. Two things, above all others, awakened my reflection, viz:-the conduct of the President as an individual, and that of the College as a body. The president delivered an oration on the death of some individuals who were distinguished for their attainments in science, Bacon, Boyle, Newton, Locke, Addison, Johnson, and Sir W. Jones. It contained a brief account of the circumstances attending the death of those eminent men, and a more particular description of their moral and religious characters. They were held up as examples to stimulate our virtue. and to strengthen our confidence in the faith we have adopted. Prom this account the discourse would appear to be sufficiently appropriate, - for I think on such an occasion it should not be wholly unprofessional, nor on the other hand so technical as to be uninteresting to the non-medical guests. But the mode of its execution removed from my mind every favourable impression made by the plan, and substituted in its place a feeling, deep and unmingled, of disgust and abhorrence. My object, Sir, is simply to express my feeling, not to prove It to be het, for that could not be done to one who did not witness the exhibition, and the those who did I am sure it need not. This discourse then convinced president did not care the same the same to was determined to the mine the same to the same the same to the same

the same

most discreligious character of this age and again, what any man should dare to deliver such; a discourse in the presence of the legiting man of characters, and of a liberal if learned profession. Yet all this is done by the homital, head of the medical profession is England, the obief official medical attendant of the monarch. Can it be true also that he has acquired this station more by this and interest practices than by the execution of the monarch of the profession?

the second matter which arrested my attention was the separation of the fellows from the licentiates. The upper part of the room was barred off, for the exclusive use of the president, the fellows, and the titled guests. Over the other parts wandered the licentiates and the minor attendants! To argue that the fellows were thus set apart for their merit, is to outrage truth most grossly. If a man has been at Oxford or Cambridge, though he may have spent his time in every species of hypocrisy, blackguardism, and debauchery, he may become a fellow of the College. It is useless to allude to individuals, the principle being the important thing ; but on this occasion I saw, amongst many other men equally worthy of being mentioned, the vice president of the most learned society in Europe, thrust as a licentiate among the lower ranks, like a boy in a booth, to stare at the show prepared for view in another part of the room. How can such an impudent and degrading system be tolerated even for a single moment. Finally, Sir, I am astonished that the licentiates will go to the College at all. They should stay away in a body, and thus diminish the number of gazers. I am, Sir, your very obedient servant,

OBSERVATOR. London, Feb. 23, 1836.

Dr. W. CUMMIN.-Mr. Editor, -However contemptible your opinion may be of those individuals who contribute to a journal whose main object ever has been to traduce the character of the general practitioner, and to libel the students, it is monstrous to suppose that Dr. Cummin should come forward and publicly dony that he was not the coadjutor of Dr. Rod. Macleod. Permit me to ask if it be not a fact that the papers read before the Medical and Chirurgical Society are instantly sent to Dr. Cummin for the sole and avowed purpose of enabling the said Dr. C. to make such extracts and abstracts from them as he may, in his wis-dom, think fit for insertion in the Gazette. Should you have any doubt of the truth of this statement, let me refer to Mesers. Clearespect real religion. I was simblet choked dinning and Partridge, the present Secrewith dispute at this apparent mockery of a terries of the Society, or their predecessor, sacred things, I think is an indelible stain who tas kinself become so expert in mak-

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ing "Elegan Extracts," and by whom these errangements with the Gazetta were or ginated. I am, Sir, your obedient servant, A FELLOW OF THE SOCIETY

Feb. 22, 1836.

Dr. W. Cummin .- To the Editor .- Sir, Something more ought to be made known with regard to the expostulatory letter addressed by Dr. Cummin to you respecting the secret editors of the Medical Journal Notwithstanding the statements therein made and conjointly testified, I understand that the gentleman who questioned Dr. Cummin, positively declares that Dr. Cummin did deny to him in explicit terms that he had any thing to do with the editing of the Gazette. Dr. Cummin it is thought was alarmed into telling this story by the momentary fear of avowing the connection, but having gathered courage afterwards when he saw the statement in print, he denied that he had ever disavowed the connection, because his acquaintances would have thought worse of him as denying what was so notoriously true, than they even did for his hiring his time and services to Dr. Macleod. This is the report. The student, I understand, was warned not to question Dr. Cummin without having by him an independent witness, but he was too unsus-pecting to take the advice. However, he came straight out of the room and told to every one around exactly what appeared in the letter in your journal. I am, Sir, yours obediently,

St. Bartholomew's, Feb. 19, 1836.

QUACK PILL ADVERTISING.

To the Editor of THE LANCET.

SIR,-You mention that you shall speak further respecting the late murder by Morison's pills. I was induced the other evening to visit Exeter Hall for the purpose of hearing a Dr. Lynch lecture on hygeine. Morison himself, I believe, was on the platform. Between two and three hundred supporters of the system were present, and applauded to the echo the attacks of this "Doctor" on the profession. His subject was apoplexy, and he misquoted a number of great authorities to prove that they decided on condemning bleeding under any circumstances in that affection. His lecture was has been tarnished a tissue of absurdities and abuse. He spoke a few intersects persons of the late murder, and said the victim was fears of their fellow statem. of the late murder, and said the victim was doing well until the " Doctors" were called in. He afterwards left the Hall in a carriage, which had, evidently for effect, been placed at the door for a long time before

corenet upon it, and livery servants se outer coats showed much than other portions of their dress. dient de

LATE ADDRESS TO APOTHEC HALL.

To the Editor of THE LANCET.

Sin.-From the zealous and able manner in which you have uniformly advocated the rights of students, I feel it a duty to apprize you of any circumstances connected with the subject.

I see on the cover of the last week's LANCET, a number of names of students at the London University, who affirm that they were opposed to, and had nothing to do with, the meeting at the Crown-and-Anchor; at the head of the list is a Mr. LEGGATT, who is a pupit of that very courteous functionary, Mr. Secretary Watson. Doubtless this Mr. LEGGATT will be recompensed for the pains he took, during three or four weeks, in endeavouring to collect a tolerable list of names for the support of his master's interests. I need hardly say, Mr. Editor, that the greater part of these honourable and liberal minded students, in a short time, intend to present themselves for examination at the Hall in Blackfriars; and I have no doubt that this mean-spirited publication of their names, is designed to act as a demulcent on the surly growl of a WHEELER, or a Ridour, or to restrain the annoying gesticulations of a Meranman. I am informed, on the authority of a student who was present at the first meeting at Anderton's Hotel, that not a few of these celebrated gentlemen took a prominent part at that meeting, and even wished to become proposed as members of a committee for conducting the succeeding meeting at the Crown-and-Anchor. A Mr. BRIGHTMAN was very conspicuous on the occasion. So much for the firmness of the students at the London University. I consider this proceeding a most unjust one towards all those gentlemen whose names have not appeared in the list (many of whom have taken neither side of the question), inassurch as of course they will be considered at Apothecourse they will be consid carics' Hall as having approved of, or tak a part in, the meeting. I am ask such conduct in medical that the character contains Sir, your obedient servant, A STOURT OF MEDICINE AT THE

LONDON UNIVERSET. 1350 February 13, 1836.

To the Miller of The Mill SOFT.

Size is entrout you to extend your kind-east the who carnesdy desires to insise notificate that there are supposed tores of medical students to the fonders University, who have not suggraced their names by signing the cringing indirect petition to the Apothecaries' Company, allowed by you to be advertised last week. The professed object of the advertisement is perhaps without parallel in the way of excess for its appearance. The petition is said to be got up to negative a pretended report, that the students of the University organized the late meeting at the Crown-and-Anchor. But it is really designed to furnish the Apothe-:aries' Company with a list for reference in case its favour should be necessary during some future examinations. How disgraceful thus to follow the example of the agents of the Apothecaries' Company at King's College! And, worst of all, to attempt to betray those fellow students who, from motives of conscience, refused to place their names among those of the frightened memorialists. When I entered my name as a student in medicine at the London University, I did so partly in consequence of the liberal principles on which the school is founded, thinking to enjoy the society of students whose minds and actions were far above those whom I had lately quitted. I sought the companionship of independent men, men with higher characters and objects than might be cherished elsewhere. How miserably am I lisappointed on finding, in a moment, that I am among so many who profess liberal principles only as a matter of convenience! The petitioners, too, have prostrated themselves at an age when the mind is more usually moved by generous and bold impulses. The proceeding might have been excusable in weak old age, whose long experience too often brings timidity, but for men who are beginning life, it is a sad commencement. You, Sir, whose constant kindness to the London University can never be repaid, are willing to ascribe this silly act to the fears of youth, but there is an armour which students may put on that is proof against intimidation, and he who wears t next sing thin, towars.

If the statement of the London University bold epicions which are adverse to the pre-

that medical surplations, whether agreeing in not with the distinct and at the Croum-and-packer, the common than the common to other schools, the common them frankly, and not merely say, "We disclaim, do." what others merely say, "We disclaim, &c." what others have done. How poor and how feeble is

to an announcement! Change of individuals alone can change the public opinion of the students of the London University, so fouled this advertisement. Allow me, Sir, in senclusion to add, that the advertisement has completely marred the expectations of those who watched with pleasure the increase of our liberal school. The ignominious stain time alone can remove. Your obcdient scrvant.

A STUDENT IN MEDICINE AT THE LONDON UNIVERSITY. London, Feb. 22, 1836.

LATE ADDRESS TO APOTHECARIES' HALL

To the Editor of THE LANCET.

SIR,-The document published on the wrapper of the last LANCET, is remarkable from more causes than one. The first name that appears in the list is that of Mr. LEG-GATT, the late apprentice to Mr. WATSON, the secretary of the Society of Apothecaries. The fourth name, that of Mr. Aynes, is that of one who is already known to the Court of Examiners as being connected with a botanical prize, and who thus expresses his gratitude for the gift. The name of Mr. A. Tibson, a little lower down, is that of a student who received a similar honour. He, too, thus repays his gift. Several other names are those of apprentices of Examiners at the Hall, or of persons who are particularly interested in the welfare of the Company, and these gentlemen have been the indefatigable agents and promoters of the address. They have left no stone unturned to get names to prove - that it is time that the examinations for diplomas were made public! I am, Sir, your obedient servant,

AN UNIVERSITY STUDENT. Feb. 23, 1836.

To the Editor .- Sir, - Permit me through the medium of your valuable journal to respectfully recall to the recollection of Dr. Quain, an assertion contained in his prospectus, issued precedent to the publication of the first division of the series of "Anatomical Plates illustrative of the Structure of the Human Body;" viz. "The work is in such a state of forwardness, as to ensure a regular publication; a fasciculus will be ready for delivery every fortnight on the 1st and 15th of the month." Need I add that the promise has not been fulfilled? It is not the opinion of one individual, but the united the fecturation, and the more so from the opinion of many, that the future fate of the great taught of time which has clapsed, be work mainly depends on a speedier publicator that father sentiments could be forced tion, for this reason,—that numerous peropinion of many, that the future fate of the

some have relinquished the work, fearing th that the several divisions will never be con pleted, and that dependent on the per-alow publication, by hastening which Quain would confer a great obligation. pleted, and trac supplication, by haster only on the numerous class of medical dents, but on medical men generally. Sir, your obedient servant,

A MEDICAL STUDENT. London, February 23, 1836. 1778

WESTMINSTER MEDICAL SOCIETY.

Saturday, Feb. 13, 1836.

Dr. Apprson in the Chair.

THE amount of the Society's funds was announced this evening, and it appeared that they were at a low ebb compared with the funds in hand in the preceding year, the difference arising from the small number of new members this session.

Dr. Johnson detailed some further particulars of the case of affection of deglutition and articulation reported in a late Number. The patient was better to-day; the stomach can receive, without much incon-venience, double the former quantity of broth. When injections of broth were administered, although opium was mingled with them, attempts at vomiting had generally followed, but not when the broth was passed into the stomach. The system still, as before, retained the nutritious portions of food, and when vomiting took place, all but the nourishing parts were ejected. The pulse, however, gets weaker, and her strength decreases. He proposed to pass the electro-galvanic shock from above downwards, in front, along the course of the eighth pair of nerves, which he believed were implicated in the disease.

Mr. STREETER inquired whether apoplexy during pregnancy was likely to affect the child, and whether utero-gestation pro-

ceeded after an attack.

Dr. Uwins supposed that apoplexy was of rare occurrence during pregnancy. He regarded the pregnant condition as desirable to the female who was predisposed to

apoplexy.

Dr. RYAN related a case of pregnancy, accompanied with apoplectic symptoms,-the pregnancy eight months advanced; but the patient was predisposed to cerebral affection, and the attack was induced through taking twenty-five drops of laudanum, which treatment than was led him to regard it not as a genuine case of it was far where to applied the apoplery occurring during pregnancy. A on the more charged the freshment practical point, of considerable interest in a las to Hahnemanium, though it might be

Mr. STREETER said that he also thought were more interesting to the

ne apoplexy during pregnancy as three months a third of her age. ettacks in bringing on wis miscarriages and by . Notwithstanding the present ack of apoplexy, gestation was propeed-The paralysis of the left leg, which we are the paralysis of the same side remains persanently affected. Consciousnoss existed up to the time of the attack. The approach of the fit was manifest to a child, by an alteration in the voice, and a particular appearance of the eyes. The sufferer said she felt cold and faint, and experienced a deadened state of the left side. She returned home from a short distance, and ascended a few stairs, but shortly after was found by the servant in a state of insonsibility, in which she had remained from ten to fifteen minutes. When somewhat rallied she was bled, and leeches were applied, as she complained of pain over the temples. What was the proper treatment in such a case. Should delivery be encouraged?

The members preferred discussing Hahnemanism, and the question of Mr. Streeter

remained unanswered.

Dr. Johnson here made some remarks on Hahnemanism, which we reported last week.

Dr. Uwins acknowledged his total ignorance of Hahnemanism, but as some men of acquirements and good character had embraced the doctrine, he thought it ought to be examined before condemnation. No doubt, Dr. Johnson recollected when he (Dr. J.) condemned phrenology, which he now advocated.

Dr. Jounson replied that he did not ad-

vocate phrenology until he had studied it. A discussion ensued between Mr. STREET-ER, Mr. King, and Dr. Johnson, with regard to the administration of large doses of tartar eructic, which the two former gentlemen characterized as very dangerous, much mischief being ascribed to the extent to which it was often prescribed. Indeed, remedies in general (Mr. King thought) were given in much too large dages, and especially those of which was possificable pronounce the causar effects at mode of operation. Mr. King. cffects a timole of operand that in said the se was fully estimated that in said the way man and trained trained medico-legal sense, was that the delivery rafe sometimes, it was not adapted to the was accomplished during the state of basis treatment of discuss of a grave mater.

As the medicules of these remaining at these remaining at the state of t

we can make any report of them probable to the reader, Dr. Appropriate opinions on Habnemanian, eat, of the probable have not at paragraph appropriate formatic.

PRESENT TO MR. SERVICES

On Wednesday last the trades above school assembled in the purpose of Jacks. The purpose of the

Mr. Chaldecor having been unanimously voted into the chair, briefly and appropriately stated the object of the meeting. Two very highly-finished silver salvers were then brought into the theatre, and exhibited as the intended gifts. Upon the larger was engraved the heraldic arms of Mr. Grainger, with the following inscription:—

"RICHARDO D. GRAINGER,

Viro Humanissimo, praceptori anatomia peritissimo, hoc argentum in diuturnum, tum virtutis, tum ingenii, testimonium dono deterunt alumni

A.D. MDCCCXXXVI."

Upon the other was engraved, "Presented in the Theatre of the Webb-street School of Anatomy and Medicine, to Richard Dugard Grainger, Esq., by his pupils, as a very sincere expression of personal attachment and respect, and in especial testimony of the very high sense they entertain of his zeal and ability as a teacher. Feb. 24, 1836."

The Committee then waited upon Mr. Grainger to request his presence, which was accordingly acceded, amid the loudest shouts of applause. When the cheering had subsided, Mr. Grainger was addressed by

Mr. BICKERSTETH® as follows:—"Sir, often as you have been welcomed into this theatre, the occasion was never, perhaps, attended with such a thrill of delight on the part of the welcomers. I approach you on behalf of the purplis, to present you with a minorial of their esteem and regard; but honomials as is the wine. I have to perform, it is one which is attended to the portion of the gratificating of knowing you always as its any was attended to the property of the property

sing of our attachment and respect. I so not refrain from saying much on this occa-sion because I do not feel much, or because the move the hearts of those who have puted me to represent their sentiments. com presence prevents me from adverting Thany things which I should be anxious to my in evidence of my regard for so excellent a teacher, while amuring you of their esteem and respect. Recollecting the circumstances which this school was formed, and emembering the unparalleled difficulties it has had to encounter, we are persuaded that the undaunted resolution, indefatigable perseverance, and resplendent talents, exercised by your late lamented brother and yourself, could alone have raised it to the eminence which it enjoys, after having crushed the thraldom of monopoly and oppression. (Loud Cheers.) Long may it flourish, sir, under your skill and protection, and ever retain its character for industry and independence. It is not my intention, on the present occasion to enter upon a lengthened review of the peculiar difficulties that at one time impeded the onward progress of our profession. but I may perhaps be permitted to remark we are aware of them. - that we are sensible of the extraordinary impediments which were opposed to the exertions of the late respected Edward Grainger, before he succeeded in gathering round him a larger body of pupils than ever flocked to the prelections of any anatomical teacher in this metropolis. But not only did he found a school, which soon became marked for the acquirements of its scholars, but to him may be ascribed the credit of having raised the standard of medical education to a height which it had never before attained in this country. (Cheers.) Individually, as a scholar, I feel a debt of gratitude to-wards him. As a member of the medical profession, I feel it infinitely increased. Would that he could be present! But there is among us one who has confirmed that success which it was to be hoped would crown his labours, -- one of his earliest associates in the school,-one who now upholds its reputation with remarkable energy. (Loud cheers.) To him, on bohalf of the pupils of this school, I beg to express the fervency with which the impression is entertained, and to him,-to yourself, Sir,our warmest thanks are due. Your unremitting efforts for the welfare and advancement of your pupils demand this from them. The merits of the school do not consist in the magnificence and stateliness of its walls. (Hear, hear, hear.) To its internal arrangements are the honours which attend superiority due; and, in this respect, the school of Webb Street may proudly lift np its head as high as that of any school in the metropolis, and no title among students

This mentionen is, we believe, the sephent of the lately appointed Master of the

can rank higher than that of behits under founding of this school (and in the benefits of the instruction of a Grainger, a pupil of this school. (Loud cheers.) With the earnest where the school in the property of the success of your exertions in the growing advancement of the institution, lidly according the field of gratitities which and that it may be an important place of Languello where the success of your exercions in the growing advancement of the institution, lidly according the field of gratitities which and instruction in the new Metropolitan University, I now, on behalf of your admiring university, I now, on behalf of your admiring university, I now, on behalf of your admiring university of the school. I can hardly describe the difficulties which her

dress a public assembly, and still less an assembly in this theatre, where, at all times, I have been received with the strongest proofs of attachment from my pupils, yet, the present occasion, I assure you, finds me at a-loss to express to you the feelings of grati-fication under which I labour. But I will not, with the vanity which is so inseparable from our nature, attribute all the kindness you have this day manifested, to mere personal motive, but to higher and more distinguished objects. In this institution I have aided in the establishment of a system the reward which usually attends indefatigable industry, and to the influence which this school has consequently had in promoting the general welfare of the medical students in this metropolis, and the improvement of medical education generally, do I chiefly ascribe the possession of those bonours which have been conferred upon me to-day. This theme is to me more grateful than that of my own humble talents. Few who are now here can tell the condition of the metropolitan schools, or the condition of medical education, when this school was first established. At present it must afford us the greatest satisfaction to see that, in every school in this metropolis, the only rivalry among the teachers is who shall most efficaciously discharge their duties, but there was a day in which the medical student had to look rather to his own unaided and unguided exertions than to any benefit he could hope to receive from his instructors. (Hear, There was not then, in this great hear.) metropolis, probably more than one teacher to four hundred students, and you who are employed in the active study of your profession must be aware how utterly incapable one individual would be to afford instruction to so multitudinous an assemblage. The stuto so multitudinous an assemblage. The stu-

pupils, solicit your acceptance of these me- hardly describe the difficulties which he morials of our esteem, attachment, and re-bad to meet offered to his progress by opspect. (Great cheering.)

Mr. Graingra, amid a repetition of the in the professions and his competitors were cheering, then addressed the class.—Al no less in abuse than a Cooper and an though, gentlemen, he said, I cannot plead the excuse that I am maccustomed to adthe school, but he sequired for it in five years the highest reputation, and he had assembled around him, unaided by the slightest extrinsic agency, a larger class than had ever before attended the most celebrated teacher of this or any other metropolis. I lately had occasion to send to his Majesty's Government an account of the number of students who attended his lectures, and I confess to you, that although I was aware that their numbers were very great, yet, so many years hav-ing elapsed, upon referring to the book in which these, in some degree, sad memoin which the teachers, trusting solely to rials, were recorded, I was surprised to see their own merits for success, have met with i the immense number to which they reached. Gentlemen, my only claim upon your kind feelings arises from the circumstance that I have, in some degree, with the assistance of my able colleagues of that and subsequent periods, maintained the success and reputation of the school. (Hear, hear.) I mentioned to you, gentlemen, that when this school was first instituted, the profession of teacher was in a very few hands, and the system allowed them all to be appointed through the means rather of family connection and influence with powerful corporations, than any intrinsic merit of their own. Not that I wish in the least degree to reflect upon individuals. I speak of the system, and say, without the fear of contradiction, that the plan at one time was to adopt only those teachers who had the strongest recommendations from relations, and who could catch the car of those who had the bestowal of the bonours of the profession in their hands. (Hear, hear, hear.) Observe the contrast now. It is not from the name of an institution; it is not on the score of its employed in communicating a knowledge of wealth that success is to be found. The practical anatomy to a class of from three present age looks more to best than to proto so multitudinous an assemblage. The stu-dents were entirely thrown upon their own schools of this metrogolis, whether they resources to obtain that acquaintance with have not originated from the talents, the the human body which is so indispensable services, and the unabated exertions, that to the safe practice of their profession. You were simplyed in the founding of this actually will judge, then, what medicine owes to the Not that my brother was the creating shows.

principles which are now in operation. He was merely their representative. With regard to myself, gentlemen, at the fine when I was called upon to fill the effice which I now hold. I was in stary respects unfitted for its duties. I was necessary the start of the control of the contr for the dagles. I was unprepared by previous education but I studied unabaticable to passed use to contend against that the state on which my brother experienced is M. its virulence. I make no personal reflecof public bodies, we are justified in employing the utmost scruting the state of the constant in the const thing like personal reflection on the conduct of my competitors, but I will boldly assert that some of the corporate bodies of our profession left no efforts unturned to suppress this school, and, gentlemen, the attempt was to suppress freedom of instruction, and the independence of the medical student. Yet you, who are the junior members of our profession, have as great a right to choose who shall be your instructors as the first persons in the land. (Great cheering.) The attempt, however, was made to suppress every private medical institution in this metropolis, and so to limit the choice of the student as to where he should receive his of Surgeous of this metropolis issued a series of regulations, in which they stated that they would not receive certificates of attendance upon lectures delivered in any private school, unless that school could obtain the recognition of one of the metropolitan hospitals, thus throwing the guardianship and the rights of our profession into the hands of the hospital surgeon and physicians of this metropolis. Ought the Colpower of crushing private institutions on rival bodies in the public schools? Governing bodies should retain to themselves those discriminating powers which, when justly and honourably applied, no one could complain of. I will just state how far these regulations were aimed at myself. College of Surgeons not only would not conege in Surgeons not only would not recognize any private school, unless it had previously seedled the recognition of one of the hospitals; but they held a discussion, the state of the hospitals; but they held a discussion of the seedled of attendance on which has been received by the College of Surgeons, thus jitted days we means of this Surgeons, thus intending, by means of this ex post facto law, to put me and the school

to an individual to whom I feel deeply indebted in those transactions. I allude to a highly-distinguished surgeon, who enjoys an European reputation, who advocated my cialms when the question came to be considered at the College of Surgeons, and by which means this school was preserved in existence. I allude, gentlemen, to Sir Astley Cooper. (Loud cheers.) There was a great discussion in the Council as to the reception of my vertificates, and Sir Astley Cooper, as I have heard, strongly advocated the justice of my claims, and it was represented to me that had it not been for that advocacy, in all probability my certificates would have been rejected. This is the only allusion, gentlemen, that I shall make to any individual, and I make this public avowal of the high sense I entertain of his liberality on that occasion with the greatest pleasure. energetically made by the College of Surgeons | Fortunately the time has now gone by when against myself. Through me they wished the acts of a self-cleeted Council can suppress those principles of medical education which have since extended with such rapidity and power, not only in London, but in almost every considerable town in the kingdom. This opportunity of gaining medical instruction in the country is most valuable to the student. I conceive it to be a point of immense importance that as soon as the whole routine of compounding, and so forth, is understood, the medical student education. Within six months from the should be initiated into those principles period of my brother's death - aye, within upon which the successful practice of his three months-the Council of the College profession must rest. There is no fear of medical education again retrograding. Gentlemen, for myself, I have been enabled to take but a trifling share in the work, and the difficulties which I have had to overcome have been balanced by many pleasures. I have ever received the warm support of the students of this school in my efforts, and not only in a public point of view, but I am proud to acknowledge that some of the most valuable friendships lege of Surgeons to have bestowed the I have ever formed I owe to my connection with students as a private teacher. I am, too, most ably supported by the talents of my colleagues, and not only by that, but by the strong feeling which has existed in the profession generally, that to support this school was to maintain a great principle. These advantages were quite sufficient aid to my laudable efforts. hear.) Gentlemen, amid so much, which both retrospectively and at present is highly gratifying to me at this moment, there is one circumstance which I confess throws a shade of gloom over this occasion. I am sorry that among my excellent and worthy colleagues I do not observe one here who is as dear to you as he is to myself (Mr. Millard). I have had the opportunity of watching his rising worth, and the happiness of seeing him placed in a situadown. I am perfectly justified in alluding bappiness of scening him placed in a situa-to these acts of a public body (cheers), that tion where his excellence could be esteemed I will the company on a larger scale. And I regret that we are fluence and habits of my mind. I am not accustomed, nor do I wish, to intrude my self on the ground of my own personal value. I would rather look on this costly present as a proof that you admire the system of which I in some measure have been the representative, than as the reward of any exertions of my own. Yet if any labours of mine have in the least degree contributed towards advancing the welfare of the pupils of these schools, if in short I have deserved, as I have this day received, so ample an expression of your approbation, believe me my utmost ambition is gratified.

Mr. Grainger then withdrew amidst loud and long-continued cheering, and votes of thanks were unanimously given to the chairman, and to Mr. Davis, the Hon. Sec., for the able and satisfactory manner in which they had discharged the duties allotted to

them.

Those gentlemen having returned thanks the assembly dispersed, apparently with feelings of great gratification at the proceedings of the day.

COLLEGE OF PHYSICIANS.

THE Soirees at this medical show shop, inside of which we have once a year just such a display as is made to the gaping multitude outside of Richardson's booth at Bartlemy-fair, were resumed on Monday last, and every exertion was made at this eventful moment to produce such a display as would strike the licentiate populace with admiration of the extent of the worldly connections and influence of Sir HENRY HALFORD, and convince them what folly it was to try to reduce the professional power of a man of genius in the strong hold of a Royal College. The populace came, and we believe were fully convinced both of the absurdity and the impropriety of directing the battering-ram of reform against the walls of a citadel which contained within it such an army of archbishops, lords, lawyers, artists, and eminent fellows, as were found in array on the present occasion. The Emperor Nicholas, at Kalisch, had not more cause for, nor found better success in, exhibiting his troops to the view of his intention to come immediately to the Europe, than had Emperor Harrono in ald with an everwhelming force.

deprived by an melanoholy series of his Bell Mill in Monday night. In fact, the presence. Gentlemen, I will not treat my list the and subordinates having attended salf to speak further on this distribution, had the gomfort of acup of subject. Enough, gentlemen, has been all the list departed. Salf resolutions to myself; too much for the ordinary in subjects the single resolutions to myself; too much for the ordinary in subjects the single resolutions to myself; too much for the ordinary in subjects the single resolutions of superhuman college de accustomed, nor do I wish to intrude my light field against the Aughthaus of THER and CANTERBURY. LOS FE. LANSDOWNE, WESTWO and HARROWSY, the PRIMATE, Lord Ser-TON, SIT MARTIN ARCHER SHEE, Mr. GOD-WIN, and other such powerful medical warriors?

Some considerable time, of course, was allowed to the licentiates, and the top-apothecaries and the top-apethecaries' apprentices who were mixed with the army of licentiates, to contemplate the enemy, and that period was occupied by an oration from his little Majesty, who took the field in person, and occupied the centre of the troops. The subject was wisely and discriminately chosen. Death and immortality formed the theme. In times of war the hosts of battle need encouragement to fight to the death, unless immortality is the reward. With extreme delicacy and tact, however, the orator avoided a direct selection of illustrations from the military mausoleums of antiquity, and as the institution to be defended was one of science, he drew his inspiriting examples from the last scenes of the illustrious philosophers of the two past centuries,
—from the deathbeds of Bacon, Boyle,
Locke, Newton, Jones, Addison, Dryden, Johnson, and Pope, who all died "in the purity of the gospel, by whose light," &c. &c. The oration produced its full effect. The orator had taken the pains to learn the oration by heart, for he pronounced it with one eye on the bishops and the other on the ministers of state, wisely watching in their countenances the impressions which his theological topics and his natural eloquence were producing, as the sentences rolled in a beautiful Mosaic stream of mingled English and Latin, from his lips.

Those licentiates who deposited their helmets and coats of mail with the suttlers of the camp, while looking on in the sultry atmosphere, had better luck with them at the retreat this year than in 1835, when such a number were stolen that a great portion of the retiring troops went home almost naked. On this occasion better care was taken, and only a few suits of usper armo were lost.

It is said that the licentiates found enemy so strong, that in a street of held the same night at the meum was resolved to make specialization power for intervention in their that the famous General, Bearne Rica, of the kingdom of Westminster, has signified Tathe Editor of Two LANCES

remarks on the adverti Shal students of the Lond tweeted in your last Numb That you regarded it as an aid of the prayer of the great meeting in the Strand, and as a proof of the iniquitous power and influence possessed by those secret tribu-nals which can, by exciting the terror of some candidates for examination, exhort such a declaration from so great a number of students." But, in another part of the article, you stated that these gentlemen formed no part of the meeting at the Crownand-Anchor. This is a mistake, for a number of the students who have signed that document were present at that meeting, and voted in favour of the resolutions. I have asked some of them, why they signed a paper which stated that they had not had any connection with the meeting, its originators, or its proceedings, when the reply was, "Because I am going to the Hall.

But, Sir, the advertisement is not solely signed by the medical students of the University. In the list there are the names of gentlemen who are merely general students in the University, and also of many exmedical students who are now surgeons and apothecaries, having passed both College and admirers of the present system of examination, and they used every endeayour to obtain signatures to it, not serupling to get gentlemen to sign it, who, as I have before stated, are not medical students. - The originators of the document not wishing to pay the expenses of advertising it themselves, and wisely thinking that if they asked for a subscription at | the time of asking for the signatures, they would get very few of either, they had recourse to the following manguvre :- they said not a word about the subscription until they had got all the signatures; then they placed a paper in the headles room, stating that it was necessary for each gentleman who signed the paper to pay one shilling for advertising it. And by this method they have got a considerable number of shillings. they fatend to do with the surplus I Fremain, Sir, yours in haste, SCRUTATOR.

IN HOSPITAL

of a little to word ten years and the months a ed ten years. The tumour

A Secretary and the second of the second of

after the extraction of one of the temporary lasts which was in a decayed state, and which had given rise to gum-boil. The which had given rice to gum-hoil. tecnous was on the increase, and being ought expedient to remove it without. delay. It filled the situation of the second temporary grinder, but in its growth had displaced two of the adjacent teeth, occupying about an inch and a half of the alveolar process on the right side, The operation was performed in the following manner:-An incision, commencing a little above the point of the chin, and being carried along the base of the jaw to the angle, in a semilupar direction, the flap was dissocted up, so as to expose the bone, and open the membrane of the mouth freely; the mylo-hyoideus and other parts connecting the tongue with the inner side of the jaw were then detached, the knife being introduced from without, and guided by the finger of the left hand, introduced into the mouth. The full extent of the tumour being then distinctly ascertained, the first temporary grinder, the permanent lateral incisor, and the first permanent molar teeth, were immediately extracted. A small saw was applied in front and behind the tumour. in the spaces from which these teeth had heen extracted, so as to divide the jaw to some extent perpendicularly. A pair of strong cross-cutting pliers were then em-Hall. The originators of the document are ployed, so as to embrace the portion of the bone to which the base of the tumour was attached. This was easily divided, and the The wound was tumour was extracted. then brought together by two or three points of interrupted suture. The whole proceed-ing occupied a very few minutes. Mr. Liston afterwards remarked that it might appear to be a severe operation; the suffering, however, was not so great as would be supposed, but all operations upon the jaws had a frightful appearance. He had made the incisions in such a way, that had the tumour been found to involve the jaw more extensively, the whole thickness of the bone, to any extent, might have been extirpated. It was impossible, before the incisions were made, to know the exact extent of the tumour, and he considered it proper to proceed in such a way, in order that, under any circumstances, the whole disease might be removed. Fortunately it was found possible to preserve the base of the jaw. Consequently there would be little or no deformity. The disease he added, was very rare in young subjects, and he never before, out of a number of cases which he had witnessed or treated, had seen it follow any decay of the temporary teeth, or disease of their sockets. The tunour scened to the man last removed an osteo-saresus touch to be composed partly of soft matter, our tunions, from the lower maxillary bone and partly of bone. It was a "veritable of a little december of the same and partly of bone are removed. sercoma."

REPORMED MUNICIPAL CORPORA AND MEDICAL COBONERS.

Mr. Greece Rossason, Surgeon, of Liverpool, acting on the hint which we lately put forth in THE LANCET, has just published " A Letter to the mayor, widermen, and councillors of the re porations, on the necessity of electrical medical coroners," in their respective

"This," says Mr. Regerson, quoting from Junius. "This is not the cause of faction, or of party, or of any individual, but the common interest of every man in Britain."

The example set by Mr. Rogerson is excellent and most timely.

GOWER-STREET. - To the Editor .- Several students in the dissecting school beg to express their regret (in a form which will perhaps lead to a remedy) that the time of the demonstrator should be so much occupled with pursuits which prevent him from giving to the instruction of the pupils all that attention which he formerly devoted so exclusively to his important duties. Our correspondents should have stated the name of the demonstrator. Complaint should be made in the quarters whence the appointment is obtained.]

SIR CHARLES CLARKE, we are happy to be able to state, is one of those distinguished individuals whose name is to be placed on the list of Metropolitan University Commissioners. His liberal principles and his being altogether unconnected with any school or intriguing faction, eminently qualify him for this distinguished honour.

(From a Correspondent.)-Dr. W. Cum-MIN. in deference to the exasperated feelings of the students and general practitioners, is about to relinquish his connection with the Aldersgate-street school.

A Report on the Medical Management of the Native Indian Jails throughout the Territories subject to the Governments of Fort William and Agra, with some Observations on the Principal Diseases to which Native Prisoners are liable. By James Hutchinson, A.M., M.R.C.S.L., and Scc. to the Med. Board of Bengal. Thacker, Calcutta; and Parbury, London; 1856, 8vo., pp. 107.

An essay on the Laryngismus Stridulus, of Croup-like Inspiration of Infants, with Illustrations of the Principles of the Pathology of Nerves, and of the Functions and Disea

n and its Principal Banches, Man Mid. at St. Man London

p. 484. Anatomy of Melancholy, with all the Kinds, Causes, Brunds. Progeostics, and several Cures of it. Progression, and several Cross of the Saveral Sections, Members, and Subsections, Philosophia, Members, and Subsections, Philosophia, Members, and Subsections, Philosophia, Members, Democritus Junior. To which is prefixed a satyricall preface, conducing to the following discourse. It edition. Printed from the authorized c of 1651, with the author's last corre additions, &c. &c. London: B Chidley, 1836. 8vo. pp. 744.

The Naturalist's Library, Sheep, &c. With colour don : Highley.

CORRESPONDENT .

The letter respecting the meeting at St. Thomas's Hospital reached us, and it was designed to be inserted, but on receiving a copy of the following resolution, in which the students at that institution express their strong opposition to the proceedings of the Apothecaries' Company, we saw reason to doubt the correctness of some of our correspondent's inferences. The resolution says, "That this meeting regrets there does not exist a second examination for medical pupils, and that second examination a public one, to which any rejected candidate might appeal, as this would at once silence the murmars of incompetency, and destroy the possibility of private injustice. That this meeting also strongly disapproves of the principle of self-election and irresponsibility in medical corporations. "W. WEGG,

CHARLES EDWARD BLAIR, Sec."

Mr. Samuel.-It is not on Fri ay week, but on Tuesday next. There will be no speechifying on the occasion.

Anti-Humbug should favour us with his name and address confidentially. Q. in the Corner may be assured that

College of Surgeons will not discharge the duty to the profession.

and the same of the same of

The letters of Dr. M. Carta, Pattieon, Mr J. C., and Medie sis, have come to hand.

Such a mass of comreached us relative to the late inquest at Line obliged to postpone for a

The communications of Dr. Fisher, Dr. Keles, R. E. L., &c., reseived,

KERATUM .- Page 847 of 1

Vot. 1.]

LECTURES

ON

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

Br M. ANDRAL

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Médecine of Paris.

LECTURE XIV.

RAMOLLISSEMENT OF THE NERVOUS CENTRES.

GENTLEMEN, - The lesion now well known under the name of "ramollissement," or softening of the nervous pulp, is characterized by the following

Anatomical Appearances.

The first and essential character is a dimithe nervous pulp seems to have taken a as you can readily conceive, present itself latter, though softened, retains its accus- able, in the Archives Générales, t. 7, p. 52. tomed form and organization; the change is striate, concern will observe the medulary misrior of this portion of the and the several anatomical peculiaritite. If the optic thalami we can recognise its t although softened. s and are not confound-In a second degree of ramollissement, the consistence of the nervous substance is still more considerably dimi-

and the same of the same of the

degree, texture, hitherto unchanged, is more or less modified. The cerebral substance is broken down into a soft homogeneous mass. of the consistence of " stir-about." If water be poured upon the brain in this state. the nervous matter is easily separated from the membrane which envelops it, and forms numerous flocci that are suspended in the fluid. These fine, minutely-divided portions of the nervous pulp give a lactescent colour to the water, which might be mistaken for the effect of an admixture of pus; but it is not pus. The floating whitish flocci do not depend on the presence of purulent matter, because exactly the same appearance is produced when a portion of putrefied brain is deluged in water. Lastly, the nervous pulp may disappear altogether: we find no trace of meduliary substance, which has become altogether liquid, without the slightest consistence or texture. Of the cerebro-spinal substance, nothing remains but the vascule-cellular web, which in a normal state is masked by the nervous matter, and of which it seems to be the primary rudiment. In a few cases the softening ia carried to such a degree as to produce an actual solution of continuity: not only the nution of the normal consistence, in which nervous pulp has disappeared, but the cellular tissue just alluded to. M. Rullier has tendency to pass from its solid to a liquid described a remarkable case of this latter state. The lesion, thus characterized, may, kind, where the cervical portion of the spinal marrow was completely separated under a great variety of degrees. Some- from the dorsol, nothing being left but a few times the normal consistence of the nervous fibrous filaments suspended in a fluid. M. pulp is very slightly diminished, and the VELPRAU records a case, still more remark-Here the medulis oblongata was separated appreciable to the touch, but not to the from the pont in the most perfect manner; eye. Thus if the lesion occupy the corpora not a trace of fibre existed between them. and even the membranes themselves had disappeared.

Thus you see how the lesion whose history we now study, may present itself with various degrees of intensity, from a slight modification of consistence, where the original form and texture of the nervous substance remain unaltered, to that extreme degree in which it has returned to its primitive and liquid state-to the homogeneous and the sectioning is appreciable on faid that fills the membranes in the earlier on of the part. In a third period of fetal existence. In some cases

the change from its normal consistence is so tomore characters. These necessarily conperfect, that it would seem as if the different acts of nutrition had retrograded, and led back the nervous substance by insensible modifications to its primitive condition of liquid. Ramollissement of the nervons con tres may present itself with the simple character of loss of consistence, unaccounpanied by any other lesion; but at the same time that the nervous pulp is softened, it may be attended by various modifications of colour, which we can arrange under three distinct heads.

In the first place, rantollisement may exist with a normal coloration of the nervous substance. The softened portion is neither. more pale nor more injected than is natural.

In the second variety, we find the nervous pulp deprived of its normal colour, and of a dull white tint, and, as it were, affected with anemia. The colour sometimes resembles that of milk, or is more bright and resplendent; this is particularly the case when the lesion occupies the gray substance of the brain or spinal marrow. It is a circumstance which you should take particular sent itself, not with injection and other characters of inflammation, but with a perfect decoloration. On the other hand, if the ramollissement be confined to the medullary substance, we more frequently find it of a normal colour.

In the third variety, ramollissement is attended with an increased injection of vascularity, giving rise to various shades and tints, from a slight rose to deep red or of the head, chest, and abdomen, in the

mahogany brown.

Ramollissement is also from time to time ramollissement coexists with sanguineous at other times insignificant and disseminated from all other lesions of the nervous centhrough the altered pulp. The lesion how- tres, we shall now point out the different ever is by no means a necessary, though it may be a frequent consequence of ramollissement; it depends on an irritation of mass is no longer able to support the fiver vessels; these latter become over-distended, their parietes give way, and the blood is effused in greater or less quantity, according ment may be partial or general, the fair to the importance of the injured vessel.

Finally, we may meet with purulent matter, either infiltrated, or collected into an

same lesion, but an assemblage of lesions few acceptional cases; partial par differing widely from one another in any mentioney, as we have just said,

character everal varieties of the disease, and the disease and to open ramollisement with declaration, to the disease are the conditions less different, and as are the causes which produce tiem. Officere, there are cases, where no single organ has been found in a state softening, but where all the organs and ties sues of the body have been more or less ramollified where all the organs present a Are we to attribute this state to an universal inflammation? Are we to say here that the whole body is but one phlegmon? Absurd. Every rational physician, instead of pushing the doctrine of inflammation to this ridiculous extent, will frankly avow that there are lesions of whose nature and cause we are still completely ignorant. I call to mind. on the instant, an example which may serve as an illustration of what we have just advanced. A student of the Polytechnic School was seized with symptoms of the disease which nosologists are agreed in callcare to remember, that softening may pre- ing "typhus suraigue" (the worst form of typhus fever). The disease was very rapid in its course, and after death we found all the organs, particularly those abounding in parenchymatous tissue, reduced to a state of perfect bouillie, so soft that the least touch crushed them in pieces: the different muscles were softened in the same way. The muscular tissue was crushed down on presblood, with an exaggeration of normal sure, like a portion of brain. Are we to suppose that all the muscles, all the viscera present case were affected with acute inflammation? Are we gratuitously to adopt accompanied with certain lesions which we this latter idea, in the case now alluded to in shall briefly enumerate. Thus we sometimes order to please those who see nothing in find the softened nervous pulp more or less ramollissement but an effect of inflamma-infiltrated with scrosity. In other cases tion?

Having thus endeavoured to lay before effusions, which are sometimes very con- you a concise history of the anatomical chasiderable, in proportion to the softened mass, racters that distinguish ramollissement

Seats which this Lesion may occupy.

Ramollissement may have its seat in any the nervous substance, or sometimes on a one point of the nervous centres, either in cause purely mechanical. The softened that portion which is contained within the cavity of the cranium, or in the prolongstion, without the skull, which is denound nated the spinal marrow. The remailings lesion is much the more op softening of the comment abscess, in the centre of the softened nervous substance.

Thus you see a variety of cases presenting
to our view, not only different degrees of the lesion is rare, and presents used only is a

in the brain, or in the spinal marrow and in the first great distinction according seat of the lesion. At the critician with find any part at the convolution, that without the theory of the hemispheric, the deeper state parts of the hemispheric, the deeper state of the crebellar ; the deeper state of the crebellar ; the crebellar is the crebellar in the crebellar in the crebellar is the crebellar in the crebellar in the crebellar is the crebellar in the crebe parts in which it is most frequently observed are the same where hemorrhage also is most common; for example, in the corpora striata, the optic thalami, and meighbourhood of those two gamelton Let us first examine ramollissement when seated

In the Hemispheres of the Brain.

Here the lesion may be confined to a small point of the convolutions, attacking cither the superficial layer of the cerebral substance, or having its seat in the deeper parts, immediately beneath the convolutions; either of the two layers now mentioned may be engaged in the discuse, independently of one another. When the superficial layer alone is softened, it requires some attention not to overlook the existrace of the lesion, which may easily escape your notice; in these cases the cortical substance is raised up with the via mater, which cannot be detached from it; it is generally more injected than hatural, but sometimes the softened nervous pulp adherent to the membranes is very pale, and colourless.

Ramollissement may, on the other hand, respect the superficial substance, and attack the nervous mass situate immediately beneath the convolutions; or we may find it still deeper, in the centrum ovale, or in the nervous substance which forms the roof of the lateral ventricles; this latter mass may be softened in totality, or the ramollissement may occupy merely a few isolated points of small extent, and it is remarkable that this latter lesion, though apparently so insignificant, may sometimes give rise to symptoms just as grave as when a whole lobe is softened.

In some cases we find the softening confined to the optic thalami, the corpora striata, or one or both of the medallary protubecauses contained in the anterior borns of the lateral ventricles (cornua ammonis); the optic thatami are sometimes softened on the surface only; that white medullary layer tradica trey are enveloped, no longer exto reduced to a kind of fluid pulp, The requirement of the state of the pure of the state of

more the servous pulp which forms the pa-debie of the lateral contrictes; in many though we have found a layer of nervous ester, softened, sad quite diffuent, spread over these parietes, and at the same thes a quantity of serous fluid shed into the

The central white parts of the brain (the corpus callosum, septum lucidum, and foruix) are also the seat of ramollissement, and this not unfrequently. Here, as in the other parts we have enumerated, the softening may be either general or partial; in some the ramollissement is so extensive, and carried to such a degree, that all these central parts are reduced to a fluid state, and nothing remains in their place but a substance of a homogeneous nature, little more consistent than jelly. The septum lucidum and fornix are more frequently found softened and reduced to this "bouillic," than the white mass constituting the corpus callosum; this latter body often preserves its normal consistency when the fornix is reduced to a mere pulp, and breaks down under the slightest touch, and we may remark that the pillars of the fornix, especially the anterior, are commonly less softened than its body.

Ramollissement of the septum lucidum and fornix coincides in a very great number of cases with an effusion of scrous fluid into the cavity of the lateral ventricles; the nervous substance is then sometimes reduced to such a degree of diffluence that we find nothing but a number of flocci, floating here and there in the serum which distends the ventricles.

Behind the parts we have just mentioned there are others that occasionally are the seat of ramollissement, but not so frequently as the brain, strictly so called. Thus we have examples on record where the mesocephale (pons varolii), the pedancles of the cerebrum and cerebellum, and, lastly, the cerebellum itself, have been seen more or less softened.

The Cerebellum and Spinal Marrow.

In some cases the whole mass of the cerebellum has been found in a softened state. in others the disease is less extensive, and we observe only a partial ramollissement, occupying one or more points of its substance.

Finally, ramollissement may exist in that part of the ccrebro spinal axis which is placed out of the cranium; several cases of softening of the spinal marrow have been described: sometimes in its whole extent: at others, and much more frequently, in a limited portion. The two substances which compose the spinal marrow may be softened. either together or eparately. Thus, for ex-Again, we find, occasionally, softening of ample, it may attack the gray substance other party of the nervous centres; thin, it alone, which occupies the interior of the in not unconfident for rampilingment to occupie the alone, which occupies the interior of the in not unconfident for rampilingment to occupie the allouid pulp, and hollow

axis. The whole brain and spinal marrow are simultaneously reduced to a liquid pulp, in which all trace of organization is lost. BILLARD has described ten cases of this kind, where softening of the whole brain coincided with a similar state of the spinal marrow. Finally, in the totality of the cerebro-spinal axis we may have only a single point softened, or the lesion may affect several distinct points at the same time; it is thus single or multiple. In the hemispheres it is often double, and it may be formed, either at the same time or gradually, in the brain, properly so called, and in the other parts of the nervous centres.

What are the Causes of Ramollissement

of the spinal marrow and brain? To complete the history of any disease we must produce it, with the same care that we in- this lesion the subject of special research, vestigate its symptoms or point out its treat- we should soon have as many cases recorded ment: but the causes which give rise to of softening in the adult and the child, as softening of the cerebro-spinal axis are very we now possess of cases in the aged. Thus, little known. Indeed, the only one whose while attached to the hospital of La Charité existence we can consider as actually de- (which receives patients of all ages indismonstrated, is external violence, and in these criminately), I observed several cases of cases the ramollissement is an immediate softening of the nervous centres in indieffect of irritation or inflammation. In viduals from seventeen to twenty years of cases where we can find no trace of irritation, where the nervous pulp, far from being the disease is frequently seen, though we injected, is, on the contrary, decoloured, and have no statistical report on which we can where the whole lesion consists in a simple diminution of cohesion, in these cases we must acknowledge that the present state of shows that ramollissement may exist to a the science does not permit us to explain the cause of ramollissement.

Softening of the nervous centres exists at all

Periods of Life.

It has been observed immediately after birth, even before birth, as a disease of the fetus in utero. Cases of ramollissement in the adult are not rare; in old persons they are frequent, and hence we may conclude that this lesion attacks individuals of all ages. from infancy to extreme old age, from the child of one month to the decrepid invalid of 80 or 90.

Is ramollissement the same at all ages, does it present itself more frequently at one period than another? We have just shown that the existence of ramollissement at all ages is a fact placed beyond doubt by the observations of LALLEMAND, ROSTAN, BIL-LARD, and ourselves. However, we cannot but admit that it is a lesion more frequently found at an advanced age than at any other period of life; but if you ask on what data we establish this proposition, if you desire

out the artificial canals of which we have specific attacked, we cannot give you a spoken when treating of atrophy of the proving centres. In examining the nervous centres.

Instead of being partial, a lasion which is on ramollisenesses that they wous centress by far the most common, ramollisement you will find a great military of cases occupy the whole of the cerebro-appeal spring in old persons, but do not appelled. from this that the disease is almost sively confined to old age. The cases of ramollissement hitherto published concern principally individuals advanced in life, because their authors were attached to, or studied in the hospitals appropriated to the aged and infirm." Thus, in M. Rostan's work on samollissement, you will certainly find the majority of cases reported belonging to old people, because M. ROSTAN was attached at that time to the Salpetriere, and all his cases were taken from that hospital. Indeed, we have no extensive collection of rases observed in any other establishment. The work of M. LALLEMAND is an excellent one, but his observations and deductions are chiefly founded upon cases reported by various authors which he has assembled toplete the history of any disease we must gether. It is probable, then, that if the endeavour to ascend to the causes which physicians of other hospitals were to make age. At the hospital Des Enfans Maludes determine the proportion of cases. Finally, as we have already remarked, M. BILLARD very great extent within the first few days after birth. Let us now turn to a consideration of the

Symptoms which accompany Ramollissement of the Nervous Centres.

Here, indeed, our task is a difficult one. To convert particular signs into a general description, to follow up the connection of cause and effect through a series of accidents, succeeding each other at every instant, replacing one another, or connected without any apparent order and regularity: to separate the various modifications of fun-tion which depend upon the complexity of ramollissement, from the passages really produced by the his to seize the traits of select through a multitude of on to throw them together, and ferm of whole a faithful resemblation. These points which, however difficult, we must no

The symptoms of ramollisesment (families with a certain degree of to know in what proportion the different ence, as the lexion may

Lesions of Intelligence

do we observe in this disease? The state of the intellectual faculties is a light or being the same in all cases of ramollissement of the brain; in the first place, we observe a certain number of examples, and they are by no means rare, in which the intelligence does not suffer any trouble whatever: the reason, judgment, memory, imagination, &c., and, in a word, all the faculties of the mind, are in a perfect state of integrity. In a second series of cases the intelligence is suddenly lost at the moment of invasion of the disease; this takes place when ramollissement commences by a sudden loss of consciousness, or by coma, as in apoplexy. At the termination of a few days the intelligence is restored, either perfectly, which is rare, or imperfectly, the patient remaining more or less dull up to the moment of death.

In a third series of cases the intelligence is modified from the beginning to the end of the disease, but the mental faculties are never completely lost, as in the former cases; here the intelligence is obtuse, dull; the various acts of the mind are performed with slowness and difficulty; the patient has that oppressed and stupid air which often marks the presence of typhus fever; when spoken to, they answer slowly and uncertainly; the memory is weakened, and their ideas are somewhat unconnected, or they fall into a state of constant sleepiness, which is sometimes one of the most striking phenomena of the disease.

delirium results. according the intervening periods. In some case it makes, its appearance at the state of the makely. In other the motility, then, like the intelligence, may undergo various modifications as a result of ramollissement of the creek at the mispheres. The lesion may be gradual or mispheres. The lesion may be gradual or motion or with the first for those cases in which loss a form spitialist to constitute a true mental signstification. Some netterts are seized with a

The different conditions of intelligence now pointed out may exist by turns in the body opposite the lesion; the hand, for ex-

different portions of the cerebro-spins aris; turned in a perfect state a few hours before and hence, according to the practice to least, although it had been previously have hitherto followed in the present course, we shall follow the disease of the cerebrant's the central parts of the disease. Thus you see by wast a variety of lesions of intelligence of the cerebrant's the central parts; and in the appearance of the brain is accompanied to the sease functions of the brain; it is disease. Thus you see by wast a variety of lesions of intelligence are the great functions of the brain; it is disease. The present that they cannot in any way serve to aid as in our diagnosis of the disease. Perhaps they may depend on the seat of the lesion; they may depend on the seat of the lesion; perhaps they are modified by its intensity, or by individual dispositions of constitution; perhaps various troubles of intelligence may be caused by different degrees of congestion which coexist with ramollissement, or can only be explained by a special disposition of the nervous centres, which, though suffering under one and the same organic lesion, yet are capable of manifesting the effects of this lesion by functional modifications of the most various kinds. However. as we have already said, it is not rare to find ramollissement passing through all its periods without having once given rise to any trouble of the mental faculties. We have frequently seen examples of this kind, but, on the other hand, it is more common to find the intelligence more or less obtuse.

Lesions of Motility.

The movement is injured in a much more frequent and constant manner than the intelligence. Exceptions do, indeed, exist where we find no lesion of motility; but these cases are very rare, and we may lay it down as a general principle that modification of motility is the lesion which characterizes most specially, softening of the brain. What is this modification? In what does it consist? How does it manifest itself? Nothing would be more convenient for the practitioner, nothing would contribute in a greater degree to render medicine an easy science, and to smooth down the difficulties which now beset us, than the discovery of an Finally, in a fourth variety, the intelli- invariable and constant connection between gence is so far disordered and troubled that certain symptoms and certain lesions. Thus, This is particularly ob- some authors contend that ramollissement served when ramollissement commences as always gives rise to muscular contractions; an acute malady, or is accompanied by any of others contend that contraction ends in the symptoms that characterize encephaliparalysis. But, unfortunately, nature does tis, or acute inflammation of the cerebral not always follow the same route; if we meninges. This delirium may exist in a have contraction of the muscles in many constant manner, or only manifest itself at cases of softening of the brain, there are intervals, the intelligence remaining quite certainly a few in which this phenomenon

of motion comes on in a slow and gradual manner. Some patients are seized with a weakness of the limbs on the side of the same individual, and we have seen cases ample, has lost its accustomed force, and where the mastel faculty has suddenly re- cannot grasp an object so firmly as before. The whole arm seems heavy of the the drags along in walking. This commence ment of paralysis gradually suggested with at length the patient is complainly depriting of the power of wotten on safe side of the body. We have frequently had superfusion of witnessing this ourselves, and is cause of this kind we may distinguish this weakness of limbs produced by rampellissement of the cerebral substance, from the language time the weakness, for in effusion of hood into the substance of the brain, the paralysis is generally brusque, sudden, instantaneously produced, whereas in rampellissement we observe quite an opposite fact; we first have simple weakness, and it may take a series of years before this terminates in perfect loss of metton.

In other cases the paralysis appears sud denly, and does not pass through the different degrees we have mentioned; the patient saddenly loses the power of moving his limbs, which are completely paralyzed in a few moments after the commencement of the attack. Here ramollissement bears the greatest resemblance to cerebral hemorrhage, and it is absolutely impossible to distinguish the two diseases at first from one another. In the state just mentioned, several cases present themselves; thus, audden paralysis may seize the patient, without being accompanied by any other morbid phenomenon: the patient is simply deprived of the power of motion in one or more limbs, but no other function is deranged or modified. In other cases this simple paralysis is replaced by convulsive movements, which persist for a greater or less period of time, and then terminate in paralysis. The convulsions generally occupy the side of the body opposite the softened hemisphere: they sometimes mark the commencement of the disease, then cease, and give place to contraction or paralysis. In other cases they manifest themselves at a later period, The convulalternating with paralysis. sions, instead of being confined to one side of the body, may be general; both sides are equally affected, and in these cases you will often find the cause explained by a double lesion of the brain, both hemispheres being softened at the same time. Finally, instead of occupying the side of the body opposite to the injured hemisphere, the convulsions may affect the limbs on the same side as the legion in the brain. It is not now the place to enter into the considerations to which this latter fact is calculated to give rise: we can only observe, that in all cases where these convulsions exist, or where convulsion, alternating with paralysis, presents itself, we may have reason for thinking that another disease than simple he morrhege exists; we may be justified in attributing the lesion of metility to ramolling ment of the cerebral hemispheres.

DANIGAL LECTURES

SURGICAL CAPRAN

JERVIS-STREET HOSPITAL, DUBLIN,

VILLE WALLACE, M.D., M.R.I.A.,

Surgeon to the Happital, and to the latituary for blaceses of the Skin, including Venezial Disses, and the consequent Diseases of the Vrinary and Sential Organs, &c. &c.

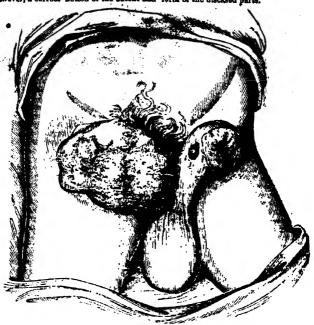
INFLUENCE OF THE HYDRIODATE OF POTASH IN MALIGNANT PUNGOUS AND CANCEROUS DISEASES.

are your attention this morning to the case of the servant man keogh, who lately died in Ward No. 6. It is, in many points of view, full of interest. It affords a good example of one of the most malignant discases to which we are subject, of the insidious manner in which such diseases may commence, of the difficulty of distinguishing them at their origin, and of the sad consequences that may result when their nature is misunderstood; but above all, it seems to demonstrate, as far as one case can, that a remedv, the hydriodate of potash, with which we have been only of late years made acquainted, is capable of exercising on such diseases a most remarkable influence. The general power of this medicine is, in my opinion, as yet underrated, and, perhaps, because its mode of administration is not understood. I shall have many opportunities of demonstrating this to you as soon as I enter on my clinical lectures on the venereal disease, when I shall give you the result of nearly three years' clinical investigation on the power of this medicine in syphilis. Whether the remarkable change which we witnessed in the case of Keogh was owing to the influence of the hydriodate of potash, I allow, admits of a doubt. A single case is quite insufficient to establish a fact of this kind. but it is amply sufficient to induce us to investigate the subject further; and if it should turn out to be a fact, that this remedial agent possesses the power which I have reason to believe it does pomess, there open to our view a view feld of bu the period is not distant when we able to control by medicine one of the diseases, which in these within the observation of

Case of Keogh.

Ton min started; have forgotten the above of this poor main when he fell under my care although very many fungues and maligains diseases have recurred to my diseavestion. shall never forget it. I have never it more remarkable, whether we const pecaliarity or the Here is a drawn

figure of the discused mass, or picture to repartable, whether we create any your research or an immense canning the property of the method of the penis, this is a drawfall of the penis, will exist a drawfall of the penis, this distributes but svery inadequasts of the distribute but svery inadequasts of the distribute of the penis, as well as the sectorin, being proportionably chlarged, and you will have an deal representation of the sector, and form of the diseased parts.



The tumour in the groin was, as the paler red colour, and by spots of a brighter drawing represents, of a rounded or oval red. Some of the brown patches felt soft form, fully seven inches long and five inches and elastic. The redder were comparatively broad. It extended, as you observe, from firmer, many of the whiter patches had a within two inches of the spine of the ilium, yellow tinge, particularly in the middle of to the front of the publs, and from three; the tumour, and these scenned to have less inches above to two inches below Poupart's vitality than the other parts. The discharge ligament. Its surface, which was in general was very copious, and was partly serous or ngament. Its surface, which was in general was very copious, and was partly serious or extremely irregular, or full of knobs and ichorous, and partly puriform. These disdepressions, presented about its middle part; charges seemed to come from distinct parts.

Largest-excevation, which, as well as the The former, or the thick puriform discharge from the surface of the fungus, and the capacity of a thin, clear, yellowish latter, or ichorous, from the edge of the field. This frames, for I may well call it by skin, and from the subjacent subcutaneous lines are in the surface that the surface is such as the surface in the charter than the surface in the charter than the surface in a certain extent. distinct from the other charter than the surface in a certain extent. distinct from the other bigher than the surrounding skin, a certain extent, distinct from the other.

meral appearance of its surface was the border of the tumour overhung consiqueans stallike that of the growth devably the integuments, and kence, the

standard was maittab, broken up the mass, could not be distinctly seen, or

to colour was maittab, broken up the mass, could not be distinctly seen, or

to colour was maittab, broken up the mass, could not be distinctly seen, or

to colour was maittab, broken up the mass, could not be distinctly seen, or nulations in the inside of the edge, when this could be seen, had refer a feathy appearance, and seemed to secrets puriform matter. The skin, for several inches at the outer or right side of the tumour, was of a realization good. The skin matter is the side of the tumour, was of a realization good. The skin matter is the side of the tumour, was of a realization good. The skin matter is not uniformly so, but in streaks. In all other parts, the surrounding skin presented a Kealthy appear ance, excepting between the timour on one side, and the pents and scrutnin on the other, and there it was livid and very missing with an occasional darring sense-other, and there it was livid and very missing with an occasional darring sense-other, and there it was livid and very missing with an occasional darring sense-other, and there it was livid and very missing with an occasional darring sense-other, and there it was livid and very missing with an occasional darring sense-other, and there it was livid and very missing with an occasional darring sense-other, and there it was livid and very missing the parts, which distressed him

The fungus, or tumour on the penis, was seated on its right side and under part, and was not less than three inches in diameter: It resembled in its form and colour, in a the groin. It was, however, of a firmer consistence and paler colour. It was rounded, and its circumference overhung the edge of the skin. Its surface was irregular, presenting numerous depressions of a small the depressions were filled with a clear ichor.

There were, also, as you may remember, on the common integuments of the penis, two other diseased spots, of a smaller size, one on the right side, of the magnitude of a large pea, of a whitish pulpy appearance, considerably elevated, and the skin mounting at its side, so as to reach the level of its the penis, and of the diameter of a farthing. One portion of its surface was sloughy, or pulpy, and another was covered by apparently healthy granulations. This diseased patch was continuous, at one side, with the larger fungus on the penis, and in every other part it was surrounded by skin which had a healthy colour, but was raised into a kind of welt, which thinned down as it approached the immediate edge of the sore.

The integuments of both penis and scrotum were greatly thickened, and of a crimson colour, with a tinge of lividity. The scrotum was elongated and lax, and was kept constantly bathed with the discharge which flowed down from the fungous masses. The spermatic cord at the right or diseased side was as thick as a finger, but the same part on the left, as well as the lymphatic glands of the corresponding groin, were free from enlargement. Besides the discharge which was effused from the surfaces of the tumour, and from their circumference, there was a

He was very pale and much emaciated. His pulse was upwards of 100, and very His pulse was upwards of 100, and very water sore, or served on the right side of the inner surface heetic. A rigor commenced each night of the prepuca, mear the current gla dis, about nine o'clock, at which time he was which was soos followed by a parapiration, which was soos followed by a parapiration, and this was followed by a parapiration. They united in a short protty much confined to his head and the former. They united in a short protty much confined to his head and the former.

days, I believe he fell under my care, and I have been informed that when he was admitted the immoure were not more than very striking manner, the larger tumour in half the size which they were when I first saw him; that the skin surrounding the one in the groin was of a livid colour, very tender, and presented anmerous small varicose veins distributed through its structure; that the surface of the tumour was insize and a larger hollow in its centre. All sensible and tubercular, or very much of the form of a hunch of hydatids. I have been also informed, that it presented (probably in consequence of the manner in which the edge of the skin was hidden by the overlapping fungus) such an appearance as to lead to the supposition that the disease was seated in the integuments rather than in the subcutaneous parts, and that it did not surface. The second was on the left side of resemble either fungus hamatodes or cancer, but was, in appearance, like the fungus which often grows from a testicle which has undergone chronic inflammation and suppuration.

It is, in general, very difficult to obtain a satisfactory account of the origin and progress of a disease which has been some time in existence; but as all the circumstances of this case were such as to make me very desirous to ascertain with accuracy its history, I took considerable trouble on the subject. I interrogated the patient and his wife separately, and made some inquiries from persons who had seen him in an early stage of the disease. From these sources of information it appeared that up to about sixteen months ago, at which time he was thirty years of age, he had a perfectly healthy constitution, that he never had contracted any venercal disease, except one about five years ago, and that was not fol-lowed by any secondary symptoms, that since then he had been manifold, there his habits had been many windled that he and from their circumference, there was a coplous puriform discharge from an opening or aft in the front of the scrotum, which led into the cellular tissue, as well as from the orifice of the swelled prepuce.

He was very rate and number or circum, which her long after the prothe orifice of the swelled prepuce. that about sixteen months ago a small vated sore, or livid spongy, wert, was served on the right side of the inner surface

give any stiention to them, and sixtle seven months ago they made little process.

At this time he was throughout the seven months ago. the are streamen to them, and was streament the steam was apout more recusing seven months ago they made little product to the stage of these cases in which we may lible, and, and whole, experienced at the be justified in trying any remedy which At this time he was then medical of forms, dragged for some wife di the, ground with his foot in the state was rendered insurdually increased to the size of a physon, egg. He now applied at an hospit he got black wash and griped him very much, and worse. He next consulted in geon, who saw him at his own home, from whom he got pills, which he believes were mercurial, but they did not make his mouth sore. Not finding himself improved, he went into an hospital. Even at this time he could denude the glans penis, and the tumour was neither very large nor discoloured. He was now, unfortunately, put under a mercurial course, which excited much inflammation, and phymosis in consequence ensued. The tumour in his groin increased, and became red. An ulcer now formed on the outside of the inflamed prepuce, opposite to where the wart to which I have alluded was placed, and through this ulcer a fungous mass quickly protruded. The tumour in the groin soon after increased to the size of a goose-egg, and was still remarkably hard, but after a time it became irregularly soft, and of a livid or crimson colour. At this period, finding himself much worse, he solicited his discharge from the hospital, and, soon after, the skin covering the tumour in his groin gave way, and a fungus protruded. He now placed himment until he was admitted into this hos-

When I first saw this patient, I asked, "What has been done for him since he came into our hospital?" "The parts have been covered with a common poultice, and creosote has been administered internally," was the reply. That no advantage had resulted was evident, for the disease had doubled its dimensions since his admission; his hectical symptoms had rather increased; he

he spench which was about hime He still, sible, and, an the whole, experienced at the be justined in trying any time a great shock. Soon after this his affords a ray of hope; a kind of case which time a great shock. Soon after this his affords a ray of hope; a kind of case which Ettention was attracted to his right groin, demands, in fact, from every man anxious where he felt a small firm kernel. This grato extend the boundaries of his art, a trial, this proced limits, of empirical treatment; the for remedies which we know to possess the power of influencing the system to see the syste they may by their action influence the dis-east. We are often, indubitably, obliged to act in this manner. How frequently are mercury and arsenic given upon no better foundation! I had, as you know, been trying for a long period, and in various cases, with remarkable success, the hydriodate of potash. Come, said I, let us try it in this case. I ordered it, but with scarcely a ray of hope that it would in any way control or influence the morbid actions going forward. It was given to him in the dose in which I commonly administer this medicine; that is, seven grains three times a day, in an aqueous solution. He commenced on the 9th of October; on the 12th I observed, on going round the wards, a decided alteration in the style of his countenance. He looked, comparatively speaking, tranquil. He told me he had had a better night than any since he had come into the hospital, and that the pain in the parts was much diminished. Could these changes be owing to the hydriodate of potash? I reflected with myself. I could not, I confess, a fungus protruided. He now placed him-feel that they were. This medicine was, self under a country peasant, who gave him however, continued. I saw him daily, some-" herbs," and he remained under this treat- times looking at the tumour, and sometimes not, but I did not notice any remarkable change further than that which I have just mentioned, that is, in the state of his pain, until the 18th, or nine days after he had commenced the hydriodate of potash, when he complained very much of soreness of his throat. On the 20th he complained still more. I examined his throat, but could not observe anything to be the matter. Presunning that it was a state of throat analogous to that which not unfrequently occurs seemed miserable in his feelings; his nights from the employment of the hydriodate of were resteasy and his pain was great. I contained the supported him to discontinue this contained the southern and to take a mixture containing recting the southern to be pat on the part, wet with a weak solution of the chlorate of limes I also ditter the support to me to be a little smaller. usion of the chlorate of limes Lako dl they appeared to me to be a little smaller. draught, and, during the day, my fa suspicion, for the decrease was, if any, not tranger, and, during the day, my is
suspicion, for the decrease was, it any, not

condide to the state of cards
monia and complaind tincture of cards
monia with a manufa quantity of tincture of

opium, made gratoful with siren of orange
peel, and some aromatic distilled water.

These change is his sreatment seemed to

add to his control and greatly diministed

day was loaded with the hydriodate of

side to the forces. His urine on this

day was loaded with the hydriodate of On the 24th of the stants, or formers, days after he had committed the lydisolate of potash, the strengton is the state, the tumour, as you may restembly, and the greatest surprise. It was estimate the greatest surprise. It was estimate the greatest surprise. It was estimated the greatest surprise. It was estimated to each all its former magnitude, and the surprise was no pain in the part, no surrounding fandmandion; the dull heavy sensation and the shooting pains had entirely ceased; he appeared quite tranquil; his nights were spent comfortably; his appetite continued, and, on the whole, there was so remarkable a change, that I was nearly vain second to suppose it possible he might recover. I now directed the hydriodate of potash, at trace of which was will visible in its urine, to be again given, but in half deeps only; and to prevent the return of the last of throat of which he complained with the of throat of which he complained with the other of the should continue his quintee mixture, taking it before, and the hydriodate of potash after his meals.

Under this treatment his throat continued easy, the decrease in the size of the fungi progressed, their middle portion crumbled away more rapidly than the circumference. and the diseased mass in the groin now assumed strikingly the appearance of an ordinary carcinomatons sore. The comparatively happy and tranquil state which I have already remarked, persisted, and his appetite remained sufficiently good. But, notwithstanding these pleasing circumstances, his weakness increased, his pulse became more debilitated and thready. short, the disease seemed to be going off, and his strength to be, in the same proportion, declining.

On the 10th of November, at which time he was still continuing his medicine, the discased fungous mass had totally disappeared from several parts, and at these parts the surface had acquired the aspect of a phagedenic or sloughy sore, yet there was scarcely a blush of surrounding inflammation, and no pain.

The hydriodate of potash was now omitted, the sulphate of quinine was continued, and the diseased surfaces were covered with hot dressings of clemi and turpentine.

On the 22nd of November there was not a trace of the fungous masses; the penis seemed as if it had been amputated exactly between the fungus and the comparatively sound part. It, as well as the scrotum, was no longer either swelled or red. The size and inflammation of these parts had declined with the decrease of the tumour. The fungous mass in the groin had also disappeared, and a deep and dark excavation, of the size of a plate, occupied its place.

of the size of a plate, occupied its place. He was now sinking rapidly, yet he still presented an appearance of remarkable contentment, and exhibited an extremely

police sank to a pulse sank to

Astepsia.

I examined the nody six hours after death and made at the time a note of the dissection, which I shall read to you:—

"Extreme emaciation; no odema of the

"Extreme emaciation; no odema of the lower limbs; the transparency and thinness of the skin covering the arms and thorax, allows which of colour produced by the subject muscles to be observed, which gives very much the appearance, on the surface, of incipient putrefaction. The lower limbs are elightly stiff, but the muscles of the upper part of the body are quite free from rigidity

"The diseased surface, which had the groin for its centre, is fully seven inches long, and six inches broad. It is covered by a thick stratum of pulpy brown matter, which is easily scraped off with the back of a kuife. In thus clearing away the pulp, a portion of the anterior wall of the femoral vein has been removed. The internal surface of this vein, extending up and down for an inch from this part, is of a dark-brown colour, like the pulpy mass which covered the diseased surface, and is softened in its texture. At this part, and for some inches above and below, the vein is imperfectly filled with a coagulum, devoid of colouring matter, as far as the vein is discoloured; but above and below this, it presents the usual red appear-ance of such coagula. The femoral artery seems sound, yet the parts covering it are scarcely less diseased or softened than those which covered the vein. The cellular texture on the lateral and posterior aspects of these vessels, has, when divided with a knife, somewhat of a cartilaginous appearance. The femoral nerve does not appear diseased. The aponcurotic expansion of the external oblique muscle, as well as the fascia lata, are exposed, upon the removal of some soft brown matter which covered them, and their structure seems softened. This extensive diseased surface does not a pear to have any base, or, in other we the more subjacent parts do not ap eased. The extremity of the penis h removed, and the end of its the same soft or pulpy matter served in the grain. When served in the grain. Then the soft matter is rubbed off, the entire. of urwitten, the entremities of the cor-position and corpus covernogen, ap-mentaged at their ends, but without the all est aspect of thickening mas if there

been any inflammatory settion. The light an appearance which belongs much more spermatic cord is quite insulated. Her berhaps to cancer than to fungus. It is inexternal ring to the distribution of the perhaps to cancer than to fungus. It is inexternal ring to the distribution of the contract of the co been any inflammatory action. I

lungs were remarkably collapsed.

head, pericardium, or peritoneum.

Remarks.

me what was the disease, I should feel some have been considering. hesitation in answering your question. Was it fungus bamatodes? Was it cancer? who saw this case said it was cancer, some tion of the hydriodate of potash. that it was fungus hamatodes, and others analogous to lipoma of the testis. In some respects it resembled cancer; in some fungus, and in others it differed from both, on the as great a right to cancer to claim it, as it did to fanges. The one seldon appears and now many states and the prepared of the prepared in the disease presented on the prepared in the ore with concer perhaps than with particularly if accompanied by a tumour in the prepared of the prepared in the groin, is venereal. If the disease on the sectors that the state of a sector of concer, then the soft share return character of concern the prepared in the prepared in

nation of the disease from the right groin, sore. The insulated character of the dis-The lymphatic glands of the left groin are case was very remarkable. Neither the very slightly enlarged, but their section implication system nor any other part or does not present any remarkable upper viscus of the whole body, seemed to have ance. Neither the ilian new large limits suffered beyond the immediately engaged glands, nor any of the lymphatic glands in parts. The roots of the disease did not any part of the body, are diseased or one even ramify at all among the subjacent or even ramify at all among the subjacent or surrounding parts. In both these respects "There is a remarkable degree of anemia it differed from the course which cancer, as of all the viscera. The blood, wherever well as fungus, in general, pursues. Alobserved, is so watery as to be nearly void
of colour. The serons membranes all feel
dry and sticky, yet there is in the head a
slight sub-arachnoid effusion. I collected
in the pericardium a dessertspoonful of a
yellow scrum; none could be obtained in
which cavity of the alumn about a desserts before the diseased mass
yellow scrum; none could be obtained in
which cavity of the alumn about a dessert to shrink away, when the dressing either cavity of the pleura; about a dessert- adhered to any part, a small drop of sanspoonful is found in the pelvic pouch of the guineous fluid would sometimes exude, but peritoneum. There is no other diseased ap- not perhaps in greater quantity than would pearance in any of the internal parts, if we occur from a common granulating sore, if except two white patches, of old formation, there was an adhesion between its surface on the heart; one small, on the left ven- and lint which had been placed on it; and tricle, and one larger in the right." The the hemorrhage which occurred on one or two occasions, when the disease was in its I detected a trace of the hydriodate of more advanced stage, was not from capilpotash in a small quantity of urine which laries, but from vessels which had been was found in the bladder, but could not de- opened by the destructive process. On the text any in the serum collected from the whole, I should be disposed to say, that we must either consider it specifically different from both cancer and fungus, although it certainly belonged to their genus, or else I have now detailed to you all the facts we must extend our views respecting the that have come to my knowledge respect- characters of these diseases, so as to make ing this interesting case. Suppose you asked our definition include the case which we

The more important practical points connected with the subject relate, however, to Was it a disease compounded of those two the diagnosis of the disease in its early stage; morbid states? Or was it a disease of a and to the cause of the changes which ocpeculiar kind, differing from both? Some curred while the patient was under the ac-

There can be no doubt but that when the said it was neither, that it was a disease disease commenced, it was mistaken by more than one person for a venercal affection; nor do I wonder at this when I reflect

> General want of Accurate or Scientific Knowledge of the Appearances of Venereal Dis-

the venereal sore which I have a in my treatise on the veneral by the name of "fungous syphilisi ing excavated ulceration;" and the later patch equally resembled the arts called in me "white phagedenic syphilis." Can any case show in a stronger light the necessity of giving attention to the diagnosis of mary venereal affections? I could desi you numberless cases in illustration of a great ignorance which prevails even amon otherwise well-educated medical practitherefore of taking up our time with such process of sloughing, things?" I have been hearing this kind of If the change which occurred in this case attention of the medical student are very numerous and complex, but I am convinced that by a proper system of education, vastly more may be done than is done, and with vastly less trouble. But to conclude, What was the cause of the

Extraordinary Change which took place. in Keogh's Case?

Was it a change brought about by the natural progress of the disease, or was it the result of cite your attention to her case progress of the disease, or was it the result of the object is choosing the energy the action of a remedy, the extent of whose of two objects is choosing the energy nower we do not as yet know? In my power we do not as yet know? In they opinion the latter was the case, and I will

by I have formed this opinion. In the from my knowledge of the hydrodate of secured in Kee of a woman in No. 8, the who whose body was, as it were, riddled with m, or ill-conditioned ulcerated excevacarhich she had laboured for for which she had been hospitals in Dublin. See otherwise well-educated medical practitioners, respecting these diseases. Here is state by said me in the state of the produced in her
tioners, respecting these diseases. Here is state by said me in the state of the produced in her
a drawing of the penis of a patient sont to guilariping the pay one now, as a propose to
me from a distant county, and represented as make it the subject matter, with many a case of obstinate emercal sore. It is a others of future consideration. In the case of well-marked incipient cancer, second phose the change in the disease of Within the last week I was consulted by a Koggh was quite synchronous with the married lady, for an eruption. She had action of the remedy. Very soon after the been under the care of several practitioners, medicine was exhibited, the painful condi-The eruption was a well-marked venereal tion of the fungus subsided; and as soon as eruption, which she had contracted from the system was saturated with it, the disher husband, to whom she had been married eased mass began to melt away. In the sbont a year and a half; but its nature was third place, the destruction of parts which never suspected, and the treatment adopted occurred was quite different from that had been of no use to her. You will not which not unfrequently occurs in mafeel the importance of a knowledge of the lignant fungous diseases, as well bevenereal disease until you go into practice, cause it happened at the same time and then such of you as have not attended in every part of the diseased surface, to it will regret the opportunities you have in both groin and penis, as because it prolost. "Oh! we are not examined on these ceeded in a most gradual manner. It was subjects for our descriptions of the control of the c subjects for our degree; what is the use much more a process of softening than a

remarks, on various important subjects of was owing, as I firmly believe it to have medical study, for several years. I valuely been, to the hydriodate of potash, a great hoped that such a change would long ere field for hope, and for investigation in the this have taken place in medical education as treatment of these malignment discases, is, would have led pupils to give sufficient atten- as I have already said, opened to us; and I tion to practically useful subjects, but that shall certainly lose no time in investigating change has not as yet occurred. I am the subject upon every proper opportunity. convinced I do not exaggerate when I say, You are aware that within the last few days that not one third of the stuff with which I have admitted into the ward No. 8, a pupils are, for the sake of their examination, woman, Mary Hudson, who labours under a pupils are, for the sake of their examination, woman, Mary Hudson, who labours under a called upon to cram themselves, will be of most extensive and malignant ulcerated the slightest use to them hereafter, while disease of the breast, accompanied by enthey often neglect those subjects which they larged axillary glands. If we credit her should attend to, and that because they are statement, and the appearance of the part not the subjects of examination. Time will fully justifies it, the torture that she suffered no doubt bring a remedy for this crying for the two years before her admission has evil, and I hope the time is not far distant. been of the most insupportable kind. This I admit that the objects which require the case has appeared to me well suited to a trial of the plan which I adopted in the case of Keogh. I consequently ordered the by-driodate of petain a few days ago, and I have experienced no small cratification by finding that her pain has been already action discharged. Sincerely do I hope many her medicine. A shorthing will dealed question. question. I hope you will attend clothe phenomena which may active.

It was my intention to h

remarks this morning on the state of the patient presented the assemavoided in the employment of the days of symptoms which constitute what is date of potath, and the following the commonly called the inflammatory fever; have restricted the presented application; floor red and admitted; eyes brilliant; head-quid indiae, and there particularly on the interior is the patient of the patient presented the assemble patient presented the assemble patient presented the assemble patient presented the assemble patient presented the patient presented the assemble patient presented the patient presented notash,—the preparation so strongly recommended by Lugol. But, as our time has expired I shall reserve where the transfer of the second upon these points for a few my intention to comment the Side Informaty, a second of than one-hundred and twenty passage which have occurred between the two institutions, and the treatment of which, by the hydriodate of potash, I have made the subject of investigation. Let me add that I have derived results which I have much reason to expect will excite great interest. It was a desire on my part to complete this investigation, in which I have been now engaged for more than two years, which has hitherto delayed the publication of the discase.

HOPITAL DES ENFANS MALADES. PARIS.

RESEARCHES INTO THE DISEASES OF CHILDREN,

CONDUCTED ON THE

KNOWN PRINCIPLES OF ANATOMY AND PATHOLOGY.

TYPHUS FEVER IN THE YOUNG.

(Concluded from page \$61.)

good constitution, and apparently strong, was received into the hospital on the 4th of December, 1834; her disease dates ten days; the patient, who was born in the country, has lived at Paris for the last twelve months only; she works in a large shop and sleeps in an airy room; during the first year of her arrival at Paris she did not experience the least disturbance in the digestive organs; however, at the end of November, without any appreciable cause, she was seized with headschar, and pain in the abdomen. These colour and dryness that we have already properties are markable distinct. The substitute of fatigues a remarkable distinct. The substitute names, and lose of the appetite, names, and lose of the appetite, names, and lose of the appetite names, and lose of the appetite names. The publications not had any up-but she frequently observed some On the 2nd bible wheather the nose. On the find namerous, the abdomen is a little tympaof Decrement constant: favor; protration; nitic, but less painful; the patient, whose
exaspunction of the headachs; pain of the intelligence is now clear, affirms that she
abdoming the child was now confined, to does not suffer any pain. The sense of
last, and placed an diet; no remedies of an lasting is still more obuse; there is some active nature amployed. On the 5th of ringing sound in the ears; the prostration

drink and strict diet. In the evening the patient was select with violent delirium; the permissed all night: the child got out of Seed continually, and traversed the wards uttering loud cries; it became necessary to confine her in bed with the strait-waistcoat.

6. Dorsal decubitur; stupidity without prostration; the hearing is dull; the headsche persists; the conjunctive are injected; she answers shortly but correctly; the tongue is covered with a sort of clammy fur of a grayish colour; breath foul; deglutt-tion is easy; thirst excessive; complete loss of appetite; no nausea or vomiting; abdomen free from pain, and marked by two or three rosy spots; only one stool for the last second volume of my work on the venereal twenty-four hours; pulse regular and soft, 120 as in the ovening; the skin still warm and dry; the respiration slightly accelerated, is 36; cough; rale sibilant equally audible at both sides of the chest. The patient remained pretty calm until two o'clock, but she then commenced to sing, and disturbed the whole ward by constant cries; the de-lirium and agitation continued until the following morning.

7. The patient is now in a state of prostration; the face has an expression of stupidity, and the deafness is more evident; she answers slowly; the rose-spots are very numerous over the front of the abdomen and chest. The state of the tongue is the same as yesterday; no stool; pulse 120; respiration 30; a pain is felt under the sternum and in the abdomen; the cough CASE 3 .- Zoe Guilbert, 14 years of age of and rale sibilant are the same as before; the nature of the disease was now evident; the patient was ordered a bottle of Seidlitz water, to be taken in glassfuls every three

hours

8. The delirium has been just as violent as in the former nights; the patient has taken the whole bottle of Scidlitz water, which produced only two evacuations; the skin is now more dry than before, but not more warm; the tongue trembles when put out, and presents the same characters of

9. The evacuations have become more

of strength is now more marked; the tient can sit up in bed with speift dis pulse 124; respiration 48; cough fr rice subcrepitant on the right si chest behind, but no diminution of so Continue the Seidlitz Water, unEth with an Inflation of Marsh-mallows.

The delirium, which for the last ten days existed only at night, now broke out during the day time with great intensity. The patient left her bed, and ran about the want with a tottering gait, causing great

amongst the other children.

10. The number of evacuations is still 10. The number of asparition is at a till increased; some hars been passed involving tarily. The patient mays the abdomen is free from pain, but resolvent prossure causes a contraction of the states of the face, and evident suffering. The is new no delivium; the patient only that the head heavy. A discharge has taken added from the left ear, and the sense of hear the almost completely abolished; the rost pits still continue, but we do not observe in the sufficient in the continue. nue, but we do not observe any sudamina; the cough is less frequent; the respiration not so accelerated; pulse 120; respiration 24. Three Glasses of Beidlitz Water.

11. Less dolirium this night; the diarrhoes persists, and the stools are generally passed without conscioneness; the lips are dry and cracked; the tongue clammy, but without any crust; the abdomen is moderately sensible to pressure; the points most sensitive are in the epigastrium and right iliac regions; pulse 124. Continue the Seid-

litz Water.

From the 12th to the 17th day, on which the use of Seidlitz water was suspended, the patient became gradually better; the pulse fell from 120 to 108; the skin lost its dryness. The delirium went off, and the sleep returned insensibly. On the 14th we observe a few sudamina on the neck; the stools are no longer involuntary, and the number diminishes by degrees; the slight pain which occupied the right side of the abdomen has disappeared.

18. On making the visit, we find the patient sitting up in bed; the expression of the countenance is now natural; the intelligence perfectly clear; the hearing no longer dull. The patient sleeps quietly during the night; the muscular force is nearly recovered. The patient can walk about, and she seems nearly as fat as when admitted into the hospital. The tongue is now moist and clean; the appetite good; abdomen free from pain on pressure; no cough; pulmonary expansion good; pulse now 108. The patient complains of severe pain in the right ear. Three Lesches behind the Ear; Broths.

20. A purulent discharge from the right ear has set in. On the 24th the patient got up for the first time, and took some solid han water affection almost. The state of convalencence progressed to the 28th, when she was select been described by systems

r and general malaise, without iting. These symptoms coninvalinatednext day benign, although the restinated. On the 5th of lever, which had fallen since returned, and persisted for two days. Desiccation is general. The patient was now vaccinated, but without any result.

15th of January she left the hospital . Com-

pletely bured

Care 4.—Part Concent, 8 years of age, orting Parts of a delicate constitution, was rought to the hospital on the 18th of November in a completă state of delirium ; on the following morning we ascertained that the child had been first days ill. The night had been passed in a thate of excessive agi-tation. He made water in bed, but had no stool. The child now lies in a state of stupor. The intelligence is dull; the tongue red and smooth; thirst great; febrile movement very intense; several rose-spots on the abdomen; but pressure scems to give little or no pain; the bowels are constipated. The physician ordered a bottle of Scidlitz water to be taken during the day; this produced six stools; one vomiting; delirium during the night.

20. The fever is now more intense; in the evening the pulse was 120, it has risen today to 130. The tongue, however, is not more dry; the abdomen is but slightly tender; there is a little meteorismus. quantity of eau de Seltz is reduced to three glasses. 21st. The stools are very frequent. and the abdomen is more painful on pressure than it has hitherto been. The febrile action is very intense. Suspend the Scidlitz Water.

From the 22nd to the 27th, the fever continues, and is accompanied every evening by a paroxysm, during which the patient's intellectual faculties are completely lost. The diarrhosa persists equally; two or three liquid stools every day. No active treatment is had recourse to. The physician is content with ordering a cooling draught.

28 We observe numerous sudamina on the neck and chest. The skin is now moist, and the pulse has fallen to 104; the patient passed a quiet night. During the following days the symptoms gradually declined. patient was allowed to take some solid fo charged from the hospital bereetly we

The above cas described lest me cannot be arrange

tacking children at a very early n life. However, the more we a eases of mildren, the of the truth of t by M. Grand of the third shildren salicet at all the diseases of adults, in addition, to certain maladies which po peculiar to their tender age. Thus, in the course of November last, we had occasion to observe the case of a long sight years of age, affected with a state of fistula at the root of the scrots result of an accidental lesion, in a gradual manner, like the flately by stricture in the adult. Another case, not less rare, presented itself on the 18th of December, 1835. A boy, fourteen years of age, was brought to the hospital in a state of extreme weakness; pulse 1:0; violent pain of the abdomen; twenty to twenty-four stools in the day. The patient died in a few hours after his admission, and, on examining the body, the abdominal aorta was found to be the seat of three large false aneurysms; the superior of which, placed nearly on a level with the kidney, had given way, to the extent of a couple of inches. About the same time, a case of cancer of the abdomen was observed in the "service" of M. JABRLOT, in a child six years of age.

The four cases we have detailed are sufficient to indicate the general characters of typhus in the child; the symptoms, indeed, seem to differ very little from those which mark the disease in the adult; there is the same prostration of strength, the same derangement of the intelligence without any sign of cerebral inflammation-in a word, the same tendency to adynamic and ataxic symptoms: however, the affection is, generally speaking, a much milder one in the child than in the adult; the mortality is much less for the former than for the latter, but the march of the disease is precisely the same, and after death we find the same letions in the intestinal consis-

The treatment adopted at the Hopital des England Extremely thouse and all the Hopital from that which pursued in England. M. GURBERN COMPANIES. (sw leaches to the Adoption (if the Mark Market alled the expectant randond, in the hope of the control of the contro

positions the greelves, he orders a sepid bath, the paid afferigation site head, and applies better the thighe instead of sinspiants. The adjustment grapheous are stately treated the plane very far advanced. A laverages, with quinine, is then therein up the rectum, and a few spoonfuls of Bordeaux or Halaga wine are given every now and then.

Bayner ocque is the only physician in vogue in Regiand since the publication of the mork of HAMMEON. The medicament he administers in preference to others is Scidlitz water. The advantage of purging, however, has appared very doubtful, especially in the few months, during which a tendency. Eyentery has prevailed amongst the pass. In several cases the administration as few spoonfuls of Seidenstein and the several cases the several case the several cases the several case the several cases the several cases the several cases the seve lew months, during litz water, determined severe purging and dysenteric symptoms, which eventually carried off the patient. It is hardly necessary for us to make any farther remarks on this subject, we shall therefore merely observe, in conclusion, that, on examining the bodies of children which have been cut off by this disease, we have never yet discovered the least trace of inflammation in the cerebrospinal system. The stupor, the delicium. and the convulsive movements, are merely sympathetic phenomena, and certainly are not connected with an organic change of the brain, yet how often do we see the whole attention of the physician directed to these symptoms!

P. H. GREEN.

APHONIA

OF TWELVE MONTHS' DURATION SUCCESS-FULLY TREATED BY

TONICS AND REPRATED BLISTERING.

To the Editor of THE LANCET.

Sia.—From the following case we see the necessity and utility of a sufficient continuance in any line of practice we may deem requisite in chronic affections. At an early period of the disease, the patient had been twice blistered and had also used tonic medicines, but unfortunately they had been discontinued too soon. If, therefore, the publication of this case in your valuable Journal be in the slightest degree the means of restoring to any other similarly situated individual

that faculty which places us to each oth in the relative capacity of social belogs, it object will be fully accomplished.

I am, Sir, yours &c., JAMES INGLIS, M.D., M.R.C.S.E. Castle Douglas, Feb. 23, 1836.

Jean Gibson, set. 22, of a healthy and rather plethoric habit of body, was three years ago seized with cholers, during the rage of that epidemic. The attendant surgeon using large doses of calomel for the removal of this disease, poured into her a double portion in consequence of a relapse. Ptyalism to a considerable extent followed, and she continued extremely weak for a long time afterwards. Recovery to health gradually took place; and she continued as ervant to a family in the neighbourhood, until, being exposed to the cold night air. about the end of last February, she contracted a cold, accompanied by a considerable degree of sore throat. On Saturday (the day following the exposure) she comlained more of the throat, and got hoarser towards the afternoon, which hoarseness continued to increase till the Monday morning, when the voice entirely left her.

In consequence of this attack she left her place and returned home; but feeling herself much better at the end of a fortnight she again entered service. For several weeks the throat annoyed her, but at length, without using any means. it got quite relieved, so far at least as pain was concerned. From that time to the present she has enjoyed good health, every function of the body being normally performed, with the excep-tion of that of the organ of voice. In the month of June or July she applied to a gentleman of considerable note, who, after trying the effect of several remedies, at last dismissed her with the consolation that the voice would never again be restored. After this, several medical men saw her, and had administered tonics, expectorants, acids, sarsaparilla, iodine, &c. &c.; she had also been twice blistered, but all with a similar result, so that the conclusion was that the profuse exhibition of calomel being the cause, the disease could never be remedied.

It was under these circumstances that during some part of the month of November she first applied to me. On reviewing her case, I considered that the mercury could not have been the cause, inamuch as two years had elapsed since its exhibition, whereas had it really been so, the effect would have been much sooner apparent. My opinion was that the loss of voice arose from a thickening of the laryngeal mucous membrane, and atony of the vocal chords, the gently employed.

Anticomparison of the vocal chords, the gently employed.

Anticomparison of the vocal chords, because paralytic, become and that if that could be overcome the anticomparison of the track of the week would be restored. For this purpose rot, being relieved by the application, we also the thight, nor by applications, we consider the thight of the property of the specific to the thight, nor by applications, we consider the thight of the purpose of the thight of the purpose. brane, and atony of the vocal chords, the I recommended repeated blisters alo larynx and traches, one every fifth or

oon as the surface would admit ation. At the same time she hally every morning and of the in-fally every morning and of the following rders. B. Carbanatha Providers ombe Sill. owders. Colombe 3ii; Palv. Alone 94. After taking these sighs in pulv xviii. powders, and blistering three times, I thought I could discover some improvement, I therefore repeated them, with the addition of 9 of chinine, and ordered a continuence of the flisters. She remained nearly in the inine, and ordered a continuence of same condition, till after having taken the thirty-sixth powder, and having blistered six times, the voice was restored, and she now speaks with all that freedom and volubility which characterize her sex.

AMENORRHOLA.

A case of amenorrhous successfully combated by the application of sinapisms to the mammæ, is related by M. Hulin-Oniger. Secretary to the Medical Society of the Indre and Loire, in France, in the Revue des Journaux de Médecine for August last. The number of analogous facts are so considerable, that so doubt can remain with regard to the suitableness of the means in numerous cases of amenorrhoes, and now that their efficacy is rendered so unquestionable, it only remains to state the description of cases in which the sinapisms may be employed with hopes of success, at the same time indicating those in which this measure is contra-indicated; for we do not expect that all obstinate cases will be so treated with equal advantage. At present we shall simply give further circulation to the new fact which we have above mentioned, in addition to those which are already known.

Case .- Josephine B., aged fifteen years, of a lymphatico-sanguine temperament, and having a good constitution, had had her catamenia only thrice since her eleventh year. In the spring of 1832 she was seized with convulsive motions of the arms and wrists, in consequence of profound grief and sudden alarm. Some days afterwards she was unable to move the left arm, which, at the same time, was affected excessive sensibility, and so conti-two months, though antispensed cines and campborated liminests w gently amployed. Three menths of he leaches to the thighs, nor by light the anemoniated liniment upon the l

April 1833 she experienced a new attack of the legs, which diminition in the same had been seized with vocal in small quantities. It is the same of the year 1825, she had a most severage fact of negative tendings, and afterwards parallelle of the seizet nerve of the right leg. She was relieved by one blood-letting, but not cured

She was in this situation upon the Mind of February, when the repersary source that he attempted to restore the flagged the catamenia by irritating the mamme in the manner proposed by Dr. Mondière. Two cataplasms, prepared with five ounces of mustard, were applied to the outer and external sides, and also to the superior portions of the mamme. The severe pain which she experienced in about fifteen or twenty minutes after the application, forced her to remove these cataplasms, which reddened the skin, and rendered it very sensible to the touch. The next day she had a considerable flow of leucorrhoes, and the third day she had an abundant catamenia, which, instead of four, continued during seven days, as in the months of August and September. On the 3rd of April this person enjoyed good health, and walked out freely. The mammie are developed, and since the return of the catumenia she has grown in a remarkable manner. We think (adds the author of the case) that this salutary revo-lution was hastened by the augmentation of the vital activity of the uterus, and is attributable to the artificial irritation of the on the table. manunæ.

HOUSE OF COMMONS.

Murch 1, 1836.

MEDICAL WITNESSES BILL.

MR. WILKES said, that before the Honourable Member for Finsbury rose to make the motion he was about to submit to the House, perhaps the House would allow him (Mr. Wilkes) to present a petition on the subject of that notion. The petition was from Mr. Baker, a surgeon and apothecary, reliefsing at Hostbo, in which document the petitioner, made the following statement. On the Estimated Linky, 1835, the petitioner was requested to distance the post-morten massination of a person who was supposed him to be a missrance. He attended before the Capitals, who postponed the examination with the following day, in order that the grashmation might take place, and on the following day, the petitioner was requested to submit the contents of the stomach beingmysation, to allow which, the

inquest was again adjourned for three or four days. The analysis occupied several lacure of several days of this professional gentleman's time, and subsequently the potitioner gave his evidence, when the Coroser and the jury felt that he was entitled to remuneration, and unanimously expressed their approbation of the intelligence and talent he had exercised on the occasion, and their gratitude to him for the assiduity he had manifested, at the same time recommending to the parochial authorities that he should be paid for his professional attendance and labour, the ordinary charge for which would have been ten guireas. However, he only applied for three gui-neas, when the answer was, that they had no power to make this any compensation what-wer, out of any this lover which they had control. Under these circumstances the etitioner felt that the Legislature ought to interpose, giving power to the Coroner to award to professional men some remuneration when their time and talents were thus drawn upon. (Hear, hear.) He (Mr. W.) knew perfectly well, that by far the greater proportion of professional gentlemen were decidedly convinced, that for the ends of justice a remuneration of this nature ought to be provided. A petition was in the hands of his honourable friend, the member for Southwark, signed by several hundreds of the physicians and surgeons of this metropolis, in favour of that provision, and, undoubtedly, the case urgently required legislative interference.

The petition was then ordered to be laid

Sir John R. Reid said, that he also had a petition to present on the subject. It came from the medical gentlemen of Ewell. in the county of Surrey, requesting that the House would take into consideration the difficulties with which they had to contend as witnesses at coroners' inquests, and praying the House to provide a fair remuneration for their trouble. He entirely concurred in the sentiments expressed by the hon. Member who had just sat down (hear, hear), and he had no hesitation in saying, according to the view he took, that no individuals in society were so badly paid as gentlemen in the medical profession. (Cheers.)

The petition was ordered to be laid on the table.

Mr. BARCLAY said, that he also had had a petition entrusted to him for presentation from medical gentlemen in a town in the county with which he was connected, and which he regretted much he had not brought down with him to present on this occasion. The petition was to the same effect as those which had just been presented, and his own opinions upon the subject-entirely concurred in those which had alpeady been expressed. (Heer, hear.)

No. 653.

Mr. D. W. HERVEY seld, tink he l petition to present, signed by \$25 games men, all of whom were dissippossed for their professional eminence in this metropolis. Indeed, he should shink it invidious to select any names from amongst them, I can assure the House the Proposent de-except merely for the purpose of stating. Suiency in the law is not so industrials to the that amongst others it was signed by the medical man as to the public at large presidents and the vice president of the (heer, hear), because it entirely defeats the Royal Colleges of Physicians and Suppens, object which the public have in view in up-Sir Astley Cooper, and Sir Anthony Car-lisle, who all stated that great inconvenience as well as great injustice had occurred, in consequence of the absence of a compensation to medical gentlemen who were called upon to attend at coroners' inquests. He trusted that the bill, which his hon. friend the Member for Finsbury was about to in-troduce, would, under these circumstances, be successful in its passage through the House. (Hear, hear, hear.) He had also a petition to present, signed by sixty-five professional gentlemen, resident in the Borough of Southwark, to the same effect.

The petitions were ordered to be laid on the table.

Mr. WARLEY .- Sir: From the very favourable manner with which the House has been pleased to receive the petitions which have just been presented, I am sure I shall not have occasion to occupy your time for more than a very few minutes in explanation of the nature of the Bill which I wish to introduce. When, last year, the County Coroners Bill was before the House, the House will recollect that it contained a clause professing to provide for the remuneration of medical witnesses at inquests. which clause, however, shared the fate of the whole of the Bill, the Bill being rejected by the House; and, I think, very properly, for it was perfectly unsuited to the objects which the honourable Mover sought to attain. I am ready to admit that medical gentlemen may not, in some respects, he more useful when they attend as witnesses than others, but it should be borne in mind that medical men attend the Coroner's inquest in their professional capacity. They do not attend as casual observers of the event which may have occasioned the inquest; but as professional men, who alone ean give that information which is essential to the ends of justice and the basis of a true verdict. The duties which medical men sideration, and observe the anxiety of the have to perform are exceedingly important (hear, hear); they are very difficult of accomplishment, and very frequently attended even with danger to life. A postmortem examination is not to be conducted in haste, or without science and trouble. Many instances within my own knowledge have arisen where a post-mortem exam-

grered, obtained no kind of reserv-Corener baving no power to the alightest compensation. object which the public have in view in upof the most important offices in England, and almost the enly office to which the people have still the power of electing their own judge. Yet unless that judge be invested with the power to give compensation to medical witnesses, I do think that the Court has a sendency to become remost useless. (Hear, Lear, Lear.) When the Coroner calls a medical man before him, he has not the power of requiring the witness to reach a post morten examination, aithough the result of that examination may be the only disclosure which can enable the jury to return a correct and faithful verdict. Within a very short period several inquests have been held in this metropolis upon the bodies of persons who have died under very extraordinary circumstances, and I may mention that quackery at this moment (hear, hear) is producing more victims (hear, hear) than it ever did at any former period. (Hear, kear, hear.) It is fearful to observe the consequences which flow from the advertisements of quacks with which the newspapers teem (hear, hear); and I should be glad, indeed, if his Majesty's Government would resolve on the removal of those disgraceful outrages upon society, hy preventing quack medicines from going forth to the public under the authority of Government stamps. At an inquest held a few days ago, the circumstances of which have excited great indignation, several medical men attended, all of them, of course, without obtaining compensation. Had they been selfish or mercemary enough to refuse to attend, or had they withheld their information as professional men, what verdict could have been returned? How completely might justice have been defeated on that occasion! And how frequently do similar instances occur! Now. Sir, when we take these points into conpeople to have faithful verdicts recorded. I do trust that the House will not refuse to grant that compensation as madded will-nesses which will be ensured by the paging of this bill. As I am sure, from what have observed to-night, that the principle the bill will be sanctioned by the House, shall not at present enter upon is det ination has necessarily been protracted through a period of eight or ten hours, and that legge be given to being in a bill to yet where the medical witnesses who conducted it, and gave evidence of the facts may attend as witnesses at covariant inquestion.

MR ATTORNEY GENERAL experience I will venture to Bill for the bringing in Member for Figures he Member for Risibury has now merced, with one favourable to this bill being brought in; he was very said that such a bill have to the bill being brought in; he was very said that such a bill have to the being brought in; he was very said that such a bill have to the being brought in by the hon. Member for Finstein has been obstructed in consequence bury would be passed into a law. (Hear, been given before a Coroner's jury. Jurios Hentber for Britipor had suggested, was either ser without that outdoor. sitter are without that evidence altogesher, carried tuto effect, a principle would be or, when it is obtained, the injustice of refus. refused which could not be satisfied in ing to award a fair and honourable remunes the quarter mentioned, from want of pro-ration is committed. (Honourable would per funds, in consequence of which the only suggest to the hon. Member in bring applications for remuneration could not be ing in this bill, to take care to have it so complied with to the proper extent which the framed that it shall not be made the means services of well-silucated medical men would of a job by the coroners themselves. (Hear, require. (Hear, Mer:) The hon. Member hear.) Coroners have before now made, a who had brought forward this measure job of their office; and unless care be taken ought to take the thin the subject of the best that a proper companishes will make a job of this by calling in a sation was previded in the bill. He (Sir medical Friend, and giving him a couple of G. S.) well knew the liberalty of the meguineas where there may be no necessity whatever for his evidence. With that caution against abuse of this kind, I certainly do think that where medical men are called in, on fair occasions, they ought to be pro-perly compensated. (Hear, hear.)

Sir Robert Inglis thought it might be desirable to know from what fund it was proposed by the bon. Member for Finsbury that the medical gentlemen should be paid? Was it proposed to throw the payment upon the parish or the county?

Mr. WAKLRY considered that it would be better not to enter into a consideration of may of the details at present, though he did not object to saying that in his opinion the two sources. On according the motion,

Mr. WARBURTON said that of course the hoa. Member for Finsbury would take care in the bill that professional gentlemen were paid for their attendance; but looking at cases where the talent of persons of superior information was called into action. where their materials and apparatus were required in an analysis, he should think that the compensation would fall short of what it ought to be, unless there was reference had to the expense of the education of the individual. (Cheers.) It seemed impossible that the parish could have refused to pay the petitioner in the case detailed by the hon. Member for Boston, but having refued. he would advise him to present him-self at the Home Office, and inquire if the justice of the country was to be defeated secure he could not afford to give his time Appliabous in the manner required, of whether a fair remuneration would be made to both. Until such a bill as his hon. Friend, the Remuneration would be made to both. Until such a bill as his hon. Friend, the reduced became the law of the land, he should certainly recommend medical with his property and attention.

e Home Office sir Gro. Beer, Aver.) so. Symical AND said that he was dical profession. (Cheers.) He believed that no class of individuals in society devoted so large a portion of their time, and underwent so much trouble, for the public, and for the poorer classes especially, and he was quite sure that neither the public, nor the legislature would raise any objection to a remuneration, on all proper occasions, being provided for such men (hear, hear); and he was quite satisfied that those gentlemen who devoted so considerable a portion of their time so liberally for the public good, would be satisfied with a small remuneration for attending at Coroners' inquests; but remuneration they undoubtedly ought to have.

The Hon. A. TREVOR (who was almost payment ought to come from one of those (mandible in the gallery) said, that he could not forhear expressing the great satisfaction he felt at the honourable Member for Finsbury having given notice of this important measure. All men must be agreed, that compensation ought to be provided for medical man who attended as witnesses at coroners' inquests. He knew no body of men whatever who were so essentially usetol to the public, or who did anything like so much good to the poorer classes of so-ciety (cheering), and they were entitled to all the consideration and assistance which that House could afford them. He did not entertain any great apprehension that a measure like this would be converted into any thing like a job. (Hear, hear.) From what he knew of the respectability of coroners in general, he could not persuade himself that they would attempt to disgrace themselves by converting such a measure into a means of abuse, even if it were in their power to do so. Still, if that were possible, he was satisfied that the object with which the hon. Member for Finsbury was about to introduce the hill, would greatly counterbalance any evil that could result from its operation in such a way. (Hear, required in Coroners courts, to suply herr.) He could not allow the House to grant leave to introduce a lift of this description, without appressing his most annion hope that it would be passed into a low

hope that it would be passed into a line.

Mr. Jenves said, that he was not about to make any objection to the introduction of the bill, he only wished simply to abserve, with respect to the existing law, that if a coroner desired to have the attendance of a medical man at an inquest, and issued his warrant to the parochial officers, calling on them to send a medical witness, and they did so, that medical winness, and they did so, that medical man would undoutedly have a claim upon them for compensation, which he could enforce. He believed that no doubt existed on this point, and if the hon, and learned Member, the Attorney General, would take the trouble of looking into the old law affecting the case, he would find it to be as he (Mr. J.) had stated.

Sir J. R. Rein was understood to say, that he did not believe that the petitioners whose petition he had laid on the table, did so understand the law, but, however that might be, it became the duty of the Legislature to put the right of medical witnesses to compensation beyond dispute, or diffi-

culty. (Hear, hear.)

Mr. Solicitor General said that he knew many cases in which medical gentlemen had been summoned to give evidence at Coroners' inquests, without being able to obtain any remuneration whatever. This was, undoubtedly, a great hardship. In some of the instances they had had to travel a long distance, and give up a very considerable portion of time. The bill now about to be introduced, was one in which the medical profession at large took a very great interest; and although, perhaps, strictly speaking, as had been stated by the hon, and learned Member opposite (Mr. Jervis), medical witnesses might, at present, have a legal right to claim compensation, yet he knew of no means by which the law could be enforced, and as the bill of the hon. Member for Finsbury seemed to be admitted by all to be only a matter of right and justice to a most meritorious class of persons, he sincerely hoped that that hill would meet with no obstruction in its progress through the House. (Cheers.

Mr. PLUMTREE said, that the bill should havehisutmost support. Asthehon. Member for Finsbury was himself a medical gentleman, he had no doubt that the provisions of the bill would be judiciously frassed, and he merely wished to express a hope, that it would be distinctly provided whether the compensation was to come from the parish or the county, that there might be no difficulty or delay experienced afterwards in obtaining the remuneration to which the witnesses would be entitled.

Mr. Wakley said he thought that what is most approved of the competitors had been stated with respect to the law of the prize; every dressord three most the case by his honourable and learned standing is eligible as a caselidate fee.

im (Mr. Jervis) would be found witness, but it was equally a medical man, it we produce as the most open the body. I will give no testimony respecting a post-mertem examination; respecting a post-mertem examination;" and the coroner has no power whatever either to compel him to make the examination, and state his opinion on the cause of deth. or to commit him for a contempt of court. Now he (Mr. W.) wished to give the coroner more power; but, at the same time, as a set off against that power, he wished to give the medical man a due compensation. (Hear, Acer.) He would at the same time assure the honourable Member (the Attorney-General), and the House, that it would be his anxious wish to guard against the possi-bility of jobbing under the provisions of the measure, because jobbing was what he most cordially detested. (Hear, hear, hear,) He knew that in Ireland there had been much jobbing carried on under the Coroners' Bill, where five gaineas had often been paid unnecessarily under the Act, but he would take care to guard against such an abuse here. With reference to what had just been stated by the honourable gentleman opposite, he could only say that he should be perfectly satisfied with the decision of the House as to whether the compensation should come from the parish or the county. (Hear, hear.)

Leave was then given to bring in the bill, amidst the cheers of the House.

When Mr. WAKLEY alluded to the prevention of quack medicines from going forth to the public under the sanction of Government stamps, the cheers which came from the House were heartly joined in by the MINISTERS.

CONCOURS

FOR THE ELECTION OF HOUSE-SURGEON AT THE

NORTH-LONDON HOSPITAL.

The election for house-surgeon to the North-London Hospital, has again been decided by concours, Mr. Walls, the first gentleman elected to the situation on the score of qualifications alone publicly demonstrated, having completed she term of his duties. In giving a report of the proceedings at that election (No. 23, Vol. 2, 1834-34), we stated some particulars dispersing the hospital, which is in presentative to reposit It will be sufficient to the house-surgeon to this hospital, advanted to the meat approved of the competitors for the prize; every dresserof three months' standing is eligible as a complete to the

office. The examination was n in the following manner candidites. The aniswire and under cover with motios: given in

CONCOURS AT THE

lat Deriver. The principles of treatment in surgical diseases .- Questions. 1. The relations of the femoral artery. What part of the vessel is preferable for the application of a ligature? State the reasons for its being so. What are the steps of the operation, and the cautions to be used in its performance?

2. How would you treat a simple fracture of both bones of the leg? How would you treat a compound fracture of the same hones? Describe, particularly, the position of the limb, and the mode of applying the several parts of the apparatus.

3. Describe the symptoms of retention of urine, as arising from enlarged prostate, and the treatment. What is to be expected

if the bladder be not relieved?

4. Describe the coverings of an oblique inguinal hernia, and the relative position of the vessels and the epigastric artery to the neck of the sac.

2nd Division. The performance of those operations which are likely to be required of the house-surgeon. This and the third livision were conducted in the clinical theatre before a large assemblage of stulents and practitioners. The questions, the reasons for the operations, &c., were written lown, and a number of them were put into t hat, when one was drawn by each candilate. The operations were performed by the gentlemen successively, only one canlinate being present at a time.,

1. Removal of first and second phalanges

of the finger.

2. Amputation of the finger, with a portion of the metacarpal bone.

3. Application of a ligature after amputaion below the knee. 3rd Division .- Actual application of ap-

paratus, &c. 1. Name the instruments required in am-

putation of the leg-

- 2. Show the mode of reducing luxation of the humerus, when dislocated into the axilla downwards and forwards.
- 3. What are the appearances of such disocation?

4. The application of bandages required in fracture of the clavicle.

The medical committee of the hospital binducted these examinations. The suc-penful candidate was to have been named list Monday, the signal examinations having sikes place on the previous fasturday. On Monday, however, its sun dand that two of the untillable were considered to be, in every respect, equal in the scale of merit, and it was deshied necessary that those two gentlemen should submit to a rice occe or ton. Meantime intellects of every caliber. amination by the surgical staff of the hospi- pens of all degrees of power (and why not

distinction such of the surgious putting two questions, which were the following: salm of the hand required your attention,

that it had bled considerably at the time, and a ligature was applied, and that at the end of six or eight days hemorrhage came

on, what would you do?

2. Describe the symptoms and treatment

of cedema of the glottis.

3. Describe the symptoms of dislocation of the head of the femur into the obturator foramen.

4. The symptoms of dislocation of the same bone into the ischiatic foramen.

5. What parts would you cut through, and what avoid, in the operation of tying the subclavian artery in the first part of its course?

6. Give the relations of the prostate gland, and what you divide before you come to it in the operation of lithotomy, cutting from

the perineum inwards.

After these questions had been answered by the respective candidates, the committee retired, but shortly afterwards again entered the theatre, when Dr. Thomson announced, that after the most impartial examination of the papers, and a full consideration of all the proceedings, the Committee had decided on electing Mr. Hongson, of Halifax, to the vacant office. The announcement was received with cheers. Our reporter adds, that "wishing to ascertain how far the statements were correct which are sometimes urged respecting the nervousness of candidates at public examinations, he inquired of the gentlemen who submitted their acquirements to the ordeal on the present occasion, what degree of anxiety they experienced; when he found that two of them were not at all alarmed, and that two did not experience more perturbation than they considered they might have felt, had they been subjected to the same tests in private."

CONTINUED CORRUPTION IN THE

DUBLIN COLLEGE OF SURGEONS.

To the Editor of THE LANCET.

Siz, - The period rapidly approaches which will terminate the hopes and fears that have so long beset the several parties in the medical world, according as they are friends or focs to that expected renovation of our institutions, which is to abolish all monopolies, and introduce an order of things which is calculated to promote science, and secure the interests of the medical profession. All eyes are directed to Mr. Warburminus are in active operations we Lancier, with a liberality and a suggest general interests, beyond all praise, affords every facility to free and fair discussion. It show any symp is devottly hoped that all this may events. ate in a measure of gonnine and general pressure, where he lecture ate in a measure of gennine and general profesor, where he lectures in the reform, one which will sweep away all as ceasor, where he examines his over abuses, and enact such wholesome regula- for license (reporting to the College on tions (uniform for the three kingdoms, con- excellent and effective condition of ferring equal privileges in all) as shall entering equal privileges in all) as shall entering and asserted by where he publishes sure adequate knowledge in the practitioner, become with the results of his valuable threshold labourstioner, bonourable conduct and protection. Witness Mr. White is president, and Mr. basely prostituted to faction or nepotism.

the faction. Even of this medley crew, the expectants will, without doubt, swell the number of reformers, when they perceive same prolific establishment. which way the wind blows, and that they obstacle to the most thorough and searching reform.

The faction, too, deserve no mercy; for very teeth of repeated warnings, their conduct has been, and still is, marked with as great, if not greater depravity, than in the palmy days of rampaut toryism; jobbing and corruption are perhaps merc rife than ever; intrigue and petty party malice are still in full operation.

1. The infamous blackball still outrageously deprives the majority of the profession of their just and legal rights, Mr. Cusack's watch his Majesty's Government exclusive declaration being still unrepealed,

men the ap in the exercise of his profession, and gua-rantee to superior acquirements those offices the College wished to mark their high of honour and emolument which are so tous of the consistent political integrity of the one, and the pure oath-regarding mo-As regards other medical institutions, rality of the other, as well as the general great are the difficulties that will oppose sloquence and professed scientific attainthe intention of the Legislature; but it should ments of both.

be remembered at this important moment. 3. Professorships, old, new, or subdivided that in the case of the Irish College of Sur- (a scheme to increase patronage; and pregeons, there is a field which is perfectly sent an imposing appearance in pulls), are open for the most extensive experiment in filled up according to that system which has medical reform. It is a new institution, hitherto neorked so well; viz, as soon as a which has grown up in our own times, in chair is declared vacant, the faction forth-which there are no encient abuses or privi- with most industriously pass a number of leges made sacred by the touch of time. It by-laws, no matter how gross, impolitic, or presents no vested rights; its corruptions, inconsistent, which ensure the return of the though they may be intense in degree, are favourite of corruption. It is of little conbut the jobs of yesterday. Here, too, a sequence though he be a beardless boy, and very strong and respectable body loudly is opposed by a gentleman of vast experience demand reform. In fact, this body forms and practice; he must be elected, espethe majority of the College, if you deduct cially if he come from the manufactory in the present possessors and the gaping ex- Park-street, whence have been drafted in pectants of office, who (with a staff of un-latter times no less than six professorial thinking retainers, men of uo minds, who pedagogues. This, to be sure, is but a trifle, merely continue the habits of submission but it serves to show what a consenting which they contracted during the servitude organization exists between these sympaof their apprenticeship) alone constitute thetic Siamese twins of corruption. There are now three vacancies; doubtless two, at least, will be filled up with scions from the

4. College funds, are disposed of with the can no longer hope to rise by the corrupt same rigid economy, the same acrupulous and factious steps by which their jobbing regard to general interests, as heretofore: for superiors have so casily obtained distinction. instance, two recent extraordinary expendi-Thus the Irish College of Surgeons will tures, viz., one of 180%, to the curator, for be found most pliable, and present but little his extraordinary birth of a ridiculus mus, which, after a marvellous gestation of ten years, he was at length safely delivered of in the shape of the first number of the Mu-In opposition to justice, and to public opi- seum Catalogue; a work which, he it renion specially directed towards them, in the membered, by the performance of his paid service he would have completed years back. This was characterized by the learned mover of the vote, as the most perfect, most classical, and most marvellous production of modern times; an apinion in which I segret to state, Tuz Lanory, in a review of the the sad ignorance and weak of case by means to coincide. And, secondly, 1004. Messrs. Jacob and Harrison, in order vent their having the au and superseding by-law, charter, and every charter to the University of London, a thing else. h is likely to proce inj 2. The same factious conspiracy still re their private achool, come

that of the College. pitch of perfection has; ed rente in to browbest the prime affect mation far the universe!

Lord Melbourne! frees is still transacted after the m, and to meet old objects. The College is variously and injudiciously pledged, and money is granted on the frish of decuments, garded in the readings precedents are discovered, hearted on, and sworn ta, to meet every occasion; order, deco-rum, and fairplay, which prevail in all other, even the most unlearned meetings, are here still shamefully violated and utterly disregarded. It would be invidious, and indeed difficult, to select a single instance.

6. Reform is still in the same ill odour, and as hateful a thing as ever. Never did juggling hends more fully break the word of promise to the hope, than did the concours and by law reform committees, both of which, -after giving such dreadful note of preparation, after keeping the College on the tiptoe of expectation for nearly a year. -have, alas for the instability of human hopes! departed this life, each giving birth, with all the agonizing throes of a dving mother, to a luckless report. One, mothered by a Mr. Evanson, whose celebrity has not yet I fear extended beyond a very small, but select circle of course, recommends a premium of 50% for the best essay on the concours. It is not difficult to foresee how this job will terminate, but it has the adcushioning the question for another twelve months, and throws overboard all intention, in spite of promises ad infinitum, of the concours experiment, although no less than five opportunities have already offered. The other, calved by the redoubted James Cusack, is content with recommending limits in its first (and, it is prophesied, its last) report to the College, to take no cognizance, as heretofore, of apprenticeship bargains, and also to adopt certain modifications of the half-yearly examinations; that is, the evils of both are still to be retained, for James Cusack's words are a law to a certain party in the College. Now, the examinations are notoriously a humbug, presenting an imposing aspect to the gullible public, and forcing pupils into contact with the school and its professors, to be By the suggested arrangement about aptramense revenue to James Cuerch, and perdence, quietly submits, without a public the splendid results that crown the un- land the lilegal proceeding of Mr. White.

strailered executions of the faction in the come of reform. It is to be leared, how-ever, that the impatiance of the Legisla-ture will interfere with and prevent what ten been commenced and continued under such very very favourable auspices. What

a pity! 7. The same tender regard is paid, as berotofore, to general interests and measures of general utility; never is prejudice or partiality allowed for a moment to divert the even current of calm deliberative justice. Witness the treatment of two gentlemen, both reformers, at a very recent meeting of the College. One of them moved for a committee to consider what means might be devised to render the subjects of compasative anatomy, puschased by College funds from the Zoological Gardens, more available as sources of information to the menbors of the College. By the present arrangements, all opportunity of information is confined to the curator and professors of auntomy, who also, as they purchase with College money, drive all competitors from the field. All the value the members of the College derive, consists in the few preparations that result to the museum, which could probably be purchased cheaper, if all the attending expenses be taken into consideration. This, however, being a measure of general advantage and liberal consideration, was indignantly scouted by a meeting prepared to scout anything, so that the private huxtering of Mr. Jacob continues triumphant. The other vantage, as he, poor thing, thinks, of reforming member tendered in the usual form, a notice of motion to found a chair of comparative anatomy and zoology, calculated for the members and licentiates of the College. The tendency of such a motion being to establish something of value and interest to the profession, beyond the miserable and contemptible elementary school to which the selfish cupidity of the professors confines all the exertions and funds of the College, it was forthwith anduciously ruled by Mr. Vice Sec. Harrison, and Mr. President Cholera White, illegal, and actually refused as such. A notice of motion, tendered in regular form, illegal! Such a violation of all precedent, custom, and courtesy, such an exercise of tyrannical impudence on the part of Mr. White, forms a striking contrast with the dignity, urbanity, and impartiality of Mr. Read, the late presitampered with and seduced, as has been dent. Such an outrage, even in the trish attempted before now; while, on the other College of Surgeons, - and surely no other hand, they are felt as a most tyrannical chairman would dare to not so, at least tardship and inconvenience by students. without being forthwith brought to a knowledge of his duties,-I must confess astoprintices; the whole system will continue in nished me. I shall be more astonished if full distribution; though not appearing on the the member in question, who has hitherto College tooking and will still be a source of passed for a gentleman of spirit and inde-

But there is no end to the facts that go to prove, that the innate depravity of the faction continues unattated, and that even at this, the eleventh hour, they are without a single redeeming feature in their case. Delenda est Carthago. I am, Sir, your obedient scrvant,

Dublin, Feb. 27, 1836.

before he carriprossed with, an examination, which may put the life a fellow being in jeopardy, and may per-SILENA.

chance destroy, what may be desser to him his reputation! His medical ignorance meansarily prevents him from safely, justly, and properly conducting this inquiry?

obliged to consult so imperfect a decument

How miserably defective

when the highest

NEW CORPORATIONS.-MEDICAL CORONERS.

We select the following passages from the published letter of Mr. Rogerson to the New Corporations, mentioned by us last week at page 888:-

"The municipal reform bill has, either directly or indirectly, placed in your power the local administration of justice, and the election of the officers who preside over its courts. Of these, the coroner's court is one of preliminary inquiry, and, viewed in its relations to society, occupies a conspicuous

and important rank.

" Highly responsible is the execution of the trust reposed in you, and fully believing that the day is gone by, when adherence to antiquated customs prevailed over the improvements and advances of knowledge. I respectfully address you, that the coroner's court may be reformed by the application of that science, which alone can efficiently administer justice through the detection of the causes of death. The science is that of medicine."

Having reviewed the duties of the court. Mr. Rogerson says,-

" Having ascertained the first principles which govern the court, the object will be to find a class of society who can best reduce these to practice, and carry them fully into operation. Is a lawyer, whose business cramps his mind, in the study and perversion of precedents, acts of parliament, judges' versions of them, and in mechanically copying forms of law, best qualified to preside in such a court? Decidedly not,—will be the immediate answer. His professional learning and habits of life never lead him to acquire the extensive knowledge of medical science which is requisite for the execution of these duties of the coroner's court. So defective do attorney-coroners find themselves on this point, that they are in the habit of carying with them to inquests a small manuscript copy, neatly and closely written, containing a list of the most common poisons, the principal symptoms folthe appearances of the body from drowning. Mackensie.

"An objection, deceptive without the merit of plausibility, may be offered against the absolute necessity of appointing medical coroners. These inquiries, important and necessary as they must be admitted, can be obtained from a medical witness.' A coroner is present at every inquest; a medical witness sees very few of them, and at the majority of these few, the assistance of a medical practitioner is, according to the present practice, required only on account of some glaring suspicion, or strong communication, which stupidity itself could not overlook. Are the great majority of deaths on which inquests are taken, and the causes of which are unenlightened by medical witnesses, invariably unattended with suspicious circumstances? A great number of sudden deaths, requiring inquests, are suspicious, and a medical coroner, who, by the nature of his profession, is best acquainted with the causes and oppearances of death, is enabled at once to decide on the truth or falsily of these suspicious, and on the necessity of instituting a right examination by a medical witness. A coroner, with a smattering of knowledge, or with a total ignorance of medical science, with most certainly commit errors. One fact is said to be worth a thousand reasons, and among the number supporting the truth of this last position, I will offer the following, related by the late Mr. Hunt, which occurred during his confinement in Hebester jail :- A prisoner died at eleven o'ctock in the morning, and on his body an inquest was held by a non-medical coroner, under whose direction a verdict was returned of accidental death. It was afterwards proved on oath, before the Commissioners of Inquiry, that the unfortunate man was killed by a blow inflicted by one of the turnkeys, who had chained him by the neck to the wall for rioting and drunkcuness, and was irritated by his abusive language. An error so agregions as this could not occur with a medient coroner, for the view of the body required by our laws

One of the coroners for Middle goes beyond this. He carries with him are unabridged copy of "Buchas's Demettic Medicine," and supeals to it for last and correction of the amplical attnesses, on lowing their administration, and a short all description occasions. It was in constant description of dangerous wounds, and of use at the late inquest on the body of the constant description of dangerous wounds. would soon inform him of the first and directing this inquiry to the first and the first and the first and the first and first

Mr. Rogerson proceeds to argue various other questions, and thus illustrates some

of them:-

"General truths acquire additional force by the illustration of example; and the inability of non-medical Coroners to estimate the validity of evidence on, and conduct an examination relating to, scientific questions on death, is shown by the 'case of the unfortunate Eliza Fennings. It was stated that the knife, which was a steel oue, and which she had used to cut a pudding, was made black by that act, and that, therefore, the pudding contained a combination of arsenic. This, too, was asserted by a medical witness, and was the strongest evidence against her; but this combination of arsenic could not blacken steel. The Coroner knew not this chemical fact, and could not therefore discover the necessity of other and better evidence on this point, nor explain to the jury the value at which it should be estimated. The non-medical Coroner knew not the error or truth of the opinion, on the blackening of steel by this preparation of arsenic.

"In Liverpool, Mrs. . died in childbed, after an illness of eight days. Instruments bad been used to effect delivery. An inquest was held on the body, and a verdict of manslaughter was recorded against a young gentleman a medical assistant), who was publicly sent to the county jail at Laneaster, pinioned to a common felon. The evidence implicating this young gentleman consisted in statements, showing that he was present from an early period of the labour, and when instruments were used by others, that he interfered too much, which evidence was only hearsay, related to another by the suffering lady herself; and that he was seen in an ante-room with instruments in his hand, when he replied in the affirmative to one asking if he was going to use them. With this evidence, defective, presumptuous, unsatisfactory, and of secondary consequence were the Coroner and his legal officer content, and, in consequence of their incompetency from want of medical knowledge, they could Beither assist the jury, nor promote the inigation, by secertaining the nature and extent of the timberforence and the part he interfered with which were the head and from of the offense, and what was the con-sequence of dissistanterference, and what use

he made of the instruments. Highly im-

portant and absolutely necessary as these points of the investigation were, the Coroner,

strongh Ignorance of medical science, could neither question nor appreciate, though witnesses were present from whom the inquiry might have been made. Upon this evidence, defective, and miserably managed, was this young gentleman singled out as the only victim, and he appears to have been made the principal in the first degree of guilt, which was more strange and surprising than all other errors. He was subsequently discharged, on the surrender of his ball, without redress."

"I have," says Mr. Rogerson, in conclusion, "briefly and impartially pointed out the principal knowledge necessary for efficiently conducting the Court of the Coroner, which istin its nature essentially medical. The requisite legal information is soon gained by any rational individual, for the examinations seek into matters of fact bather THAN OF LAW. The Court is not one for the decision and examination of points of law, and for the award of punishment, but of preliminary investigation and inquiry on violent, sudden, and unnatural deaths, and deaths in prison, and their causes. The requisite medical information, then, must be profound, and can only be learnt by years of study and practice.

The pamphlet is published by Messrs. Longman and Co. Let the object to which it is devoted be everywhere pursued in the new corporations.

THE LANCET.

London, Saturday, March 5, 1836.

A CONDENSED report of the proceedings which took place in the House of Commons on Tuesday evening last, will be read with satisfaction by our professional brethren throughout the empire. At last the Legislature is evidently disposed to do justice to the claims of medical practitioners. As some time must elapse before the bill can go into Committee, petitions should still be forwarded in support of the measure, and we again take the opportunity of hinting to some gentlemen who have been meritoriously active in this struggle, that a petition having six signatures is just as efficaclous as one containing six hundred. Attaching seven or eight hundred names to a

notition is, colimbratively is ten application of that force which general body of the profession is once

It should be observed that the Bill which out into two parts by the wheel dia w an enactment might be under any other satisfactory description. circumstances, it would be absurd, and even The justice of the proposition for reimmischievous, to make any proposition of a bursing medical witnesses, for the devotion similar kind in a similar measure. The of their time to the purposes of coroners' medical question stands apart from every inquisitions, is admitted by the members of other, in this instance, as involving the the House of Commons, with very few excapabilities and efficiencies of all the powers ceptions. Amongst the dissentients stands. and privileges of the institution. In cases first and foremost, the hon. Member for where the cause of death is involved in Cirencester, Mr. Caipes. Yet a writer, mystery, then it is that the medical witness whose low-minded malignity is only canalled relieves, by his testimony, the coroner and by his stupidity, has asserted that "the attendance of a medical practitioner at in- "the medical men out of that renth quests is frequently unnecessary. Still, he "hands." What is the snewer to the

using to the consideration of this quintless. It is Court. If the body of the is now about to be introduced into the -if a inbourer be crushed to exceed the House, is not, as many persons seem to thrashing mething, or if the head of a imagine, a "Conowers' Bill," but, simply, workman be blown off by the explosion of a a "MEDICAL WITNESSES BILL," having powder-mill, or he be plunged into a flood by no reference whatever to the Coroner's in- the wheel of a water mile a medical practiquest, excepting that of providing the best tioner is always one of the witnesses summedical testimony for the guidance of the moned, although the cause of death is coroner and jury, and of providing also an perfectly obvious, and square, in either approach to an adequate recompense for case, be misunderstood, even by a child. the services of those medical practitioners Medical gentlemen have much to complain who may be summoned to attend the in- of in these respects, and it is to be hoped quiry. So far as the introllucer of the Bill that a brighter prospect is before them for is concerned, he will steadily and attenu- the future. When provision is made by law ously oppose the introduction of any clause, for paying the surgeon for his attendance at the object of which is opposed to these two inquests, this practice of issuing the sumparamount provisions. The introduction monses wantonly, will, doubtless, be disof any other matter might present an in- continued. On the other hand, when the surmountable obstacle to the passing of the circumstances of the case demand the pro-Bill, on two occasions. The attempt to duction of efficient medical testimony to constitute the Coroner's an open Court, aid the coroner and jury in conducting was fatal to two Bills which had passed the investigation to a rational conclusion, the House of Commons in the years 1833 then the law will empower the court to and 34. However desirable, therefore, such procure medical evidence of a perfectly

r. Conomi

jury from a net-work of endless difficulties. " MEMBER for PINSBURY has treated Mr. On the other hand, in ordinary cases, the "Carres shabbily, by taking the cause of is summoned, and often, as we have a warrantable assertion, rante by a parties thousand times contended, wantouly sum- whose systematic enongmous attacks against moned, to a place which is situated at seve- the respectability and interests of the general miles distance from his residence, where, ral practitioners of this kingdom, have renafter having waited during many hours for dered him, with that body, an whilest of

WINESES.

repeat, is the should contempt?

imputation? That the Coroners Hill Mr. Curres passed the House of Comtions, without containing any medical clause, in the year 1883. That the Bill was introduced and read a second time without any medical clause, in 1834 That a medical clause was at length introduced in a Committee of the House, after twenty articles at least had appeared upon the subject in this Journal, and after we had succeeded in causing numerous petitions to be presented to the House on this subject, and in 1835 the Bill was introduced into Parliament with the identical clause which the Committee had sanctioned in the previous session. We have called it a "medical clause," but did even that clause provide for the payment of medical witnesses at inquests? Why, the fact is directly the reverse. Here is the section itself, printed verbatim et literation, as it was introduced into the bill of last session : -

" And whereas, at the taking of inquisitions on the bodies of persons lying dead, it is frequently necessary, for the more satisfactory explanation of the cause of the death of such persons, that a post-mortem examination of such bodies, or of some part thereof, should be made by some surgeon or other person of the medical profession, and his evidence given on such examination: and whereas there is at present no remuneration provided for such surgeon or other person, whereby great difficulty exists in procuring such post-mortem examination to be made; be it therefore enacted, that in every case where the assistance of any such surgeon for other person, for the purpose of such post-morten examination and his evidence thereon, shall be thought necessary, and be required by the coroner and jury, the constable of the parish or place in which such inquest shall be held, shall, on the direction of the coroner, pay to every such person, if he shall require it, a reathe sism of one pound), before he shall be upon to give his evidence; and such round to paid by the maid constable, shall be reimbursed to file out of the funds provided for the little of the poor of such parish; provided ships with it is to remuneration shall not be given any such paraga when he shall be called upon only to give evidence in the medical attenuant of such de-

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the decrees dering his lifetime, or at the

What is to be thought of that medical writer who can be guilty of the infamy and falsehood of alleging that the enactment of such a provision as this would provide for the payment of medical witnesses at Coroners' inquests? Yet this was the clause that was introduced into the Bill of last session, - a section of the measure, be it observed, which its author then stated, and still states, was " forced upon him;" and the tame gentleman informed us in the House of Commons, on Tuesday evening last, beforc the motion for introducing the Medical Witnesses Bill was brought forward, "that he should oppose that motion," and yet. "the Member for Finsbury has behaved " shabbily towards Mr. CRIPPS, by taking the " conduct of the medical question contain-" ed in the Coroners Bill, out of his hands!"

The reader is requested to examine the stipulations of the section which we have just quoted, and then judge whether such provisions could give, or ought to give, satisfaction to the members of the medical profession. The medical witness was in no case to receive more than one pound, even if he instituted a post-mortem examination . and where the medical practitioner was summoned before the coroner as the medical attendant during the lifetime of the deceased; in other words, when he was actually called before the inquest as a medical witness, without instituting a post-mortem examination, it was expressly enjoined, in the concluding lines of the foregoing clause, that the remuneration of one pound should not be awarded to the practitioner. Yet this was the species of enactment which was to protect the interests of the general practitioner! In sooth, it is just that description of injury and insult, under the name of protection, which the SLANDERER employed by the corruptionists and bats, would be glad to see enforced against every respectable surgeon and apothecary in this country.

916

With reference to the very short Bill which is to be brought before the House, it may be necessary to remark, that from also been recommended as an external ap what the profession has lately seen of plication in some cutaneous dise the conduct of the coroners at inquests which have been held on the bodies of persons who have been supposed to die from the poisonous effects of quack medicines, it has become absolutely necessarv that the power and ascendancy of the science of medicine should be instantly acknowledged by the non-medical officers who preside in those courts. Under existing circumstances the public cannot hope for protection from any other shield or authority. If the chief officers of those courts were qualified to discharge the duties in consequence of having received an efficient medical education, then it might happen that the collateral aids of professional testimony might not be so essential in promoting the ends of justice; but it has lately been seen that in some instances the infamous quacks have either awed or seduced the coroners into the adoption of a pusillanimous course of conduct, which has had a direct tendency to perpetuate the pestilence which is now so rapidly selecting its victims from the ranks of all classes of society. The It was one of loss of power in the lower exjuries, however, acting upon the sturdy principles of common sense, have faithfully and nobly discharged their duty to the com- constitution was good, and the excretions munity, and we doubt not, on the next occasion, when an inquest is held on one of function not being sufficient to admit of dethe poisoned, that the chief culprit will be made to suffer, at one blow, both for his boundless avarice and his numerous crimes.

CORONERS INQUERTS

PURGATIVE SEEDS.—At the last meeting barts was at a loss what name to give to the of the Medico-Butanical Society, Dr. Sto-disease, whites that of "debility," or what more made some remarks on the seeds of to presented; but acting on what he was the satrophe cureas, samples of which, in sidered to be the safest plan, he of their capsules, had been sent to the Society half a grain of the sulphase of iren

il acts in a similar way, and two oit licrosse its pargative effect. It has ticularly in itch and berpetic cruptle also in common rhoumatism, and taken internally, it has been found beneficial in dropsy, apoplexy, and obstinate constipation. Some experiments made by ORFILA to prove the poisonous effects of the seeds were detailed. The effects seem to depend on the violent inflammation produced, and the sympathetic action of the nervous systom. The poisonous effects are more strongly marked when it is introduced into the stomuch than when applied to the cellular tissue. It was supposed CAVENTON who performed some experiments on these seeds, that the oil obtained from them was in every way, similar to the croton oil imported from Incha. The properties of the two oils are, however, very distinct, though their medicinal effects may, in general respects, agree. Dr. SIGMOND thought it possible that the seeds of the satropha curcas and the croton tiglium were both employed in the preparation of the croton oil, and that this fact might account in some measure for the great variation in strength of that medicinal agent.

ACCUMULATIONS IN THE COLON?-At the London Medical Society, on Monday night last, Mr. ROBARTS detailed a case which he judged worthy of attention, because similar cases had not been recorded. tremities, but not amounting to perfect paralysis. The patient, a coachman, sixty-seven years of age, had lived a regular life, his and secretions were well performed, at least apparently so, the derangement of any tection. In the calves of the legs there was, for some days, great pain, increased by exertion, but not by pressure; and this pain was followed by a numbress, which was not always constant. His rest was greatly disturbed, and any attempt at walking, after & few paces were accomplished, was followed by total inability to mave further. Mr. Rotheir capsules, had been sent to the Society by Mr. MONTGOMERY MARTIN. These saightly constead and fresh, after being saightly rearested, and infused in spiced wine in doses of two or three, act as gently first in the spice of two or three, act as gently first in the spice of two or three, act as gently first in the strong pureatives, and in still larger doser they are strong pureatives, and in still larger they are actively poisonous. The R. hallevad would have tell the plant of the spice of three weeks the man was completely well. An opposite treating Mr. larger they are actively poisonous. The R believed, would have led to a complete

CONDON HOSPITAL.

paralysis of the limbs.—Mr. Meator luding to the case, considered the tion in the nervous course pendent on an accumulation in the cold from chronic inflammation, in which state; tion chroate semantation, in senter was although said of second of the season of the s cinc prescribed, he thought, justified this view. Mr. Robaurs strongly objected to this supposition. A loaded state of the colon would have been directly manifested had it existed. Moreover, no increased discharge from the bowels, either before or after he was consulted, had occurred .-Mr. Moone related the case of a lady who had experienced excessive cramps in the legs, and who had taken mercurials and other medicines, aperients, &c.. without benefit, and who, on going into the country, and falling under the hands of a physician who had kept an eye on the state of the colon in particular, was ordered three grains of the sulphate of iron, with one drachm of the carbonate of magnesia, twice a day, when large quantities of scybalze were dislodged, and the cramps and other symptoms immediately abated, the lady fully recovering.—Mr. BRYAKT, in the course of the evening, remarked, that he had invariably found, in post-mortem inspections, a ramollissement of the spinal marrow to be the consequence of idiopathic paraplegia.

The Society's Anniversary Dinner is fixed for the 8th of March, when Dr. Blicke will deliver the oration.

MR. OSBORN'S EXPERIMENT ON PLOOD.

To the Editor. - Sir: Allow me to express my surprise at the manner in which "W. ('., of Brompton-square," has criticised my statement on the detection of tar in the blood. Had he repeated the experiment, he would have been able to form a much more correct opinion of the process as well as of the substance obtained. Of chemistry, W.C. bimself, notwithstanding his strictures, apsears to be very ignorant, or he would have known from experience, that in all chemical species, when a strong heat is required, it is necessary to use a metallic or an earthen-ware retors, and not glass. I beg to inform that I was not analyzing the bland, as aspears to have supposed, but expeririting to the figit, and consequently had a different objects, view. "W. C." appears what ious to have we had to the content of the content o he evaporation and reptrit. Why, on the urface of the their of course. With reard to the chalk, which he thinks I was too liberal with he could not possibly have size of the end of the thumb, it was removed

and the street of

the quantity required. I am well that I was more than was sufficient to decompose the acid, and should I ever resease the experiment, I should rather in-crease than diminish the quantity, which I know, from experience, it is necessary to do. I am sorry that "W.C." has wasted his time in attempting to decide on what he evidently does not understand. And as he has been so bold as to assert that my experiment was not based on a scientific principle, perhaps, after he has taken the trouble (if he be able to perform the experiment and investigate the result), he will have the goodness to state it briefly to the public, and add his name to the account. I remain, Sir, your most obedient servant.

HENRY OSBORN, Southampton, Feb. 29, 1836.

PREJUDICE VERSUS SCIENCE.

To the Editor .- Sir: The medical profession have universally expressed their surprise that Drs. Ritchie and Webster should not have been admitted as candidates for Professorships in King's College, Strand, in consequence of their being Dissenters. may be interesting to many of your numerous readers to know that this exclusive spirit had its wicked operation on a former memorable occasion. Mr. KEIRNAN, whose anatomical and pathological knowledge eapecially qualified him to fill the pathological chair in any University, was rejected by the Council of King's College, on the plea of his being a Dissenter ! A beautiful collection of Mr. Keirnan's preparations of the liver was presented by him to the museum of the King's College, but even these unique specimens of art and science had no influence on the bigots. I am, Sir, your sincere admirer, and humble servant,

A LATE PUPIL OF THE COLLEGE.

NORTH-LONDON HOSPITAL.

ORTEO-BARCOMA OF THE JAW .- REMOVAL OF THE SUPERIOR MAXILLARY AND MALAR BONES.

ANN STRUTHER, aged 21, was admitted, February 24, under the care of Mr. LISTON. About four years ago she was very much annoyed with pain in the left side of the head and face, attended occasionally with swelling, which symptoms at the time were attributed to cold. Pain in the teeth of the left superior maxilla supervened, and a tamour appeared on the outer surface of the gum. Three teeth were extracted, with the hope of giving relief, but the swelling afterwards rapidly increased. When about the

and continued the process of the manufacture of the second of the second

After removing the central incisor of the right side, the surgeon commenced an incision a little below the inner angle of the eye, and carried it obliquely under the corresponding aid of the nose, so as to detach its cartilage from the bone, then through the lip, into the mouth, in the mesial line. He next made an incision from the prominence of the check to the angle of the lin. The flap thus formed was then reflected upwards. The tumour was now so far exposed as to be ascertained to extend considerably backwards, and the operator found it necessary to make another incision in the line of the zygomatic arch, so as so fall nearly at right angles on the outer perpendicular one; this exposed the whole extent of the tumour. With the well-adapted forceps introduced by Mr. Liston, the nasal process of the superior maxilla was divided. The operator next cut through the zygomasic arch, near the suricle, and then ough the malar bone, at the transverse facial spture, into the spheno-maxillary wore; the diseased maxilla was separated with great facility from its fellow of the opposite side, by strong scissors, leaving the palate entire, and untouched. The diseased mass was now readily removed, involving the whole of the superior maxillary bone, and the whole of the malar. A large artery, which was bleeding very freely probably

antho;

Mr. Lixton pretrued using the forceps in this case, as he thought the employment of the saw, or the mallet and chief, would have jurisd the party, and here predactive of such more differing to the patient. The operation might have been as quickly perferring with those instruments as with the forcers.

-March 2. The patient hidding encountingly with a the answer water ratioval on Monday.

This operation is worshy of record, both from the lacility and the celerity with which it was performed. The case atogether possesses much interest for medical men, and any gentleman who wishes to inspect it will find every facility afforded him for that purpose, should he pay a visit to the hospital.

PROBLASIS.

William Snook, etat. 22, a footman in a gentleman's family, admitted December 30, 1835, under the care of Dr. ELLIOTRON. He has, until within the last six or eight months, enjoyed good health, when (May he became slightly indisposed, and there appeared a reduces of the skin, affecting the thighs and posterior portion of the knee joints, filling up the popliteal spaces. This continued for two or three days, when a seniness was first perceived, to which there was quickly superadded painful fissures or rhugades, from which a serous fluid of an aerid nature was continually exhaled.

He was treated for some time by a general practitioner, who prescribed the decoral practition of ducamara and blue pill twice a day. Copious ptyalism was by this means induced, but the disease nevertheless increased in severity, and about a fortught or three weeks since he gradually lost all sensation and motion in the inferior extremities, and perceived some numbroes in the arms and hauds, without, however, affecting volition. Speech became affected, and he hesitate considerably; the month being also drained unwards and to the let side. There a printers, however, gradually distincted to verify up to the period of his admission the hospital.

At the present verification of the present of the p

Whate poulfical region

starat ; pulse f ouring. Mittantue

s. 1. 1936. Symptoms not relieved min of right side; howels confined; pulse 10, with the same characters as vesteriny. Mittantur sanguis ad 32. Haustus Sennes

5. Continues made the same t the pain of thest, however, being much increased on saughing are aking a dep inspiration. directines decem later, dext applicatur.

9. Somewhat better, a venicular erupion of an essentatous character appearing on the lips and chin; pulse 90, soft. Pilul. Hydrargyri grana quinque bis die.

13. Ecsematous eruption desquamating; mouth not yet affected; pulse 96, and full; ongue furred. Detrahetur sanguis ad 5xii Auge pilulam Hydrargyri ad grana decem, ois in die.

22. Pain of head, and other symptoms somewhat increased; mouth not affected; pulse 96, full, and hard; psoriasis hot, red, and very irritable; tongue dry and furred; irine high-coloured and scanty. Venescotio ul Ixij. Pilulæ Hydrorgyri gr. x, ter quoidic sumat.

28. Pain of head; giddiness and stopidity nereased; eruption at the bend of knec, not, red, and exceedingly painful, and di-riding, forming rhagades whenever the foot a extended; an abundant secretion of acrid erum exceriating the parts on which it uns. Asperguntur partes affects pulvere alaminæ; fiatque venesectio e brachio ad ixij. Sumat pilulam Hydrargyri 6tis horis.

Feb. 1. Month still unaffected; eruption wound the mouth nearly gone; paoriatic eruption less painful and inflamed; pain of read, giddiness, &c., entirely gone; the plood slightly buffed, not cupped.

8. Gradually improving; some tightness across the chest, and cough, he having conracted a slight cold.

13. Pain in the chest continues, together with the cough, with little irritability of tomach; bowels open; pulse full. Venetio ad 3xij. Sumatur Acidi Hydrocyanici Jormulam Scheeli Jj, ex Aqua Mentha rife, f. zisa ter quotidie.

from this period he gradually improved, general and local symptoms diminishing, his was presented cured on Tuesday the

Bir By aged rehe cu of Mr. Libedita Militarate, back a some

made some for some: Hemorrhage from the u need a fortnight ago, as daily stuce, increasing in its duration so se to blanch him in an Bowels open; pulse 132, small; p He came to the hospital on accoun morrhage; he has not suffered from symptom since his admission. Ad the solution of surjects of morphis and gibles. The next day the sore was touc freely with nitric soid.

15. The nitric acid has been three time applied since the last report; warm-bat and full diet ; nitric said again applied. Paraphymesis, which had existed was divided. A plot of decoction of sarasparilla

to be taken daily

21. Nitric sold again applied. The sore looks much healthier.

26. A lotion with four grains of the nitrate of silver to 1 of water applied.

3. Solution of the sulphate of sinc to be applied.

19. Ulceration of the prepace much better. Great redema of the prepuce. To foment it.

21. Made an out patient, being nearly well.

CORRESPONDENTS.

THE session of Parliament having commenced, it is earnestly requested that all communications to Mr. WARLEY may be addressed to him at his residence, 35, Ban-FORD SQUARE.

MR. FERRALL.-With reference to those concluding remarks of "OBSERVATOR" in his communication in THE LANCET of Feb. 20th, which relate to Mr. Ferrall, we feel bound to my that their tendency escaped our notice. In our previous number we did not merely state that, " the suttenticity of the petition from the Sisters of Charity " had been denied," as the impression on our mind was, that no such netition had been presented of all. We are now authorized to say that se petition was presented on behalf of Mr. Ferrall from that or any other quarter, and that his only communication with Government on the subject, was his own letter to the Chief Secretary, stating his baving filled the effice of house-surgeon. to the Richmond Hospital for nearly five years, &c.; and this communication was ed to enlarge very rapidly. The age the would by a member of the Government, To the Editor. - Sirty The cas direct system which has hitherte ! valuable journal in the highest est the "liberal world," assures me this letter will be published. The last number of Tax LANCET contained a paragraph stating it to he Dr. Cummin's intention to resign his chair in this school "in deserence to the exasperated feelings of the students, " which I can faithfully assert was read with surprise and indignation by every one of them, and considered to be equally malicious as false, on the part of the correspondent. Such rumour has not existed, the pupils being satisfied that Dr. C. had no particination in the scurrilous and prejudiced account of the meeting at the Crown-and-Anchor, given in the Medical Gazette. am, Sir, with every respect,

A SENIOR STUBERT IN THE ALDERSGATE MEDICAL SCHOOL. . Reading-room, March 2nd, 1836.

To the Editor .- Sir: Between the period of Mr. Smith's rejection and the meeting at the Crown-and-Anchor, I had occasion to call on Dr. Cummiu, at his lodgings. The conversation turned on this point, and Dr. C. mentioned that he knew Mr. Smith, and that he considered him to be a clever and well-informed young man. Of course, Sir, it is impossible that Dr. C. should have any connection with the "Gazette," for I hope that no one who is a member of our profession could allow another to remain under the stigma of ignorance, when he knew or believed to the contrary, and had so ready a means of stating his knowledge of that fact in print. Your obedient servant, March 1st.

Mr. W. F. SHORBRIDGE has addressed a letter to us in which he states that the late protest from Guy's Hospital in favour of the Apothecaries' Hall, was not "a hole-andcorner affair, being done in the face of every one belonging to the hospital." He says that " Messrs. Mugg and Bent" (Mr. Mugg's name was misprinted Muggand in a late LANCET) " could not, either with or without favour at court, have passed the Hall, because the former is not out of his apprenticeship, and the latter did not attend the hospital until last year." Our correspondent adds, "that Messre. M. and B. did not induce the junior pupils to sign the protest." The "fact" which Mr. S. quotes respecting the Crown-and-Anchor meeting is certainly not a "fact." We would readily have given insertion to the whole of our

by Dr. W. Cummin. Mr. Lank having "the assertions of three of interioral in a second so extensively circulated as Tas Lancer 7 Me. Lush has overlooked the fact that these essertions were not "contradicted" on analyzage anthority, but on the expressly declare statements of the gentleman whose declara-tions were first of all impugned. To him we beg leave to refer our correspondent, Mr. Lush has also suffered the fact descape his memory, that Dr. W. Cummin is charged with getting his bread by editing an anonymous periodical, whose peculiar claim on its subscribers is founded on its unceasing attempts to destroy the moral character of an avowed writer, by statements which are notoriously false, - a crime which in iniquity and turpitude it would be difficult to surpass.

A copy of the depositions which were taken at the inquest that was held on the body of Captain MACKENZIE is before us, but these are by far too voluminous for insertion in their present form. A condensed abstract of them, however, is in progress for publication. The prosecution of SALMON is not to be conducted by the parish. The prosecutors, therefore, will be entitled to the gratitude of the entire medical body. The depositions contain many statements of a very interesting character. The disclosure which took place at this inquiry, is a compound of impudence, folly, and infamy, almost without a parallel in the annals of quackery.

Some resolutions having been forwarded to us relative to the contents of a note which appeared in the last LANCET headed " Gower-street," we may observe that it has since been explained that it was indited uuder an erroneous impression, and that the services of no teacher can be more highly valued than are those of the gentleman whose absence from the usual scene of bis duties was made the subject of comment. It could not have been known to the writers of the note in question, that most of the hours which are spent out of the dissectingroom, are devoted to a practical examination of the more advanced students,-not an examination consisting of the rote questions of our books, but founded upon s thoroughly scientific acquaintance with the structure of the human body.

Letters from Mr. Denham, R. B. L., Mr. L. (uf T.), An Assistant Chemist, J. B .- The letter of a M.R.C.S, will probably appear

C. The second, also, of the two have given insertion to the whole of our correspondent's letter, had we not been enabled in this brief space to present a statement of all the facts which he avouches.

Mr. John A. Lush, of the Aldersgatestreet School, assures us that the feelings of the students of that school "have not been all we are satisfied on this points."

THE LANCET.

Iot. 1.1

LÖNDON, SATURDAY, MARCH 12, 1836.

LECTURES

ISEASES OF THE BRAIN AND NERVOUS SYSTEM.

W IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL,

sysician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculte de Médecine of Paris.

LECTURE XV.

RAMOLLISSEMENT OF THE NERVOUS CENTRES.

(Continued from p. 891.)

Ramollissement with Contraction of Limbs.

motion produced by ramollissement of M. Rostan on softening of the brain. ie brain, we have mentioned contraction so deal of energy and reason on its value is a pathognomonic sign. There is a good all of traits its this; contraction is a pathognomonic sign. There is a good all of traits its this; contraction is a pathognomon when it occurs in an early past but we was allow, on the other that the same classes do exist where this when once established, this contraction does not always exist in a permanent manner; it is not unusual to see it disappear crictly taggether. I finded in our the dancer of comments and the same cricking the same cric ion, will tell you, that if cases of ramollis- recover their power of motion, or, what is

sement without contraction have been observed, it is because the cases were not studied with sufficient attention or minuteness; the observations imperfectly or carelessly reported? This may he true for a certain number of cases, because when an appeal is made against accuracy and fidelity, one can only answer for his own observations; but we can affirm, that we have seen individuals in whom ramollissement was announced from the very commencement of the symptoms, by paralysis alone, without any contraction of the limbs or muscles: of this we are perfectly sure. The nature of the disease was determined after death by inspection of the body, and during life the functional derangements were noted down with accuracy and care. If such a symptom as contraction existed at any period of the malady, it could not have escaped our notice, especially as we looked for it in all the cases of ramollissement that fell under our own observation. You will find several cases demonstrating the truth of what we have just advanced, in the fifth volume of As one of the most frequent modifications the Clinique Medicale, and in the work of

However, whenever contraction does exone or more limbs or muscles; this con-list, we may diagnosticate the presence of action consists in a flexion of the limb, ramolissement with great probability of ined to rigidity, and presents the same being right in our judgment, for, although flerences as paralysis, with respect to its the absence of this symptom, as we have igree, mode of appearance, march, and just said, does not prove the absence of at. When developed in the commence-softening, yet its presence is a very strong ent of the disease, contraction is an expression in the dient symptom; indeed, one of the best brain. Like paralysis, the contraction may gns by which we may diagnosticate ramol- come on in a gradual manner, and increase sement. It certainly does frequently exist slowly, until it terminates in loss of motion, a symptom of the disease in question, which latter continues until the end of the ad M. LALLEMAND has insisted with a disease. When it persists for a length of and deal of energy and reason on its value time, the force with which the muscles are

No. 654.

more common, they remain feels and benumbed, or more or less paralyzed. Again, we may have cases where the contraction disappears altogether, and is replaced by paralysis, or where these two phenomena alternately assume each the place of the other, as we have already seen paralysis and convulsions alternately attacking the affected limb.

The contraction may appear in a sudden manner; in fact, swyral cases of ramellissement have commenced by a violent contraction of one or both limbs on one side of the body, and then the symptom becomes peculiarly characteristic of the disease.

Paralysis, direct, and opposite the Lesion.

The progress of the contraction also varies in different cases; sometimes it persists, either gradually increasing, diminishing. or resting stationary; in other cases it may remain only for a few hours, or even minutes, and then be replaced by paralysis; and, once gone, it may either never appear again, or return only at uncertain intervals. We have ourselves witnessed all the different lesions of motion now described; you see that they are numerous; but this is not all; these diversified symptoms may also vary according to the different seats which they occupy; in some cases only a single limb is affected; in others the two limbs on the same side of the body are contracted. Finally, in a certain number of cases, the contraction affects the four limbs at the same time; these different lesions seem to depend on the different seats of ramollissement in the nervous centres; and here an interesting question presents itself,-Do we observe a diversity of symptoms, according as the ranollissement may occupy the anterior portion of the brain, its middle portion, or the posterior lobes? Does softening of the striated bodies manifest itself by peculiar phenomena, which enable us to distinguish it from softening of the thalami, or of any other part of the brain? This is exactly the same question which we took such pains to resolve when treating of cerebral hemorrhage. It is to be answered in the same manner, and we must refer you to what was said upon that occasion; it were useless to repeat now what has been already said. The paralysis which results as an effect of ramollissement of the neryour centres, generally affects that side of the body which is opposite the injured hemisphere of the brain; this, if you re-member, is the same law which governs the less of motion in cases of apoplexy, where the paralysis is almost universally crossed; however, we find some exceptions to this rule; the paralysis is sometimes direct and not opposite; in some cases ramollissement of the brain, as well as cerebral hemorrhage, gives rise to loss of motion on the same side

of cases which we analyzed in a with the object of determindisease of the large is direct or opposite; the two last cooce, taken from the thesis of M. CHAMBEYRON, were cases of ramplissement of the brain, and not of hemorriage. The intensity with which the contraction manifests itself is various, and it may occupy more or less of the four members at the same time. In some cases we see the muscular contraction confined of a length of time to a single ringer, or even to a single phalanx of that finger; sometimes it extends to all the fingers of one hand, or to contraction of the fingers we find joined a flexion, more or less permanent, of the fore-arm or the arm; the same remark is applicable to contraction of the lower ex-tremity; one or more that may be flexed, or the leg forcibly bent upon the thigh.

Ramollissement with Convulsions.

The different forms of lesion affecting motility now described, may present themselves with different degrees of frequency; however, they belong peculiarly to ramollissement of the nervous centres, and when we observe them in any case, we may diagnosticate that affection with a great certainty of being right.

It is unnecessary, however, to warn you that ramollissement of the brain may be accompanied by certain accidents which are not comprehended under the rules now laid down, and if you were to meet them in practice, you would in all probability be led astray unless acquainted beforehand with these, as it were, anomalous phenomena. Thus some patients are affected with general or partial convulsions, very similar to those we observe in cases of cerebral congestion or meningitis; when partial, they affect the side . of the body opposite the softened hemisphere; general convulsions are almost always the effect of a double lesion in the brain. Finally, in a few rare and exceptional cases, the convulsions have been seen to attack the same side of the body as the lesion in the brain.

Ramollissement producing P.pilepsy and Tetanus.

Ramollissement of the cerebral hemispheres may sometimes declare itself under the appearance of epilepsy. M. Letter has published an observation of this kind in the Journal Hebblanadaire, February 1830; the patient, who had gone to bed in good health, was seized in the night with violant oplication fits, and soon died; an extrastve reliasement was found to the superficial and deep-arated that of one hemisphere.

of the brain, as well as cerebral homorrhage, dgirn, in some cases randitionment progives rise to loss of motion on the same side duos symptoms of tetanus, either partial or of the body as the ramellissement. Thus, in general, but these cases are exceptional.

cases we find mention made being the only lesion of this also is an except llissement without an eating Mostity.

Here are cases where the lesion of mollity is unusual, and different from those which commonly attend ramollissement of he nervous centres; in some cases all sympoms of this kind are absent; we observe seither convulsion, nor paralysis, nor conraction; in a word, the patient exhibits no ymptom of injured modility. This is the ame thing as we occasionally observe with espect to the intelligence, but it is infinitely nore rare; the exception, however, does exst. We have seen examples ourselves, and he observations published by other authors grove beyond doubt that ramollissement of he brain may terminate fatally, without saving once produced the least modification if motion. These cases are generally seen in iersons wasted away by long ill-health, re-

Lexions of Sensibility

constitute a set of symptoms of some im-jother cause. portance in the diagnosis of ramollissement of the cerebral hemispheres. These lesions in relation to the constancy with which it may have their seat, either in the brain it self, or in some other part of the body.

The first and most remarkable phenomenon to which we would direct your attention, is the headache that accommunics a! great number of cases of ramollissement. This symptom, noticed by all writers on cerebral ramollissement, and on which M. ROSTAN insists with considerable force as a sign of the disease in question, is seen in a majority of cases, although we have witache was completely absent. This modification of the sensibility, produced by softening of the brain, has not always the same In some cases the headache is exseat. In some cases the head which terrors, and the symptom is also valued by instead the point of the head which the commencement of the malady, continues. The pattern, the seat of the disease. The commencement of the malady, continues the pattern, the seat of the disease with death. In other cases the leadache disappears in proportion as particularly the septial seat of the malady continues.

and the seat of the ramollissement in the substance of the brain; other patients comlain of a vague pain, occupying indistinctly the whole cranium, and which they are enable to localize, otherwise than by saying they have a headache. In other cases, again, the pain is fixed, circumscribed to a small part of the head; but this does not correspond, as in the first set of cases mentioned, with the lesion in the brain; on the contrary, it is situated at a greater or less distance from the softened point. Thus the pain may be confined entirely to the forehead, although the ramollissement is seated in the posterior lobes of the cerebrum, or even in the cerebellum. There are cases where the pain, general and vague in the first instance, becomes limited as the disease advances. Finally, we sometimes see the pain diverging, as it were, from a central point, attacking other parts of the head, and extending even to the neck or thoracic extremities.

The intensity of this headache is very variluced and worn down by some chronic distable; in some cases the cephalalgia is exase, for example, and the ramollissement cessively intense, and the patient complains isually occupies a small portion of the of a lancinating pain which often forces him acreams substance. But we must again to scream out from excess of suffering. In open that they are rare. The number of other cases the cephalalgia is much more uses of ramollissement now published is feeble; the patient, perhaps, complains of a treat, very great; perhaps we could collect weight, of an unpleasant sensation, either etween two and three hundred cases scat- confined to one point, or extending to the tered through different works, yet we only whole cranium; or the headache is so alight, know of six or seven cases in which no that unless you ask the patient directly lesion of motility has been observed. This whether he suffers in the head, this sympis all we have to say in respect of the lesions tom may escape your notice altogether. We of motility which a company ramollissement do not find that it has any peculiar distinof the cerebral hemispheres. We shall next guishing character: in some cases the paspeak of lesions of sensibility as symptoms of tient describes it as laneinating; in others ramollissement of the cerebral hemispheres, as a dull and heavy pain; in a word, we find here the same varieties as to character, as we observe in headache arising from any

> This modification of sensibility varies also may exist. In several cases the patient complains of his head throughout the whole course of the disease; his headache is con-stant, and never quits him. In other cases the pain, habitually slight, is much aggravated at certain intervals, is renewed under the influence of moral emotions, by febrile reaction, exercise, &c., or we find that the headache returns without our being able to explain the cause of relapse. We call to mind one case in particular, of a curious nature, where the cephalalgia was completely intermittent, and returned at certain fixed periods, and the disease was mistaken for one of intermitting neuralgia.

The duration of this symptom is also va-

according to the period of time at which it commences, thus it may optio the acene, and constitute the first symptom of ramollistement, or it may precede all the other the state of phenomena, and exist solely in an isolated much more tries the cranitation of cumuner, for a great or less naried before the manner, for a great or less period before the tankous sensibility extends lively to the actual development of the lesion; the dura- whole integuments of the body, and who tion of this prodrame is generally not long; least contact becomes insupportable. In from a few hours to five or six days; but in other cases, the sensibility of the akin, either some cases we have seen it existing as a remaining unaltered, or presenting any premonitory symptom for fifteen, twenty, or one of the modifications just described, even thirty days.

Another and the last kind which we shall of the disease is not attended with any le- They sometimes are very violent, and give rise sion of sensibility. The headache comes on to the most horrible cramps, which all our at a later period, when paralysis, or contract efforts are unable either to remedy or alletion, is already more or less feebly esta- viate. These pains may exist habitually, or

course of the disease.

exhibits no modification of sensibility in the subject are of the most distressing nature. integuments of the limb which is contract. What shall we say of the ed or paralyzed. In the second class of cases, . the sensibility is either diminished or alto- ! Lesions Exhibited by the Organs of Sense the contrary, exalted.

guments of the limb, which is at the same most cases the power of motion is not lost others we may observe a numbriess of the toes or fingers, a sensation of cold or pricking in those parts long before any characteristic symptom of ramollissement has made its appearance. Paralysis, however, is soon established, and with it comes a complete though gradual destruction of sensibility. In some cases that are rare, the whole skin at uncertain intervals has become more dull, more unimpressionable, than natural, and afterwards recovers its ordinary power of sensation. In the third series of cases above ing, and the bowels are ordinarily a little alluded to, when the sensibility is exaggerated, we find pain, situated either in the any notable symptoms. The circulation skin alone, or in the subcataneous tissues. The alteration of cutaneous sensibility trouble, aithough here the codifications are exaggerated, we find pain situated either in the skin alone, or in the subcutaneous tisted its action and documents. sues. The alteration of cutaneous sensibility mal frequency. In other class the pulse is is generally confined to the paralyzed or evidently societated, and then the ramolcontracted limb; the integuments then lissement seems to be of an acute nature.

ecome excessively painful, and is sufficient to produce exguisive metions of the more deep parts become the seat of Another and the last kind which we shall pain: these deep-seated pains may coexist mention, is that where the commencement with paralysis or contraction of the limb. blished. However, you must be remember case for some time and then return again, that this lesion sometimes does not exist at They sometimes proceeds for a considerable any period. You may meet with several period, all the other symptoms of ramolic cases of ramollissement of the brain where lissement; we should therefore well observe it is altogether wanting during the whole their form, march, and nature, and all the circumstances, however trifling, by which We also have occasion to observe certain they are accompanied, in order to avoid lesions of sensibility in other parts that are mistaking them for neuralgia or a rhenmaplaced under the dominion of the brain. We tismal affection. Some patients, on the shall now examine these, and for the sake other hand, are free from pain during the of order we shall divide them into three whole malady, and they are fortunate indistinct classes. In the first, the individual deed, for the sufferings to which many are

gether lost. When the parient touches an in cases of ramollissement of the cerebral object, he is not sensible of its contact. If hemispheres? The symptoms connected you prick the skin, he does not feel the with the organs of sense do not aford any slightest pain, &c. In the third series, the thing very particularly worthy of mention; sensibility, far from being diminished, is, on or all that we might say would be merely a concition of what has been already ex-The diminution or complete abolition of plained under the head of hemorrhage; the sensibility, is chiefly remarked in the inte- sight may be either diminished or completely lost; the hearing may undergo the same time the seat of a lesion of motility. In modifications. In one case, recorded in our Clinique, the patient lost the pover of seeuntil paralysis has already existed, but in ing, on the same side as the paralyzed limb.

Lesions of the Digestion, the Circulation, and the Respiration.

Let us now pass to the influence of ramollissement of the cerebral hemispheres on the various acts of nutritive life; here also we have very little to say of importance. The digestion is but slightly, if at all, troubled; the tongue remains natural, and the abdomen is not painful or tunid; however, in a few cases, we may observe vomitcostive: these, as you see, do not constitute does not seem to suffer any great degree

The requiration becomes impliore frequently the sculties or circulation ains intact. When the ra-:spiration: colliseement is formed in a slow and gradual mmer, this faculty is not deranged at first i any degree that attracts attention; howver, as the disease advances, the functions f the lungs become impeded, then embarused and difficult, and the patient at length ies & a kind of asphyxia. If the ramolssement progress very rapidly, -- be formed a sudden and violeat manner, - the respiition at once becomes embarrassed.assumes se stertorous character, and it is a matter the greatest difficulty to distinguish this rain : indeed, under certain circumstances, is actually impossible to say whether a itient suddenly seized with coma and steret is certain; we have witnessed it more the cerebral substance? can once, and your future experience will o doubt attest its truth.

Rumallissement Acute.

sions of intelligence which we have al ady described at sufficient length.

The secont sim resembles the first in the diden annihilation of the intellectual faculty, but lesses the samples affecting one more limit to have contraction; and this latter sign went indicates almost in a certain manner that the disorder is a ramellissement of the cerebral pulp.

In the third form also we observe a sud-

den loss of consciousness; but the lesion of mothity is neither manifested in paralysis or contraction; we have convulsions: these affect either one side of the body or both. When the convulsions are confined to one half of the body, we may diagnosticate the presence of ramollissement; but when they are general, affecting various muscles on both sides, it is not so easy to discover the real nature of the lesion on which they depend.

In the funrth form we do not observe any sudden loss of consciousness: the intellectual faculties remain intact, but the power of motion is either suddenly lost, or modified in various ways already alluded to. These rin of the disease from bemorrhage of the cases are also embarrassing, and require cautious examination. They may be very readily confounded with hemorrhage of the brain, for what is more natural, when you rous respiration be not affected with apo- find a patient suddenly deprived of all exy, though after death we find nothing power over his hand or leg, than to attriit settening of the nervous pulp. This bute this lesion to the effects of effusion into

Ramollissement Chronic.

We now arrive at a fifth form, in which ramollissement appears as a chronic disease; We have now passed in review the differ- here the intellect is preserved for a long it symptoms which accompany rannellisse- period of the disease, and we do not observe out of the cerebral hemispheres; but these any sudden modification of sensibility or nctional derangements do not always motility; the disease, on the contrary, roup themselves together in the same marches gradually, the patient at first finds samer: hence arise different forms of the that the limbs at one side of the body are a me disease, with which we must be ac- little weaker than those at the opposite minted, whose features we must study, side; sometimes they are only a little pain-herwise our history of ramollissement ful, but this feebleness gradually changes ould remain imperfect and unfaithful. In into true paralysis, or contraction: these se first form to which we would direct your symptoms persist, or become more and more tention, ramollissement commences and intense; the lesion of the brain now exerarches with all the characters of an acute cises an influence on the conomy at large, sease; there is a sudden loss of conscious-ess, accompanied by paralysis of the mus-es on one side of the body; this case is physicial, or worn out by suffering and are. Ramollissement of the cerebral he- general weakness. Cases of this kind are ispheres very seldom commences with much more easy to diagnosticate than those ich violent symptoms, but we have seen in wnich the disease commences brusquely, camples of this kind, and we were inti-and imitates apoplexy. When we find a artely convinced that the patient laboured patient enjoying the full exercise of his in-uler an attack of anoplexy. We opened tellectual faculties, but in whom the power e body after death, and sought in vain for of motion in one side of the body has been e expected compliant, on the contrary, we gradually lost, or where the hand and arm and an extensive softening, without offur have become slowly contracted, we may with on in one of the hemispheres. The loss some degree of certainty pronounce on the conscionsness, marking the access of this existence of ramollissement, for there is rm, may persist until death, or the come only one other lesion, viz. tubercles, which sappears, but leaves behind it the various can imitate this form, and even they perhaps produce their symptoms more by the state of the cerebral pulp round them than from anything else. Thus, if in some cases the diagnosis of ramollissement be easy, there are others where we find much difficulty in distinguishing it from cerebral hemorrhage, from meningitis, or from accidental products in the brain.

Finally, in the sixth and last form that we shall notice, the disease is completely latent. During life the patient does not exhibit any single modification of the intellilatent. gence, of the motile power, or of the sensibility, yet after death we find softening of one or more points of the cerebral hemispheres, sometimes existing to a very considerable extent, from the insidious manner in which it marches, and from the complete absence of all symptoms; this form justly merits the name we have given it of "latent ramollissement."

I have now given you a pretty extensive description of the symptoms that accompany ramollissement of the cerebral hemispheres; but I have still a few words to add upon this part of our subject, after which I shall pass to ramollissement of other portions of the nervous centres. The observaupon a certain number of forms late which ramollissement of the cerebral hemispheres may be distinguished, according to the different symptoms which attend and characterize each particular form. I have enumerated six species of raniollissement, founded on the absence or presence of coma, of paralysis, or of convulsive movements. The last form which I named was the lateat. from the fact of its being announced by no functional lesion whatever, by none of those symptoms which in all the rest lead us to establish the existence of rannollissement of the brain. We also saw how ramollissement of the hemispheres may sometimes present itself under characters so well marked, so prominent and decisive, that we cannot possibly confound it with any other lesion. In some cases, however, we have seen the symptoms of such a nature as to bear a strong analogy to those resulting from cerehral congestion, or even hemorrhage of the brain, while it requires some caution and experience to distinguish a third series from inflammation of the cerebral membranes. We now return to the history of those functional phenomena which manifest themselves during the course of ramallissement of the cerebral hemispheres. A few observations in addition to what we have already said, will complete what we have to say upon the subject.

Order of Succession of the Symptoms of Ramollissement.

The symptoms of softening of the brain do not always present themselves to our notice in the same order of succession, or spheres is preceded by a prodrome; this is has been superadded, or coexists with th generally a headache, more or less intense, softening of the cerebral substance, and w

which we spoke in a former mis the ais cephalelgia frequently precides an the ther phenomena, all other lesions of motility of sensibility it is then a premofilibry symptom, or airodrome, but it does not possess any character by which we can distinguish it from the headache that precedes apoplexy and various other disorders of the nervous centres. In a greater number of cases, the headache commences with the commencement of the disease itself, of which it then constitutes an integral symptom. In some cases we have no cephalalgia, but the ramollissement is preceded by the different accidents (already described in their place) which characterize cerebrat conget on. Finally, we may observe some cases after up uremonitory symptom exists; the patient is suddenly seized with paralysis, contraction, beadache, delirium, or other lesions of sensibility, motility, or intelligence.

Whatever may be the form under which ramollissement of the cerebral hemispheres presents itself, either with a producine, or suddenly and under an apoplectic form, its duration varies under various circumstances. It is not an easy matter to determine in all cases the exact length of the disease, for we cannot always say at what precise time it has commenced. In some cases, however, the task is more easy, the sudden development of the disease and its rapid course remove all doubts as to its duration. In some of these latter cases, the disease ends fatally in a very short period of time; its march is most rapid, and the individual has ceased to live a few hours after the first symmetoms of rangellissement have manifested themselves; other cases, again, terminate still more rapidly. The progress which the disease makes is as rapid as that observed in the most violent forms of cerebral apoplexy. After having lain for one or two hours in a state of paralysis, or complete coma, the patient, who before that period seemed to enjoy perfect health, dies. These examples of ramollissement, destroying in one or two hours, are, however, very rare indeed. In a majority of cases the disease continues for a longer period, and does not terminate fatally before a lapse of ten, twelve, or twenty-four hours, and still more frequently is protracted to so many number of days. In other cases, again, ramollissement assumes the character of a chronic malady; we count its duration. not by hours or days, but by weeks. Thus you will find cases on record where, this associated in the same group; hence arise, lesion continues for thirty, as forty diversity of the same anatomical lesion, various symptomatic forms that we should be acsumption to the same manufactor of the same manufactor of the same manuer or with identical phenomens:

in some cases ramollissement of the hemiin some ca

may expect to find an acciden developed in the brain,

of the care in hemspheres is almost con-stantly fatal. Indeed, it is not easy to find even a single case in which we can say with certainty that any other result took place; however, we must notice the opinion of some authors whose prognosis is more favourable. Thus M. LALLEMAND quotes a certain number of cures. In his treatise on diseases of the brain and its dependencies, you will find it laid down, that a certain number of cases of ranfollissement terminate by induration of the cerebral substance: he thinks ramollissement may be converted into the opposite andition of hardening, and that a cure may finally take place in that manner. This is a fact which certainly requires confirmation. When we consider that the symptoms which characterize ramollissement of the brain are so various and uncertain, when we reflect that they may and have often assumed such a form, that it is impossible to distinguish them from meningitis or cerebral apoplexy, we cannot, in the actual state of the science, permit our-that a case of direct p selves to conclude with M LALLEMAND, served by M. JOBERT. that a circumscribed induration of one of the hemispheres demonstrates sometimes the existence of previous ramollissement.

A word on the manner in which death takes place in this disease. The fatal termination may simply be the result of functional derangement of the brain produced by ramollissement affecting any one part of its substance. In some cases it requires but a lesion of a small point to determine so great a disturbance of the nervous system as to compromise existence. In other cases the dies in a state of general prostration.

. In addition to the one case which M. ANDRAL gave in a late lecture, in which paralysis existed on the same side of the body as the lesion in the brain, we take the liberty of directing attention to the following cases presenting instances of direct paralysis, To they carried wafford every guarantee of authorsticity :-

there is a case, detailed by M. BAYLE, of chronic inflammation of the membranes ever the left hemist here, producing paraly-

The same mempir contains an account of seven other observations, extracted by M. BAYLE from different authors, but they do not all present the desirable degree of accu-

There is a case of encephaloid tumour in the right bemisphere, in a child twelve years of age, who had epilepsy, and paralysis of the right side, communicated to the "Anatomical Society," and noticed in its bulletin, Arch. Generales, 1834, April, p. 602.

A case of pearly tumour situated over the left peduncle of the cerebellum, producing paralysis on the same side as the lesion, was read before the same "Anatomical Society," and noticed to the Arch. Generales, 1834, March, p. 415.

Finally, two cases were published by M. DECHAMBRE, interne at the Salpetriere, of which an analysis will be found in the Rerne Medicale for October, 1835, p. 80.

In the Archives Generales for June, 1834, p. 239, &c., M. DENONVILLIERS mentions that a case of direct paralysis had been ob-

ON THE EXISTENCE OF

NERVOUS INDUCTION

IN FUNCTIONAL PROCESSES.

By W. F. Bow, M.D., Aluwick.

WHETHER OF NOT DERVOUS Influence and disease progresses until some complication electricity, or galvanism, be identical, it is supervenes; we then often find an effusion not new my intention to inquire; but there of blood in the centre of the softened pulp, is an important law of electricity, called the or an infiltration of paralent matter. Me ! Law of Induction, and I am convinced that ningitis may come on and hasten death. There is an analogous law of nervous influ-Finally, when ramollissement assumes a ence, whose operation in the animal frame chronic march, inflammations of several gives rise to many physiological and patholo-organs, and especially of the lungs, or the gical phenomena hitherto mexplained. I digestive tube, are added to the original disorder, and close the scene, or the individual one induction," and shall attempt to illustrate it by many, of what I conceive are, instances of its operation in health and dis-

" Active electricity existing in any substance, tends always to induce the opposite electrical state in bodies that are near it." In the same manner, if one nerve, or set of nerves, becomes excited, an opposite state is induced in the nerves of a neighbouring set. Take the act of blushing. A moral In the Renal Medicale, 1826, t. 1, p. 137, cause excites the sention nerves of the the case de relation for a politier, 52 years check, and immediately the nerves when the left head-phiere, with maralysis of the left head of the pillaries, assume an opposite state, and perpendicularly with maralysis of the left alde of the pillaries, assume an opposite state, and perpendicular the pillaries assume an opposite state. mit the distention of those vessels by red In the Revue Medicale, 1824, t. 1 p. 50, blood. Take the movements of the iris.

When the retina becomes excited by light. an opposite state is induced in the nerves, in conveying contractile power to the erectile the tissue of the iris, which, therefore, in prosortion to the excitanent of the retina, loses its contractile property, and so be-comes distended with blood. Hence its expansion, and the proportionate closure of nerves to activity, by being converted into the pupil. The movements of the iris may chyme loses that stimulating property; be compared to those of a delicate electro- hence these chemical nerves pass from a scope; or, indeed, this little organ may not positive to a negative state, and, conscinabily be regarded as a natural and very quently, the contractile nerves pass from sensible electrometer, denoting, according a negative to a positive state; the muscular to the degree of its expansion, the intensity structure thus recovers its tone, and those of excitement of the optic nerve.

functions of some of the principal nerves, infinitely acquainted with anatomy as to say will save much repetition hereafter. The where originate the nerves which convey great sympathetic system is composed of contractile power to the muscular fibres of two divisions, one of which governs con the pylorus, but I am sure that those nerves tractility in all muscles; the other, by a cannot proceed from the same ganglions chemical agency, effects most of the secre- which give off the nerves that convey contions. The nerves of the former division I tractile power to the other muscular fibres shall name contractile, those of the latter, of the stomach. If they had the same ganchemical. The par vagum are, strictly speaking, chemical nerves, but so connected are would become relaxed, when the other mather with the spinal accessory, that they cles of the stomach became relaxed, and the may be said to be composed of two division would pass on undigested. Or, suppossions. The spinal accessory is a motor ing the stomach to contain some sub-tance, nerve; that is, it carries an influence then, when the muscles of that organ con es, of the par vagum, which carry the in- through the cardiac orifice. fluence of this nerve, are motor nerves. The contractile nerves of the arteries of the spinal nerves are sentient and motive. the stomach during digestion, assume, also, thought it proper to distinguish the nerves

Ly calling them motor and motire. Were it not for the law of nervous induction, the act of filling the stomach with food of the gastric fluid. Digestion could not would be attended, at all times, with a sen- proceed, were the activity of the par vaguu sation of pain rather than of pleasure; for not, partly, supported by nervous influence the muscular fibres of the wsophagus, whose office is merely to transmit the food, would have to do so with a force sufficient to overcome the contractile efforts of the muscles the food, nor could the arteries become reof the stomach, which efforts would be increased in proportion to the quantity introduced. Instead of this, no distending force is required, for there is no resistance offered; the muscular fibres of the stomach become relaxed, and the food falls, as it were, iuto an empty sac. When the gastric branches of the par vagum, viz., those which effect the sceretion of the gastric fluid, become excited, some other nerves must assume an opposite condition; for it is, as has already been said, with nervous influence as it is with electricity; an "ac-

p part, sustained at the expense Fretile nerves of the stomach; the become related the stomach, there-fore, become related the continue so until digestion in the stomach is a lift end, where the order of excitement is reversed. food which stimulated the gastric chemical chyme loses that stimulating property; contractions ensue, by which the chyme is To state here what I believe to be the propelled through the pylorus. I am not so which stimulates to muscular motion. The tracted, the pyloric fibres would contract branches, therefore, or the supposed branch- also, and thus force the contained mass

The contractile nerves of the arteries of The motions effected by the spinal acces- a negative state, in consequence of the exsory are involuntary; those by the spinal cited state of the nerves secreting the gasnerves are voluntary; I have, therefore, trie fluid; hence those arteries, lawing their power of resistance diminished, become distended, and thus present a greater volume of blood to be acted on for the production derived from the muscular and arterial structures of the stomach; for the stomach could not then become relaxed to receive laxed so as to be enabled to furnish, in proper quantity, the materials to be acted on by the excited chemical nerves. During digestion, then, so far as the stomach is concerned, we have an example of the operation of the law of nervous induction. We observe results arising from a negative or an inactive state of contractile nerves, induced by a positive or an active state of certain chemical nerves.

In the spleen, during digestion, the reverse is the case; we have there an active state of certain contractile nerve indud can be effected in no other way than by merves. The spleen is a constitute of certain or any one part by an inactive state of certain chemical can be effected in no other way than by nerves. The spleen is a constitute organ, withdrawing electricity from another part; one can electricity be abstracted from the tion from the pur varian. The this function one without being received by another." branches then, of his nerve, become active, The excitement of the gastric chemical the splenic branches necessarily assume an

pposite condition; they become his inactive state of the chemical he splean, as necessary and the state of its contractile nerves; and from his operation of the law of induction, arise he changes which are observed to take comparatively small during digestion; not, is erroneously conceived, by being compressed by the garged stomach, but from its ingrise to renewed actions elsewhere. at an end.

from relaxation, gain an increase in diame-1 the sensation of hunger. ter; they therefore, for the time, contain an It will be observed that I adopt the docinereased quantity of blood, the onward mothers of Professors Tiedemann and Guielia tion of which is, also, more tardy.

the organ is exercising its function. Thus mixed with the chyle in the thoracic duct. Dr. Roget, in his "Bridgewater Treatise," The blood, therefore, owes much of its cowhich increases the power of secretion in took says that this hypothesis appears to any particular gland, is found to increase him to be liable to one fatal objection, at the same time the action of those blood-hannely, that animals have been known to vessels which supply that gland with the live for an indefinite length of time after quantity of blood. The truth of this must had been essentially necessary for so imbernal necessary one who will consider for portant an operation as that of chyllification. a moment the nature of arterial action, -- so plain, indeed, as to create a doubt as to the is, and must be, necessary to the health of scriousness of the author of the above quo- the animal, still the danger to life, on its tation, when he penned it.

The nerves furnishing contractility to the product, so much as from the loss of the pylorus, the ductus choledochus communis, organ in its capacity of a diverticulum to the spicen, must have the same gaininto estimate for whilst the spicence. This is the most important part of its funcbranches of the par vagum are inactive, as
the during digitary in the stomach, the duct
the causes consect, the pylorus is firmly
therefore, and the prior is firmly spicens is firmly
therefore, and the prior is firmly spicens is firmly
therefore, and the prior is firmly spicens is firmly
therefore, and the prior is firmly spicens of the part
stant craving for food; and, digestion in the
stomach being ended, the whole force of
vagum become active, digestion being ended.

of the progres and the duct become rethe other permitting the bile to flow; and the spleen itself, from selasation of its vas-cular structure, theomes enlarged. We observe; that when the process of di-

place in the size of the spleen. It becomes gestion is at an end, the nerves which effect the production of the gastric juice, being no longer stimulated, become inactive, givcessely gaining an increase of contractile splenic branches of the par vagum, recoverpower in consequence of the inactivity of its ling their power of action, recommence their chemical nerves. The cause of the activity labours, which contribute to the process of the gastric branches of the par vagum of sanguification. As by gastric chemical being removed by the food being converted agency the food is converted into a mass into chyme, the splenic branches of the par which is incapable of prolonging the excitevagum again become active, and thus the ment of the nerves which produced the condition of the vascular structure of the ponversion; so, by splenic chemical agency, spleen is again changed, in obedience to the the circulating mass is, by degrees, conlaw of induction. That structure becomes verted into perfect blood, incapable, at relaxed, and, therefore, easily distended by length, of prolonging the excitement of the blood; hence the spleen again increases in nerves whose labours contributed to the persize, as seen as digestion in the stomach is fection of the blood. The splenic branches of the par vagum, therefore, in their turn, It is with the spicen as with every secret- decrease in activity, inducing thereby a proing organ. When the chemical nerves of portionably active state in the nerves which the spheri become active, the nerves which furnish contractility to its vessels, and in convey contractility to its vascular struct the nerves which have a like ganglionic ture assume an opposite condition, whereby origin; consequently, the sphen, as the the vessels become relaxed, and they are blood is perfected, begins to decrease in thus enabled to present to the active nerves size; the ductus choledochus becomes again a greater volume of blood at the time that constricted, by which the bile accoundates blood is required. All glands, during the until again required for admixture with new exercise of their functions, appear swollen, chyme; and the pylorus is forced into strong because at such times their bloodyessels, contractions, the perception of which gives

regarding the use of the fluid secreted by The prevailing doctrine is, that the blood-the spleen. Those gentlemen say that it vessels of a gland become more active when i possesses the property of coagulation, and is says, " the same influence, for example, agulating property to this admixture. Bosmaterials for secretion." It is utterly impos- the removal of the spleen, without any obsible that arteries can become more active, vious injury to any of their functions, which and at the same time contain an increased could not have been the case if the spleen

Although the spleen, as a secreting organ, removal, does not arise from the loss of its and the spleen, must have the same gan- nervous influence when digestion is overin the process, would be thread upon system of contractile nerves, giving real as strong arterial contraction, and, consequently, venous congection. These are not the fancied effects of the removal of the spleen; their occurrence is confirmed by experiment. The voracity exhibited by animals deprived of the spleen, is so remarkable as to have been noted by almost all who have so experimented. In confirmation of what happens on digestion being ended, from the want of a diverticulum, I shall cite Mr. Dolson:—

"Experiment 1 .- The spleen of a dog was removed. The animal apparently suffered little pain from the operation. On the following day I gave it a quantity of food; it ate voraciously: for three hours afterwards, no perceptible alteration was produced; but in four hours indications of uneasiness were shown, and the animal hecame restless, and at last sunk into a torpid state: it was often moaning; the pupils were dilated, the heart labouring, there was frequent micturition, the respiration was exceedingly laborious, and, in short, there was every mark of plethora, or over-fulness of the vascular system. In the course of two hours from this period, the animal began to recover; and in about three hours these symptoms had subsided; considerable lan-guor remained. The animal took a large meal twice or thrice in twenty-four hours, and after each meal precisely similar effects were presented. The animal became more feeble daily. In a month after the operation it died.'

All the above symptoms might have been predicted; they all arise from morbidly increased contractility. That of the arterial system, causing venous congestion, is too plain to be disputed; the frequent micturion is teatimony sufficient of the state of the bladder. I might here explain the cause of the dog's recovery from the state described, but I think I can do so more clearly, certainly in fewer words, by and-by.

If the remote cause of the symptoms detailed by Mr. Dobson be the removal of the diverticulum of which I speak, it must follow that if we can render a diverticulum unnecessary, no such symptom need appear. The only way to render a diverticulum unnecessary, is to keep up or prolong the netivity of the nerves which secret the gastric juice, and this, as will be seen by Mr. Dobson's next experiment, can be done by feeding at short intervals:—

Bretiment 2. — I next removed the spleen from another dog, but instead of constitution. We know, however, the lightent from another dog, but instead of constitution. We know, however, the lightent form and the last experiment, some chronic affections of the spleen, spleen,

the splenic artery had come the abdonier was healed. Then each of the abdonier was healed. Then each of the same train of symptoms followed each meal, and at the same period, as in the last experiment, though perhaps not so urgent. The animal died in a month from the commendement of this plan of feeding.

There are very many circumstances, independently of facts resting on experiment, which lead to the conclusion that the product of the secreting function of the spleen charges the blood with a great portion of its fibrin. This function of the spleen is foreign to my subject, I shall not, therefore, dilate upon it. I may remark, however, that in certain morbid states of the organ, there is a wonderful deficiency in the coagulating property of the blood, and that, owing to a property of the blood, and that, owing to a want of knowledge of this fact, unlocked-for and unhappy results have followed surgical wounds. An interesting case of the kind is to be found in Mr. Wardrop's lectures, published in THE LANCET for 1833-34, vol. 1. p. 132; it is as follows:-" I attended a patient, where the introduction of a common seton-needle in the side was followed by a fatal hemorrhage. A gentleman, who had an enlarged spleen, was advised to have a seton introduced in his side, and this was done, in the usual manner, by Sir Astley Cooper. Alarmed by the quantity of blood cozing from the wound, I was sent for to see the patient in the evening of the same day. On withdrawing the cord, pressure, carefully applied, with graduated compresses, did not avail, and the hemorrhage being so profuse as to make it appear probable that some vessels of considerable size had been wounded, I thought it expedient to divide that portion of integument which existed between the two perforations of the seton-needle. Having done this, I found that the blood issued from numerous orifices, and I secured no less than nine vessels with ligatures. Blood continued, however, to coze from numberless small orifices over the whole surface of the wound, which every mode of treatment usually employed failed in arresting, and the patient died in a few days." Had the fact, that the blood is deficient in congulating property in some affections of the spleen, been adverted to, the introduction of the seton would not have been advised. In the narration of the above case, the "enlarged spicen" is but incidentally mentioned, the abnormal state of the blood being imputed to peculiarity constitution. We know, however,

for some time back) the hers and unessin spleen, and she has not becaminally during the last year, sanguiteous dejections.

A few months ago I had occasion to order a couple of leaches to the nape of the neck from the remedy. To be really effective in of this patient. I advised that they should be applied in the morning, in order that the the extent of impairing, more or less, the oozing from the bites might cease before energy of the brain. This impairment is bod-time, for I anticipated, from the disorder of the spicen, that it might be troublesome. They were applied at noon, and the blood continued to ooze until two o'clock next morning, before which time she dared to the arteries which were proportionably not go to bed.

As enough has been said of the normal operation of the Law of Nervous Induction, physiologically considered, I shall now attempt to give some instances of its abnor-

discase arise.

A blister being applied to a part of the surface of the body, the scutient nerves there become irritated and excited, and thus an opposite state is induced in the contractile nerves of the neighbouring capillaries. Hence, the power of resistance of these vessels being diminished, they permit of distention by red blood. The irritating cause (the blister) being continued, the relaxation of the vessels increases to such a degree, that lymph pozes from their months, which, being confined by the cuticle which it detaches, becomes a barrier to further irritation. In this simple morbid process lies the whole theory of inflammation, that little-inclusional, though often-handled. subject. The first link in the chain of the diseased action which constitutes inflammation, is a morbid excitement of the sentient nerves of the part; this induces au opposite state of the nerves furnishing contractility to the neighbouring vascular structure; and if the excitement be prolonged, or extended, the opposite condition is also extended to the larger arteries, until, at length, the whole arterial system is involved, and sympathetic fever is established. The most prominent feature of this fever is said to be excitement of the sanguiferous system. Excitement indeed! We see vessels furnished with coats for the purpose of confining and forwarding the contents of those vessels; we see them lose the power of retence, and thus become distended; we see them labour to rid themselves of the distouding said, by frequent, weak, and un-availing contractions, and yot we name their bility, and indisposition to muscular exer-conflict one of exchanges!" If, by "ar-tion. From increased contractility there is resulting the loss of power to act forcitly the content of the small and frequent pulse and
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had acted by reducing the force of ar-ticle action, then, as a means of cure, it would never have descended to us; for not one patient could have recovered from the disease, or, more correctly speaking, the cure, venesection must be carried to denoted by syncope, or a state approaching to it, during which the sentient nerves, which were morbidly active, become passive, and those which furnish contractility passive, become active; hence these vessels, having their contractllity restored, are enabled to relieve themselves of the distention under which they labour. Instead of reducing the force of arterial action, we inmal operations, from which the symptoms of crease it; the contractions then become more perfect, and, because more perfect, the contractions become less frequent.

Whatever tends to impair the energy of the brain, and thus, by nervous induction, to increase the contractile power of the arterial system, will be found a means of reducing inflammatory fever. We are told to bleed for the purpose of relaxing the vessels, when it is plain that it is relaxation that ails them. We would bleed in vain, did we not, by so doing, cause a restoration to them of contractile power, in the man-

ner I have attempted to explain.

The remote causes of idiopathic fever, act by impairing the energy of the brain and spinal marrow, or, in other words, by producing a negative state of those centres, and, of course, of all the nerves proceeding from them. By the law of induction, it necessarily follows that some other nervesnerves which have not their origin from the brain or the spinal marrow-do assume an opposite, or a positive state. We look now to the sympathetic system, and we find the contractile nerves all positively affected. The chemical nerves of this system are not affected positively. They are negatively affected, not, however, from the same cause which produced the like state of the cerebral and spinal nerves, but because the positive state of the contractile nerves induces a negative state of them. From this morbid distribution of nervous influence, arise all the symptoms which characterize the first stage of lever. From impaired energy of the brain and spinal marrow, we have listless-

come in columnary; hence arise From the negative state of the chest perves of the sympathetic, there is defective secretion throughout the body, undecar-bonized blood, and loss of animal heat.

Our best pathologists have it, that the remote causes of fever act by impairing the energy of the nervous system. In this there is a fallacy which has proved a heavy drag on pathological research. This error I did not escape when I published on the Nature of Fever, and I therefore endeavoured, with unintentional sophistry, to account for all the symptoms of the first stage, by reference to impaired nerveus power generally. Although I then had some notion of the law of induction, I did not see its application suffiincreased contractile power.

refuge under that miserable philosophy which would have us regard reaction as a negative, or inactive, state of the chemical the system must become defective in quanact as foreign matter, and become a cause of general irritation. Scooner or later the irritation. They become excited, and thus is the order of operation of the law of in-duction reversed. Contractility, which be-fore superabounded, now becomes deficient; hence the arteries, from a state of constriction, lose their power of resistance, and hecome distended. This negative state of the contractile nerves now induces a morbidly active state of the chemical nerves; hence the great increase in animal temperature, the highly florid state of the blood, and the vour. acid nature of the secretions.*

With regard to Mr. Dobson's experiments. I said that all the symptoms denoted morbidly-increased contractility, and, consequently, that there must have been a negative state of the chemical nerves. vitiated products of secretion would then become the irritating cause by which the order of induction was reversed. The animals, however, must have laboured under febrile symptoms until again fed, which, doubtless, was the cause of the "considerable languor " which remained.

I must here conclude. I fear that I have already encroached too largely. If there be

simply pointed it out. The fifties in the bulunes. If the not such a law, I have said see much.
Alnwick, Feb. 27, 1836.

us induction, I have notwith

HAHNEMANNISM.

To the Editor of THE LANCET.

Sin: Having lately seen some notices of Hahnemann's new doctrine in your valuable Journal, I forward to you the following observations for insertion.

Bold, but inconsiderable and despised, ciently clear. Blinded by specions authority homocopathy originated at the beginning and early impressions, I argued impaired of the present consury. Opposed, as its nervous power from symptoms, nay, signs, of doctrines were, to all bitherto required ideas, it necessarily met with the opposition Reaction takes place, and the second of the medical world. Hahacmann's prostage of fever is formed. Let us not take position of axioms, the blind acceptance of which he required from his followers, could not but be disgusting to the better part of specific principle, according to which the the profession. The proposed abolition of first stage becomes the immediate cause of all that had before been held to be true, the the second. It is evident, that during the mysticisms which obscured the whole system, and the wandering life of the author, nerves, the products of secretion throughout were all calculated to keep back disciples. At first, therefore, only such medical men tity, or in quality, or in both. They must thus as did not think for themselves could be gained over to the new practice. Peculiar circumstances, however, favoured its exsentient nerves become alive to this cause of tension. Among other causes, perhaps a chief one was, that many were disgusted with Brown's system, which at that time was at its height, and they thus embraced the opposite extreme. But, also, it was a time for systems, and, for many purposes, this one answered just as well as any other, I do not wish to say, that all who followed Hahnemann were insincere, or did so blindly, but I am forced to say that, for the greater part, little can be said in their fa-

Every scientific reader of Hahnemann's works, which chiefly treat of chronic dis-cases, for which he allows three causes only, must perceive, at the first glance, that all he says amounts to assertions merely, for hitherto the proof has been wanting, and the only conclusion to which we can come is, that Halmemann has rejected all that was received before, without giving us in its. place anything but a list of effects of media. cines on the healthy. On these the homeopathic practitioner is to found his rules for treating any given case. Of a pathology. treating any given case. Of a parton of the an only given us some fragments. Of the action of the parton of the pa sent since medicine became a science, yet

[•] I speck very gratoitously regarding the acidity of the veryinns. I take the hint from M. Donné, Mendeo-Chirurg, Fesiem, Jan. 1366. The acid prin-ciple is evolved by positive electricity. Why not by jo it we nervous indexact?

Charletti

re must laugh at the ridiculous ion of those men who discar lease. The Hamenanness, then not only pose medicinal science, but they discard he natural curative process; and yet they discard he natural curative process; and yet they all their treatment the most conformable ith nature! To try the effects of speci-ines on the healthy, is a suggestion of fahnemann's creation. Before his time emedies were observed with regard to the ick only. In some instances their effects, ertainly, were known on the healthy, as cell, but more from accident than in conequence of investigation. Hahnemann, bserving that remedies taken by healthy ndividuals produced symptoms similar to hose diseases against which they were used, ounded upon that observation his doctrine f "similia similibut," making it a general ule to employ in each diseased state such emedies as would produce the symptoms of similar malady in the healthy. A priori, he correctness of this position cannot be lenied. Traces of it we find in the ancients. for instance, it was known that the too free ise of quicksilver against lues, produced a lisease similar to lucs. It was but natural hat Hahnemann's system should be very imperfect in the beginning, it being one foun led in observation, and consequently requiring much time to perfect it. Whether, however, the conclusions thence drawn be true, ir whether the axiom be only true as regards certain remedies, must yet be proved, and only time and many experiments can lecide this question either way.

Halmemann, wishing to observe the effects of different remedies, was obliged to give them pure, i. e., without admixture. And herein consists one of his chief merits with regard to the amelioration of medical science. Before his time remedies were given in such marvellous, and often such absurd compositions, that the effect of each ingredient seldom if ever could be ascertained. This appears the more surprising, as some of the most distinguished practitioners always preferred the simpler forms of prescription. But it seems that the generality of medical men rather copied recipes which were recommended by some authority or other, than thought for themselves. I do not, however, wish to be understood as condemning all compositions, for the value of some has been tested by long experience; but if we consider what ridiculous reasons became the grounds for the adoption of different remedies, often only the taste, the feel, the colour, or even the form of the we cannot soo highly prize the labours of the man the paternsted to ascertain the

a great deal more than any agetem ever did before. To find the pecifics is also a merit of Habnemann and his followers.

We now come to that part of the homeopathic system which may be considered the most absurd, namely,—that the smaller the dose the more intense should be the effect. This assertion is also quite novel, and until Hahnemaan has established it on better proofs than have hitherto been afforded, every thinking practitioner must see its feebleness; and, to say the least, it must be confessed that Hahnemann has gone too far in his proposition. There can be, however, no doubt that before Hahnemann, many practitioners have given medicines in unnecessarily large doses, and, in many cases, if they did not observe the desired effect, they continued increasing the doses, not ascribing the failure to their injudicious choice, but to the smallness of the quantity, and so went on, not only failing to cure the evil, but often increasing it, and adding new ones; and though Hahnemann fell from one extreme into the other, we must allow him the merit of being the first to draw attention to the abuse, and of having done all in his power to diminish it. That anything is effected in homosopathic practice with very small doses, may arise from the fact that very powerful remedies, and chiefly in the form of tincture, are used by the disciples, and also that the system of the patient has become very sensible to medicine, in consequence of the exceedingly strict diet enforced.

Of this latter we must say a few words. Much mischief, without doubt, has herein been done by omission. Many medical men have hardly the courage to insist upon a strict diet. Many think it of no importance. The idea of dieting is almost as old as medicine itself, but to abstain from certain spices and certain dishes belongs to Hahnemann, and is new, inasmuch as it regards only the quality and not the quantity. What Hahnemann says with respect to the preservation of health, is hardly worthy of notice, and has as yet only been used to advance some quackery or other. I speak of his hygeine, which recommends the adoption of a certain diet in order to prevent disense.

some has been tested by long experience; but if we consider what ridiculous reasons became the grounds for the adoption of different remedies—other only the taste, the chiefly drawn from authorities better intended, the colonr, or even the form of the we cannot soo highly prize the labours of the many the attempted to accordant the sanct open attempted to accordant the reaching the colonry of the many the attempted to accordant the reaching the colonry of the many the attempted to accordant to the many the attempted to accordant to the many the attempted to the colonry of the colonry

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CHARLES ! 8, Dover-street, Piccadill March 1, 1836.

DOUBLE VISION.

To the Editor of THE LANCET.

Six: On reading the account of the case of double vision in your Number of the 27th ult., I have thought it might interest some of your readers, to detail what occurred to

myself of a smollar nature.

In August 1831, during intensely hot weather, I was travelling alone in the Malle Poste from Bordeaux to Paris (a journey which is not performed in less than sixty hours, including the long stoppages on the road), when, on the second day, I was rather surprised at perceiving the distant rows of trees in double lines, one above the other, which at first I thought was attributable to the badness of the glass of the windows, which were closed, but upon opening them I found to my surprise, that the cause existed in my own vision, and upon trying the effect of opening and closing each eye, I found clearly that both eyes were similarly affected, but the left much more so than the right. It, however, only seemed to attach to distant objects, for persons or cattle near the carriage I saw perfectly distinct as usual. This state continued until I reached Paris, when, thinking it might be occasioned by want of sleep (not being able to repose in a vehicle), I concluded that a day or two's rest would carry it off; but after that period, finding myself unable to look at any thing steadily, and that the left eye had in its white part a yellowish spot as big as a pea, whilst my bowels were much confined, and my head at the crown fest uneasy, and with a kind of strained feeling, I sent for a medical gentleman, whose name I forget, but who immediately wished me to be cupped. To this, having an unconquerable aversion to lose blood, I objected, but permitted him to physic me ad libitum, which he did, and by so doing, unloaded the bowels, and a little relieved the sight; but on my arrival in London a few days afterwards, I found all the symptoms return, and my sight so much affected, that I could not recognise a friend at a few yards distance. Fearing, however, that this evidenced a tendency to apoplexy, I now consented to be cupped, which gave me but temporary relief, and it was not until two months had elapsed, that the affection wore off, which it did gradually, and I have never had a return of it, to our product. My eyes are a bluish grey in colour, and cate to you the follow my sight has always been remarkably good. They in a very curiou

of accretoned of Fran exercise, herr always a stone been accustomed to much exercise, both squestrian and pedar trian, and nothing deranges me more than confinement in a carriage for any length of time. My living is always temperate. I am, Str. your obedient servant.

A CONSTANT BUT NON-MEDICAL READER. Stoke Newington, March 3, 1836.

SYPHILIS.

To the Editor of THE LANCET.

Sin: My attention having been directed to some observations on syphilis, by Mr. Eagle, in THE LANCET, No. 651, I take the liberty of proposing the following questions to him, and to those who advocate the same opinions.

Mr. Eagle assumes, " that many effects imputed to venereal poison are produced by mercury." How is it, then, that of the tens of thousands who are daily taking mercury for other diseases, numbers are not similarly affected?

If the venereal poison be not absorbed, how can the system be contaminated?

What evidence has Mr. Eagle to prove that chancre will produce gonorrhora, and gonorrhiea chancre? I am aware that the common answer is, that "Two individuals may have connection with the same woman. and the one have chancre and the other clap." But gonorrheeal and chancrons matter may be left in the vagina from previous intercourse. Indeed, I have known a healthy female communicate the disease, which could only have arisen from this cause

With regard to mercurial rheumatism, I am not yet a convert to the doctrine of Hahnemann, viz., that a disease is produced and cured by the same medicine. Lastly, I have met with nothing to shake my faith in the mercurial treatment of syphilis, and, I may add, that the opinions of Messrs. Guthric and Rose are in opposition to those of the majority of British practitioners. I am, Sir, yours respectfully INVESTIGATOR.

March 7, 1836.

PROPOSAL OF LIGATURES TO MANDE

To the East terest which you completely takes away, I think those Fare the honour which

him by all surgical leading baving been the first the Table and the same to bleeding vessels. The work is entitled Gabelhover's Boocks of Physicke," and was first translated into English in the year 1559, being twenty years before Ambrose Pare's account was published. The following is the extract, taken from page 30% being the commencement of the fourth part:
"In then ther he arms rappe discided or

heyved a sunder, you must then knowe that both the ender of the vayne which is discided doe dravve themselues vpvvardes in the flesh, whereof you must indevour. with little instrumites fit for such a purpose, to take houlde of that ende of the vayne which is shrunk up into the greater parte of the bodye, drawe it forth, and with a crooked needle, to sticke it, and soe to binde it," &c.

I trust you will not think this communication of too little importance for insertion in your valuable periodical, as the explosion of any error, even in the history of our profession, cannot be void of interest. I remain, Sir, your obedient servant.

JOHN MOORY NELIGAN. 5. South College-street, Edinburgh; March 5, 1836.

CHEMICAL AND PHYSIOLOGICAL RESEARCHES

UPON THE

BLOOD OF THE VENA PORT.E.

PROFESSOR SCHULTZ has communicated, in Rust's Magazin für die Gesammte Heilkunde, the results of some interesting chemical researches upon the blood of the vena portæ. In the first part of his memoir he publishes the results of his experiments upon the portal blood of horses, of which the following is a succinct account. He states that

1. The blood of the vena portse is in general more dark than venal blood, though this difference is not always very distingnishable. It is not reddened by solutions of neutral salts, nor by the contact of atmospherical air, nor by the action of oxygen

The period blood does not congulate, or do see at sing time, it forms cakes, of which the does not congulate the does not congulate.

is sver which we find a vo-

startily speaking, portal blood contains 5.23 per cent in a fresh state, and 0.74 per cent in a dry state, more of fibrin than other veral blood, or arterial blood.

4. Liquid portal blood in general contains less solid particles than other venal blood or arterial blood, i.e. 0.18 to 0.3 per cent. 5. The serum of portal blood generally contains 1.58 less of solid particles, than that of arterial blood, and 0.80 less than that of other venal blood. The first, in a dry state, has an ash-gray colour, the se-cond is yellow, and the third a yellow-

6. Portal blood contains proportionally more crassamentum and less albumen. The contrary obtains in arterial blood. The dry crassamentum of the vena porte is gray and brown in colour. That of other veins is deep-red, and that of the arteries is bright-

7. Portal blood contains nearly double the quantity of oily matter that is contained in arterial blood, or blood of other veins, viz.,

> In portal blood 1,66. In arterial blood 0.92. In blood of other veins 0.83.

8. Dried serum of the vena portæ contains only 0.27 per cent more of oily matter than the dried serum of the arteries and other veins.

9. We find in albuminous crassamentum more albumen by 1.11 per cent than in arterial blood, and 1.21 per cent more than that of the other veins.

10. It is with respect to the quantity of filmin that the greatest difference is found. Dried fibrin of the vens ports: 10.70 per cent of oily matter; that of the arteries 2.34 per cent, and thus upon the whole the difference is 8.36 per cent.

11. The oily matter of portal blood is brown, black, and unctuous; that of the arterial and of other venal blood is white, or yellow-white, and crystalline; that of chyle is white, two-thirds liquid, and one-

third crystalline.

On perusing the paper which contains these statements, the absolute necessity for the adoption of some standard with respect to the fibrin is rendered very obvious. are aware that after fibrin is dried in the usual manner, the process may be continued until it has become one half less in weight, although the external character shall not be changed. Were the fibrin pressed and dried with a towel, its comparative weight in dif-Wish the portal tained, and all we should have to do would blace the live first either be to establish a standard as to the quantity wholl; have the worky-four of the fibrin when collected from the blood, which is a stollar manner to the in the usual manner, and the press and portal blood, which does not congulate a weight of lead employed should also be determined When we wish to standard for normal blood with whi ought to compare diseased blood, we ought to work quantitively, by giving, in separate items, the water, the crassamentum, the fibrin, the albumen, and the salts. Such are the rapid changes which diseased blood; perticularly, undergoes, that we are compelled to use this plan, for if we enter into such minutie as LECANU gives us in normal blood, not one chemist in a hundred would ever attempt such a task, nor would the rapidly decomposing blood of a diversity of diseases permit even LECANU himself to investigate any simple disease in such a uselessly minute manner. When we are about to ascertsin the gases contained in blood, or any other organic fluid, we should take ten ounces at least, in the manner recommended by Dr. CLANNY in this journal, and submit them to the action of the air-pump. His method of analysis of blood in our pages is also worthy of attention.

EXAMINATION OF FIESCHI'S HEAD.

On the 21st of February, Dr. Lelur, physician to the Bielfre, proceeded to examine the head of Frescht, who had been executed on the Place St. Jacques, at eight o'clock on the morning of the 18th. There were assembled a considerable number of the notables in phrenology, advocates and adversaries of the system, and a few literary men and painters, but not a single surgeon.

The cranium presented exteriorly the marks of two wounds, one of which was situated over the postero-superior angle of the left parietal bone, and occupied a contilerable surface; the other, much smaller, was seated a little above the extremity of the left eyebrow. Near the angle of the mouth, on the left side, was an oblique ciatrix, nearly half an inch in length, so completely formed, that it might have passed for the mark of an old wound. The external wound of the integuments, above the ear, was not yet closed.

The soft parts were now carefully removed by a crucial incision, and the bone exposed. At the point corresponding with the wound in the left parietal bone, was observed an oval projection of the osseous wall, as large as a crown piece; this prominent portion of the bone was perfectly circumscribed, and bore some resemblance to a watch-glass fixed in its circle. Its surface was throughout uniformly convex, except at a small

On outting through the its internal surface. a concave space oper tame form and dimensions corresponded with the external projection, and it now became evident that the latter was nothing else than a portion of the skull which had suddenly and in totality been removed, as it were, by the action of a punch, and being at once replaced by the surgeon, had subsequently united to the rest of the cranium. A very thin false membrane lined the internal surface of the fractured bone, and separated it from the dura mater; however, the membranes of the brain near the wound were perfectly healthy, and presented trace neither of external lesion, nor of inflammation. It was evident the brain, had not been injured, a circumstance which explains how the assassin was able to descend from his chamberwindow by a cord into a neighbouring court; yet the shock must have been dreadful. The wound on the forehead seemed only to have entered the external wall of the frontal sinuses. Firscui, during his trial, spoke of seventeen or twenty fragments of bone which had been removed from his head; this was an exaggeration, if not false, for nowhere could any loss of substance be perceived.

The nature of the wound, and particularly its mode of union, offer several particularities of the highest surgical interest. No doubt M. LELUT will shortly publish a detailed account of the autopsy; in the mean time we have taken the above remarks from the last number of the Gazette Medicale, which, as usual, endeavours to show that FIESCHI's head is a complete refutation of phrenology. According to the Gazette, Fiescur's head is completely insignificant in a phrenological point of view. Its absolute volume is very ordinary, while the relative proportions offer nothing worthy of fixing the attention; the forehead is ignoble, the lateral diameters are very short. There is only one single organ evidently developed-viz. philoprogenitiveness ? that of habitativity also is active. The organs of ranity and pride do not present any proi jection of note, although those two pass were certainly the key stone of his whole moral machine. The tr alithere occasions, art

RESEARCHES INTO THE DISEASES OF CHILDREN.

CONDUCTED ON THE

1 KNOWN PRINCIPLES OF ANATOMY AND

CHOREA.

CHOREA, or "St. Vitue's dance," as it is popularly called, is a disease which very seldom terminates in a fatal manner, and it is only occasionally-at very distant intervals -that children abouring under this affection are cut off by some supervening malady. We have had occasion to observe only two necropsies of children who have died while affected with chorea, and the results of an examination were completely negative. The symptoms of chorea are well known to all practitioners who have had the slightest experience in the diseases of children; we shall not therefore recur to them here, or to its treatment. The remedies which have been at different times employed in chorea, are very different. Since the time of Drs. HAMILTON and PARR, purgatives have, we helieve, been the favourite remedies with English practitioners, who, amongst the multifarious accidents which they attribute to disorders of the digestive organs, foul bowels, constipation, &c., rank also chorea sancti viti. It is the opinion of Unnumwood that it should be so ranked, and of his last "cditor," who seems inclined M. BAUDELOCQUE, who has since continued to superadd want of tone in the system. We do not mean to assert that certain cases of chorea may not depend on irritation of the sulphurst of potass to a common bath, the intestinal canal, for such we suppose to in which the patient is placed for an hour. be the translation of "foul bowels" into Fifteen to twenty baths are in most cases medical language: but we are strongly inclined to regard the opinion as erroneous, the month of September 1832 to the month which would attribute chores in a general of January 1833, fourteen girls were treated manner to derangement of the digestive exclusively with the sulphur-baths, one every system. On the contrary, we are disposed day excepting on Thursdays and Sundays. to confider it as essentially a disease of the Of these fourteen, thirteen were perfectly nervous casting, occasionally depending on cured, and the mean duration of the panot yet such advanced to be able to method can furnish such favourable results. In the treattrue, the prosting of the pros

li-conclusion that choren de-Supen "worms, foulness of the wels," &c., and that we must torment our patient with a course of mercurial or alostic purging. If a large number of cases of chores be cured by the purgative method, it is because chores, like certain other neryous affections, yields, generally speaking, to any strong impression made upon the system, and not because the disease depends immediately on disorder of the digestive function, removed by aloes or calomel. We are induced to make this assertion, which will probably appear heterodox to many disciples of the purgative school, by the fact that we have seen a vast number of cases of chorea (of all descriptions, and taken indiscriminately) treated by the simple means of cold effusion, and with the most happy results. For the last few years baths have been the favourite remedy at the Hopital des Enfans Malades. They are administered under various forms; cold-baths at the ordinary temperature, immersion-baths at 150, and sulphureous baths. MM. JADE-LOT and GUERSENT, who have the care of the scrofulous patients during the winter months, and do not take charge of the acute wards before the arrival of summer, are in the habit, the former, of employing cold baths, the latter, immersion-baths. Whenever any apprehension is entertained of the existence of bronchitis, either in the acuta or chronic form, M. Gurasun replaces the immersion-baths by sulphureous baths, a remedy proposed about four years ago by constantly to employ them. The sulphurbath is composed by adding about 4 oz. of rufficient to remove the disease. Thus, from pritation, but in a vast majority of cases tients' sojourn in the hospital was only saced by causes whose influence we are twenty-four days. We doubt if any other simployed, it is Should the disease resist the administration

JOHNSON STREET

of ten or twelve baths, M. BAUBELOGEORA accustomed to add the subcarbonate in fron interiorly. During the course of the malady he prescribes a substantial diet and a double ration of wine. The ordinary drink of the patient is an infusion of linden leaf and orange flowers MM. GUERSENT and JA-DELOT sometimes administer the oxide of following she took two other baths, with the zinc, valerian and meglin pills (composed of Qs. Zinci et Valer.) The acetate of admission, an evident improvement had morphine has latterly been tried in four taken place. She can answer a few ques-cases, but without any advantageous re- tions, and put out the tongue, with considersults. Purgatives are given in all cases where constipation exists, or whenever less irregular, but still the patient is unable the presence of intestinal worms is suspected; and if there be any symptoms of sulphur-bath is administered every day; the plethora, some blood is abstracted from the drink, infus. lindæ et flor. orang. On the system. The following cases, to which we lat of February the child is able to get out might add several others, will serve to illus-

Bathe : Rapid Cure.

A young girl, ten years of age, recently ar- improved; the movements of the tongue rived from Auvergne, of tender constitution, become natural; a sulphur-bath is adminismild character, and excessively timid, was tered six times a week. The diet is non-suddenly frightened on the evening of the rishing, and on the lath of February the 10th of January, by a boy who had concaled himself in a hall for the purpose of tetrifying her. The girl let fall the utensil she carried in her hand, and at the same thousant was seized with irregular moveof the Body: Four Relapses: Sulphur-Bath ments, and a complete paralysis of the left; arm. From the 12th to the 15th, the movements became more irregular and intense; Sophia Mollet, thirteen years of age, of the left leg became feeble, and the patient delicate constitution, small stature, not has dragged it after her in walking, like a paraing yet menstruated, was received into the lytic person. Her gait is vacillating; she is hospital about the curl of September, labour forced to catch hold of the farniture to pre- ing under chorea for the fourth time. Th vent herself from falling. During the first first attack came on at the age of four year two or three days the parents, who had no and continued for a month; the second a suspicion of the existence of disease, were the age of seven; duration unknown; the constantly reproaching the patient for her third attack at the age of ten, continued for awkwardness; a circumstance that con-three weeks, and was cured by cold bath siderably aggravated the accidents. On the The invasion on these three occasions too 17th of January the irregular movements place without any known cause; the disea had affected the four limbs, the muscles of the face, the tongue, and the faryux; progression was constantly developed in a slow and property of the face, the tongue, and the faryux; progression manner. The fourth attack, and not articulate distinct sounds. She was brought to the Hopital des Enjans Malules imenced about six weeks back; it con brought to the Hopital des Enjans Malules imenced on the right side of the body, as on the 19th; her state now seemed very did not extend to the left side before a lay atarming. The child was a prey to the of three weeks; about the thirty-fifth d adarming. The child was a prey to the of three weeks; about the interpretarion. It is with difficulty that she could be confined in two beds placed one beside the other, and placed in an angle of the ward. She is unable to speak, or keep the head for an instant in its natural position; it falls to the right or left side, as parent's account, the state of the muscles of the neck were paralyzed. if the muscles of the neck were paralyzed, of constant grimace; progression is irres. She is unable to sit up in bed, or maintain lar, and the patient fell down street in

seessively embarrassed, and the the pulse. In the morning, immediately after her arrival; the patient was placed in # sulphur-bath, and kept there for an bour and a haif. On coming out she was a little calm; in the evening a second bath; the day sulphuret of potass.

On the 23rd, four days after the patient's able efforts; she took a few spoonfuls of to seize a single object with the hands. A of bed alone, and walk about. On the 5th no trace of the disease remains, except some CASE 1.—Intense Chorea, with Imperfect
Paralysis of the Limbs; Muliam; Sulphur.

Buth. Dail Comments of the Limbs in the limbs of the Case of the Limbs in the li regular; pulse constantly calm. From the 3rd to the 15th, the general force is much

> Cure after Nine Weeks' Illness and Thre Weeks Treatment.

that position when placed in it. The re- they to the hospital. The fingers are

sonstant movement; the m sumswhat reduced : any plack of derangement. On the day after admission, the patient submitted to a course of tepid sulphur-baths, each bath for half an hour; she was placed on half diet. Up to the 1st of October there was an appearance of amendment; the baths were now prolonged for an hour, full diet was allowed, and the quantity of wine doubled. Under the influence of this treatment, the nervous symptoms completely disappeared, and the girl left the hospital on the 15th of October completely cured.

We omitted to mention that the father of this child had been affected with violent chorea near the age of puberty; her mother was never subject to any nervous disorder, and presents all the appearance of perfect health.

PLEURO PNEUMONIA ON THE BIGHT SIDE. COMPLICATED WITH PERICARDITIS.

Isidore Loiseau, six years of age, of good constitution, had been convalescent of some cutaneous eruption with which he was affeeted, for several months, when he commenced to cough; to complain of pains on the loins; to exhibit symptoms of fever and dyspinea; these symptoms persisted, and augmented during eight days, when the pa-tient was transported to the hospital with the following symptoms :- Face slightly vellow, expressing much anxiety; dilatation of the nostrils at each inspiration; cough dry and frequent; no expectoration; respiration deep, costal, seventy-two in the minute; percussion gives a dull sound along the whole of the right side posteriorly and laterally; souffle tubaire, and bronchophony in the two superior thirds; on the left side the sound is clear, and on anscultating we hear nothing but some uncous and subcrepitating role; the skin is warm; the pulse small and feeble, 140; tongue broad and moist; abdomen painful to pressure; two to three liquid stools every twenty-four hours; during the tright insomnia, disturbed cries, partial delirium. In the morning we find the intelligence clear, the senses of hearing and seeing intact; when asked where he suffers, the little patient says every where; when we ask him to point out where he suffers most, he places his hand on the back; the physician diagnosticates pleuro-pneumonia, in the second degreet Infusion of Mallows two puts; Gum-

During the day the anxiety continued as before : some dyspness : some alteration of the countengant, the patient seems very sensible to manufact on the blisters.

January 6. Takenage is pair; the lips are blue; decubites since the commencement of the disease; dorsal respiration more accele-

we count up to 80 insurations in a minute. The pulse is too feefile and quick to be counted. The feeble state in which the little patient lies does not permit us to examine his chest; death supervened during the night.

Autopsy. — On examining the body, we find the three lobes of the right lung united together by false membranes, which are soft and easily torn. The surface of the inferior lobe is entirely covered by an alliaminous exudation of a slightly yellow colour, in some points at least two lines thick, and uniting it to the pleura lining the diaphragm. The cavity of the pleura does not contain any liquid. The pulmonary timue of the three lobes is completely impermeable to the air, is dense, and sinks rapidly in water; when pressed between the fingers it does not discharge any fluid. On the left side we do not observe anything more than a slight congestion of both lungs posteriorly; the anterior part is healthy, it presents a little interlobular emphysema. The bronchi are gorged with puriform mucosities, and the lining membrane is of a rosy colour; the bronchial glands are healthy; we do not observe in them any tubercular deposit.

On dividing the pericardium we find the heart enveloped with a pseudo-membranous exudation, reticulated, and of a yellowishwhite colour; this is prolonged as far as the origin of the great vessels. The internal lining of the pericardium is covered with a similar exudation, though not reticulated, as in the heart. The tissue of the heart is soft and discoloured. In the interior we find some dark imperfectly congulated clust; the large vessels are free from disease Neither the brain nor the organs contained in the abdominal cavity present anything worthy of notice.

This child was brought to the hospital in an advanced stage of the disease, and the symptoms which he presented did not leave any doubt of the existence of pulmonary disease. Auscultation and percussion of the thorax clearly indicated its seat, its nature. and its degree, and even determined its precise extent. The inflammation of the pulmonary parenchyma having appeared to account satisfactorily for the dyspaces and other accidents, our examination was not carried further than was necessary to determine the lesion of the lung. The precordial draught, with White Oxide of Antimony, and region was not submitted to percussion or auscultation, and hence the existence of infiammation of the pericardium was completely overlooked, and not suspected before the examination of the body after death. We are not to conclude from this that pericarditis is a latent malady in children, for in several cases, where the disease existed free from complication, it has presented # same characteristic signs as in the adult, was recognised during life.

LARYNGITIS, BRONCHITIS, LOBULAR. PNEUMGNIA

Joseph Danian, seven years of age, of good constitution, had suffered under a very irregular rubeola for five days, when he was brought to the hospital on the 16th of October, 1835. Being examined at the visit of the following day, he presented the follow-ing symptoms:—Face purple-coloured; respiration extremely embarrassed, 54 in the minute; decubitus, variable sometimes on the right side, sometimes on the left; cough moist, but no expectoration; voice nearly gone; rale crepitant on both sides of the chest; sonority normal; no bronchial respiration, or local pain; tongue covered with a whitish fur; lips dry and cracked; great thirst; belly free from pain; no stool; the intelligence is not disturbed; the child ansome trace of the eruption on the limbs; the pulse is small and accelerated, 130. The diagnosis given is, "laryngitis, bronchitis, with congestion of both lungs." Ipecacuanha each leg; Infusion of Mallows for drink.

18. During the day of the 17th the child vomited twice, and passed five stools con-taining two lumbrici. The evacuations gave to speak. rise to but little benefit. Asphyxia is now imminent; the colour of the face is extremely blue; the pulse 150, respiration 56. The in children below six years of age. We cough and alteration of the voice the same are not aware that it has been described by as before; no expectoration. The stetho- any of our English writers on the diseases of scope furnishes the signs already noticed. When we place the ear on the little patient's chest we distinguish a very well-marked râle crepitant. Gum Infusion, with Tartar An-symptoms have been determined by careful tim. gr. vi, and Syrup Papaver. 3i. No observation at the Hopital des Enfans Malavomiting produced; during the day two or | des. We shall recur to this affection again, three involuntary stools. Died in the night.

Autopsy .- On opening the body twentyeight hours after death, we observe a violet tint of the integuments covering the posterior surface of the body, and of all the upper part of the thighs. No cadaveric rigidity; the arachnoid is moist and in a normal state; the subarachnoid cellular tissue is infiltrated with a small quantity of serum; the glands of Pacchioni are very numerous, and the veins on the surface of the brain gorged with blood, the cortical substance of the hemispheres is much injected, and when the white substance is divided it presents numerous bleeding points. The consistence of the cerebral pulp is normal. The whole of the mucous membrane lining the air-tubes is red and thickened, from the epiglottis to the minute bronchial ramifications; the latter are filled with a viscid and bloody mucosity. We do not observe any trace of its frequently deprived of a parish, or pawhole of the mucous membrane lining the

le membrane in the pieura congpitant; their tissue rosy : their there by some purplish spots, which are much disseminated posteriorly, while in front they are more close. On pressing the pulconary substance between the fingers, in feel some small nodules, varying in volume from the size of a pea to that of a nut. On dividing the substance of the lung itself, we find the greater part of its sissue healthy, and that the nodules alluded to are so many points of hepatized tissue: they exist in both lungs; there is no very remarkable congestion; no tubercles; the heart and its membranes are in a normal state; abdominal organs healthy.

The pneumonia in this case, instead of attacking one or more lobes of the lung, as in the preceding observation, was disseminated, and constituted what in France is called "lobular pneumonia." The affection presents certain negative characters, which swers clearly when addressed; there is still the physician should always bear in mind. Thus, although the pulse and the respiration were excessively rapid (150 and 56), the chest gave a perfectly clear sound on pergr. xii; Antim. Tartar. gr. 1. One blister to cussion, and we did not observe anything approaching to the souffle bronchique. The presence or absence of broncophony could

Lobular pneumonia is a frequent disease children, and it is only within the last few years that its anatomical characters and symptoms have been determined by careful and when we shall have published a certain number of cases, we propose to give a general description of lobular pneumonia.

P. H. GREEN.

ATTENDANCE ON THE SICK POOR.

To the Editor of THE LANCET.

SIR: I have paid much attention to the various plans suggested for giving efficiepattendance upon the poor, under the new Poor-law system, but find none of these plans sufficiently simple, or mastended by some great objection.

3. 2. Fr. 1.

rithes, which he has been in attending; and the to his residence, have, in some degree, remunerated him for his trouble; and he is obliged, if he take a district at all, to attend parishes at such a distance from his abode, as renders his contract altogether unprofitable, and very injurious to the poor thems solves, who have so far to send both for advice and medicine. Local dispensaries I consider altogether useless.

From my experience of the simple working of the self-supporting institution in this town, I am satisfied that the nearer any plau can be brought to the one adopted in that institution, the better it will pay the practitioner, and the more satisfaction it

will give to the poor.

Let the Unions be composed of parishes, as conveniently situated as possible for the medical practitioners. Let the number of paupers in every Union, who have, on an average of years, required medical attendance at the parish expense, be ascertained; and, according to their number, let a sum be fixed which may be considered a fair remuneration for the yearly medical attendance upon all the paupers of such Union.

Instead of giving a certain number of parishes to any particular surgeon, let every pauper, when taken ill, apply to the overseer, or the retieving officer, whose duty will merely consist in giving a certificate to such applicant, "that he is a pauper of such a parish." The pauper will then be at liberty to take, or send, this certificate to any surgeon whom he may prefer (who may have agreed to attend the poor of his Union), and he will, generally, to spare binself trouble, apply to the nearest resident.

Let every surgeon preserve these certificates, and at the end of the year or half-year; let him be paid his proportion of the sum fixed for the whole Union, according to the number of certificates so held, without any reference to the nature of the cases he may have had under his care. This plan, taking trifling cases and severe ones togother, will be found a very fair one, and the overseer, or relieving officer, will no longer be called upon to judge whether any applicant may be a fit subject or not for the doctor.

The sum fixed upon for the Union must, in some degree, he regulated by the distance from the medical practitioners, as well as the denseness of the population. In a town of considerable size, the poor can be taken much lower rate than in country districts, where the surgeon may have to travel many miles to see his patients. I remain, Sir, your years the surgeon the surgeon statement of the surgeon statement of the surgeon statement of the surgeon may have to travel many miles to see his patients. I remain, Sir, your years and surgeon for the surgeon su

many miles to see his patients. I remain, Sir, your very stiglest servent,

Sir, your very stiglest servent,

Fristers in the Roard of Management of Lyan, Norfolk, March 8, 1836.

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PARTIES OF THE NECESSITY FOR REGULATING

MEDICAL ATTENDANCE ON THE SICK POOR,

ON JUST PRINCIPLES.

To the Editor of THE LANCET.

Sin: I have perused with considerable interest the letters of your intelligent correspondents, "Ruricola" and Mr. Yeatman, on parochial medical contracts, and beg to offer a few observations on the mode of appointing medical officers.

It is proposed by "Runicola" that medical men be appointed by the rate-payers; and by Mr. Yeatman, that they be

clected in rotation.

With regard to the first proposition, I think it would be adopted with advantage in large towns, where the rate-payers are more independent than in villages, but in the latter places it would only favour monopoly. In villages there is generally one individual who takes upon himself the office of parish ruler, and the rate-payers (many of whom are tradesmen, and derive their support from him and two or three other farmers) are obliged to vote (if they vote at all) for the nominee of this great man. Favouritism and jobbing must, necessarily, be the effect of such a state of things. Under the new system, viz., the election of surgeon by the guardians, mo-nopoly exercises its baneful influence; and I think I can furnish a strong case, proving how necessary is the adoption of Mr. Yeatman's proposition, viz., that medical men should be appointed in rotation. I am living in Broughton, a large village containing nearly 1000 inhabitants (situate only three miles from the far-famed borough of Stockbridge), and it has been for many years the residence of two surgeons. It was customary with my predecessors, and the gentleman who is now living here, to attend the poor of the parish alternately, which arrangement afforded satisfaction to all parties. On my commencing practice, I of course applied to be appointed in my turn to the office of parochial surgeon, but I was told that the arrangement above mentioned would not be acceded to, -that the gentleman who was in attendance would so continne. For this unjust proceeding I could gain no satisfactory reason or explanation, but I at length was informed that the influential man had placed his son with, or was about to apprentice him to, the favoured medical man. Now, Sir, I was no stranger to the poor; I had served my apprenticeship in the village, and, as is the case with most pupils, it fell to my lot to mix with them, and, in administering to their necessities, I studied their feelings; and I am proud to

y, Chudleigh, De

say, that though they were cooded in gaining their good will

support of the assertion, that the benefit of as Mr. Jervis and the late recorder take a

Guardians.

gentleman, at the earliest moment practi- parish officers previously to giving our atcable, rose and proposed that his favourite tendance. To ensure the future method of carried. Here was a deeply-concerted cases of pappers. In the cases of respectmedical contract would be entered into at morie, I connot suggest, the first meeting; consequently, there was by Mr. Yeatman, as the only one likely to spectfully, destroy favouritism, jobbing, and monopoly, the existence of which must always prove injurious to the pauper patient.

There are some other points connected with the administration of the new law, which I shall take the liberty to state to you at some future opportunity. In the mean time you will, perhaps, find a corner in your independent journal for the above. 1 your independent Justice, am, Sir, yours respectfully,
L. Owen Fox.

Broughton, Stockbridge, Hants, March 8, 1836.

LAW RELATING TO ATTENDANCE ON CORONERS' INQUESTS.

The following letter has been addressed to us by a medical gentleman of Chudhigh:-

1,34

1836. teem. The medical man in this case, was appointed to afford practice for the young aspirant to medical honours.

Here, then, is an instance of favouritism you, I could not refrain from transcribing and monopoly, in addition to the many that are admitted by the contraction of the property of the proper nors, than, is an instance of favouritym you, I could not retrain from transcribing and monopoly, in addition to the many the organizationited by my decembed partner hundred proofs which you have advanced in and nigadf to the Associated Apothecaries, the poor is often made subservient to pri-different view of the law. (See Answer 3rd.) vate interests. And now for the Board of So do you respecting the compulsion so attend a Coroner's summons. (See Answer The Poor-law Amendment Act came late 1st.) After the receipt of this opinion we operation here last year; guardians were communicated it to our musical brethren chosen, and, among the rest was chosen the and the neighbouring Coroners; and we great man, - the "ruling passion" being suggested to the Coroners that they should strong. The election terminated on Satur- require the parish officers to provide a medical day evening; the Board of Guardians met man for the inquest, which has been acted on, on the following morning at ten o'clock, and by which we have had our fees,—of Mr. "Ruler" was nominated Vice, and that course, making our agreement with the medical man the it remembered, his son's remuneration, I would suggest that it be paid master) should be appointed to the district. by the relieving officer of the Voor-law No opposition being offered the motion was Union, by order from the Coroner, i. e., in scheme; no one but those who were inte- able people there should be some power rested had the most remote bled that the given to the Coroner, -- what, or by what

There is another point to be considered, no time to arrange or to propose a plan to the certificate given by the Cotoner for "ensure a tolerably minute division of me- herial. I consider that, in future, if the dical labour." Hence, seven parishes are Bill for the relief of the Discenters should under the care of one medical man, whilst pass, the certificate for harial should be ad-1, who live in the centre of them, am ex- dressed to the Registrar of Births, Deaths, cluded from deriving any advantage from and Marriages, who could send it to the offiattending the poor, either in the way of ex- ciating minister of the sect to which the perience and improvement, or in a pecu-discussed belonged, or to the elergyman of niary point of view. I have entered into the parish. If there should be any inquiries there details, in order to show the injustice required by you to be made relating to this which arises out of the present system, and bill in these parts, I should be happy to lead the necessity of adopting the plan suggested my assistance. I remain, Sir, yours re-

J. G. CROKIR.

To Thos. Wakley, Esq., M.P.

General Committee held at the Crown-and-Aacher Inn, June 5, 1820, Jas. Parkinson, Esq in the Chair.

Resolved, - That the opinion of the Common Sergean: Knowlys be obtained on the general question of the law, with respect to the remuneration of medical men when called upon professionally to investigate judicial cases before a Coroner.

Besided,-That Edmond Bacot, Fsq. be requested to draw up a case, grounded upon the foregoing resolution, and lay it before the Common Sergeant, and that the Secretary he desired to wait upon him, with Messrs Croker and Langley's letter for the

"Case.—On the 18th of January, 1820, Messes, Cropper and the of Bovey Teacey, Challetgh, Devos was summoned by the Caroner of the county to examine edy of a pauper, and to give evidence

the party. 1820, they west Coroner to attend for a similar purpose.

"On both these occasions the Coroner gave them a certificate of their attendance. with an order to the churchwardens and overseers of the parish to which the pauper belonged, to pay the fee which has been usual on such occasions, of one guinea for each juquest, but the parish officers have refused payment of the fee. The Coroner says, that it is always usual and customary for the parish to pay these fees in case of paupers, but he has no authority to enforce the payment. Under these circumstances your opinion is requested, -

"First. Whether a medical man (not being apothecary or surgeon to the parish to which a deceased pauper belongs) is compelled to attend the Coroner on his summons; and to examine the body of any dereased person, either a pauper or otherwise, and to give evidence as to the cause of the

Jeath of such person?

" Serond. 🔏 a medical man is compelled to attend on the Coroner's summons, is he entitled to charge for his trouble and loss of time, and who is liable to pay such charge?

" Third. Has the Coroner power to give un order to the churchwardens and overseers to pay a fee to a medical man for attending an inquest upon the body of a pauper of this parish, in consequence of the coroner's summons, and for examining the body of such paoper; and if so, by what means can such order be enforced?

" Fourth. Is there any and what difference in the rights of a medical man who is surgeon to the parish to which the panper

belongs:

"Fifth. What measures would you advise! the parties to pursue, under the circum-stances above stand?"

ANSWED

"1st. I am of opinion that every man, medical or not medical, is compellable to obey the Coroner's summons in his legitimate inquiry respecting the death of a sub-

"2nd. By the common law of the land nobody had the power to demand any remuneration for his trouble or expense in attending to give evidence in any criminal case. The 25th Geo. 2 partly gave the court power to order the expenses of the prosecution; that power was enlarged by 27 Geo. 2, and finally extended still further by 8th Geo. 3. In this case a medical man no power to make a charge for his

trouble and loss of time, nor is anybody liable to no consider the new legal authority to make a legal authority and legal authority authority and legal authority and legal authority and legal authority authority and legal authority and legal authority authority and legal authority authority and legal authority a and overseers of the parish to remunerate the medical gentleman who attends

dence according to the Coroner's Coroner, I believe, to make out an order, and for the parish officers to act upon it, but it is certainly not binding upon them, though it would be disgraceful and indecent to withhold from the medical attendant a fair and reasonable fcc upon so important an occasion.

"4th. I consider this query answered by what I have said on the second query.

"5th. There are no legal compulsory means of obtaining payment. The only way I could suggest, to obtain payment, would be by stating the case to a vestry meeting, and putting con-honour and humanity.
"Newnan Knowlys. and putting the matter to their sense of

"Lincoln's Inn-fields,

June 10, 1820."

* Our opinion periocity coincides with that of the late Mr. Knowlys. What we stated in reply to Mr. JERVIS in the House of Commons, was this, - That the coroner had the power to compel the attendance of a medical witness, but that he had no power to make the witness institute a post-mortem examination, or to enforce payment against the churchwardens or overseers, or any other persons, for the performance of that duty when it was executed.

MEDICAL WITNESSES BILL.

A PETITION, of which the following is a copy, was presented to the House by Lord Henniker, a few days ago. In attaching signatures to the petition, the feeling as to the justice of the claim appeared to be equally strong with all the gentlemen who signed it. Indeed, Mr. Denham, to whose praiseworthy industry it is due, informs us that it seemed only to be required that some one person should act first in the matter, to induce them unanimously to lend their aid.

To the Honourable THE COMMONS of the United Kingdom of Great Britain and Ireland, in Parliament assembled.

The Petition of the undersigned practitioners of medicine and surgery, resident in the stated towns and villages in the county of Suffolk, humbly showeth,

That your petitioners are fully convinced that in a great majority of cases of sudden and violent death, it is utterly impossible for a coroner's jury to arrive at a right conclusion as to the cause of that death, without the testimony of a medical witness, founded on a post-morten examination of the body.

PROCEEDINGS AGAINMY

surgeon not unfrequently attends a surgeon not unfrequently attends a surgeon not That considerable danger to the such post-morten examination, which re-quires great skill and anatomical and pathological knowledge, not to be acquired without considerable study and expense, and often not without risk of life, to remor it efficient for the purposes of evidence.

That your petitioners are liable to imprisonment if they neglect to oney the minmons of the Coroner to give evidence at the inquest; and that, in many instances, several hours are occupied by the Coroner in prosecuting the inquiry, during which the surgeon is often obliged to wait, at very great inconvenience to himselt.

That the Coroner possesses no authority to order remuneration to be given to medical witnesses for the heavy sacrifices which

they are thus obliged to make.

Your petitioners, therefore, humbly solicit your honourable House to take this their petition into your earnest consideration; and to award them such fair remuneration for their services as shall seem to your

honourable House to be sufficient and just. And your petitioners, as in duty bound,

will ever pray, &c .:-

Wm Hempson Denham, Wickham Market. William Muriel, Wickham Market. Samuel Gissing, Woodbridge. Nathaniel Moore, Woodbridge. George D. Lynn, M.D., Woodbridge. William Mumford, Ipswich. A. Wood Baird, M.D., Ipswich. Alexander Henry Bartlet, Ipswich. Alexander Bartlet, Ipswich. John King, Ipswich. Edward Beck, M.D., Cantab., Ipswich. J. O. Francis, Inswich. C. C. Hammond, Ipswich. John Pitcher, Ipswich, Robert Atthill, Ipswich.
Alfred Prentice, M.D., Ipswich. George Green Sampson, Ipswich. John Barker, Ipswich. W. B Sanderson, Ipswich. George K. Cowell, Ipswich. Samuel Armstrong, Melton. Robert Freeman, Saxmundham. R. C. King, Saxmundham. Henry L. Freeman, Saxmundham.

FREE HOSPITAL

GREVILLE-STREET, HATTON-GARDEN.

THE ninth annual meeting of Governors was held at the Gray's Inn Cuffee House, on the 23rd of February, and again, by adjournment, on the 1st of March. About 300 attended the first meeting, and 200 at the second. At the preceding quarterly general meeting, notices of motions were given for the removal of Mr. Heatsch the resident the removal of Mr. Hentsch the resident Mar Tonn Strvans moved a similar response and Mr. A. Tweedic one of the state are respecting Mr. Tweedic, and it was

use those gentlemen had in testimonials in care of gosorrhees, which had been freely advertised with their names, that of the former being dated from the "Free Hosstal." The proposers of the proposition for the removal of Mr. Hentsch and Mr. Tweedie, urged in their notices of motion that "one of the principal objects in instituting the hospital, was to lessen, and if possible to annihilate, the mischievous consequences resulting from diseased persons being deluded by advertising quacks," and that the advertising of the testimonials had materially injured the reputation of the institution. Against Mr. Tweedic they also complained that he had also " without consulting with his medical brethren, administered to the hospital patients under his care, the nostrum.

After the yearly report had been read,

Mr. MARSDEN spoke to the following effect :- He regretted seriously the occasion of so large an attendance of the subscribers, but one of the chief objects of the charity had been violated, and he felt it his duty to call attention to the fact, declaring that he was actuated by no private or personal motive in the step. Since the publication of the "testimonials," several subscribers had seceded from the charity, believing that the officers were encouraging quickery, and a representation of the fact was made to Mr. Hentsch and Mr. Tweedie, and a sort of promise obtained from them that the cause of complaint should be removed, but without realization. Therefore he . Mr. M. felt compelled either to retire from the institution altogether, or take the opinion of the governors as to the propriety of removing the testimonialists, and thus sever the name of the hospital from the objectionable advertisements. If he Mr. M. had erred in this course, the meeting would fearles ly say so, and censure his conduct. Mr. M. then proposed a resolution for the removal of Mr. Hentsch, which was seconded by Mr. WATSON.

Mr. HENTSCH rose, and read his reply. When he gave the testimonial, he did not know that it would be published. The medicine was not a nostrum, but a new form of an old and well-known drag. He had requested the withdrawal of his testimonial, but the advertiser of the medicine refused to withhold it. He Mr. H. believed that personal motives alone induced this proceeding against him. He had faithfully discharged his duty, and now deing ed justice at the hands of the meeting.

Mr. Manney said that it is were not a nontrue, and Mr. If any would make known the composition of the M.) would at once withfluw the restraint.

seconded by Mr. MERK. GALL

gentlemen spoke mulgation of quack me that Mr. Tweedie had sided the purpose of a quack on the present occasion, especially as the professional talents and character of Mr. Tweedie were of a high quality, on which account he (Mr. G.) exerted his influence to procure for him the office he held in this institution. However painful, thereforce the circumstances were to him (Mr. G. , he did not hesitate to second the resolution.

Mr. Tweene, with much eloquence, defended his position as surgeon, on grounds similar to those urged by Mr. Hentsch, and read a copy of a letter which he had addressed to the Council of the College of Surgeons, in answer to which, the sceretary of the College had replied, that the Council " could not believe that the governors of any public institution would remove any medical officer for having tried a new method of administering an old and wellknown medicine."

A Governou observed, that it was not for thet, but for having used and recommended a secret postrum, that these proceedings were instituted against Mr. Twee-

Mr. Tweepin concluded by stating that he would not be alarmed into the act of resigning, either by observing the number of governors present, or by a knowledge of their opinions. The merit, or the demerit of his dismissal, must rest on their own shoulders.

Mr. Branshy Coopen, a newly-made governor, said, that he had himself used the medicine, and after applications from the proprietor on five successive days, he had given him his opinion in writing, rather than be troubled again on the subject, but had be known that the certificate would have been published, he would have lost his right hand somer than give it. It was, however, not a nostrum, but a preparation, which, if he were to explain, would not be thren. understood by any one present. (Cries of " explain," " explain."; He doclined explaining. Was he, or his friend Mr. Green, or Mr. Tweedie, to be publicly called to account by Mr. Marsden? Who was Mr. Marsden? He had never heard even his name until recently, and he believed that wif there was any quackery at all in the business, it emanated from the party who had brought the matter forward. He (Mr. C.) had the honour of holding one of the first i appointments in one of the first institutions

in this kingdom, and he (mapping his fingers) fared neither for this charity, nor for the opinion of its governors, and sooner than subsect the such treatment, by Here the seasons were so opposed to the impetuosity and the expressions of the from Tuesdays to the second and fourth Mia speaker, that he was obliged to see the

descriptions are followed his final

Mr. H. WAITHMAN defended the conduct of Messry. Hentsch and Tweedie, and moved an amendment upon the motion against Mr. Hentsch.

Aiderman HARMER said, that as the " testimonials" continued to be published, it would be impossible for the writers to be allowed to retain their offices in the institution, without upholding connivance at a disgraceful system of quackery in physic. culogized the professional character of Mr. Tweedie, and should be ready to help that gentleman to any other appointment. He was satisfied that no personal pique occasioned the introduction of these motions.

Dr. Uwins (a physician to the institution) defended the testimonialists, and stated that he had that very morning recommended the secret medicine to one of his near relatives. He would resign if Mr. Tweedie were re-

moved.

Dr. RYAN (also one of the physiciaus) and Mr. Lucas both defended the conduct of Mr. Tweedie, and concluded by stating, that they would resign if the resolution against Mr. Tweedie was carried.

Mr. GREVILLE JONES, another of the medical officers, paid very carnest compliments to the integrity and talents of Mr. Tweedie; but he declared against the quack testinonial system, whether the medicine were good or had; for the public were not competent judges of diseases and their modifications. There was extreme imprudence in Mr. Tweedie's allowing the possibility of his name being connected with such a system, and the improdence on the part of the surgeons of St. Thomas's and Gny's Hospitals was still less excusable. Whichever way the question terminated, the discussion would teach many eminent men not to let their good-nature or personal attachments betray them into supporting a system of plunder, frequently tatal to mucco life, and always injurious to their professional bre-

After several other speeches pro and con, the meeting divided. On the motion against Mr. Hentsch, the show of hands was .- For the motion, 200 and odd. Against it 61.

On the motion (on the second day of meeting) against Mr. Tweedie, the show of hands was declared to be 5 to 1 for the motion.

The usual business of the annual meeting was then gone through, and the meeting dissolved.

In consequence of the days of meeting of the Medica-Batanical Society coinciding with those of the Medica-Chirurgical, it has been determined by the Committee to alter the evenings of the Botanical Society's meetings Wednesdays of the month.

MEDICO-CHIRURGICAL SOCIETY

ATROPHY OF THE VALVES OF THE MEART.

THE following is an abstract of a paper. read at the above Society, on the 23rd of Feb. and the 8th of March, entitled, " Remarks on Two Forms of Atrophy of the Heart's Valves, which interfere with their Function; founded on Cases, by Dr. P. N. KINGSTON, Physician to the St. George's and St. James's Dispensary ."-

The first of these lesions, which, says the author, has hitherto been altogether overlooked by pathologists, has been observed by Dr. Kingston in numerous cases, in eight of which it had proceeded to a considerable extent. It was defined, " A simple shortening of the heart's mitral or tricuspid valve, without any diminution of its natural thinness, pliancy, and transparency, the orifice to which it belongs having at least the ordinary caliber."

The second of these lesions (to which the acrtic and the pulmonary, as well as the auriculo-ventricular valves are liable) is nearly allied to the preceding in its nature and effects: - " When so altered, the continuity of the valves is interrupted by apertures, sometimes of a large size, and sometimes so numerous as to reduce the structure to a mere network, while the remainder of the valve is in a state of attenuation, which is here and there often extreme, especially towards the edges of the apertures." In five of the cases, a considerable portion of the valve had been thus affected. The only preceding writer who has at all noticed this appearance, is Laennec, who has merely glanced at it. These lesions are not very rare, but they are very liable to be passed unnoticed, unless the attention has once been directed to them.

A valve which has become shortened or cribriform, is, of course, incompetent to close completely the orifice to which it belongs, and hence permits that regurgitation which it was placed to prevent. From this disablement of the valve arises a strong tendency to dilatation or hypertrophy of those parts of the heart which are posterior to the valve affected, to pulpitation, to venous congestions, to anasarca, and to effusion into the rerous cavities, and, where the mitral valve is defective, to dyspnœa and cough, also to pulmonary congestion and inflammation, and to some of those symptoms which are apt to arise from a deficient and irregular supply of arterial blood to the head, and the remote parts of the body. A morbid "bruit" may, in some cases at least, be perceived with the stethoscope. the tricuspid valve is affected, there is distention, and sometimes pulsation, of the external jugular veins. Where the mitral

cted, the pulse is small and parison with the heart's imequal.

By a reference to these symptoms, and to the circumstances out of which the complaint arose, it may generally be ascertained whether or not there is valvular disease. The discrimination of these from the other valvular diseases is a point of great nicety, on which the author stated that he was not

as yet fully prepared to speak.

These defects may now and then be congenital, but in all the present instances they bad evidently been produced, long subscquently to birth, by those species of absorption which are unattended with suppuration, a conclusion which coincides Meckel's opinion respecting similar defects of the valves of the veins. From the histories of the cases, and from numerous analogies, Dr. Kingston infers that their most frequent causes were either, 1st, debility of the valve's nutritive powers, combined with undue force of the blood's impulse (from hypertrophy of the ventricle, over-exertion, &c.); or, 2ndly, so great a degree of local debility (often consequent on gouty or rheumatic action), as to render the valve liable to be absorbed under the pressure to which it is naturally subjected.

The author concluded by pointing out the errors which may have arisen from an oversight of these lesions at post-mortem examinations,-the practical advantage of detecting them during life (even so far as to perceive that there is some valvular defect obstructing the circulation),-the means by which the frequency and extent of the lesions may be diminished, - and the circumstances under which it may be hoped, either that the valvular structure may be restored to its original dimensions, or that the corresponding crifice and cavities may gradually diminish in caliber, so as to become adapted to the altered size of the valve.

THE LANCET.

London, Saturday, March 12, 1836.

ACTIVE exertion under oppression and the infliction of injury, becomes the duty of intelligent men. We expected that the medical practitioners of this empire, when they found that there was a change of obtaining from the Legislature is produced against the annoyances to which they trave been subjected at Coroners' inquests, would come

The second of the second

forward and energetically suppos however humble Commons. The events of the last fortnight the alds of justice if they cannot be dis-

There are a few stupid and narrow-minded writers, we perecive, who invist that the Mentovi, Witnesses Brut refers merely to a medical question, and they discuss with characteristic sagacity, what they are pleased to denominate "its merits." In rendering this important service to the public, it is satisfactory to observe that their efforts in the way of reasoning are admirably proportioned to their ignorance of the subject in his character as an ordinary member of under investigation. Why do not the con- society, or as a casual observer of the cirjurors ask themselves this question-" Of cumstances which produced death, and he " what use is the Coroner's inquest, on really "important occasions, in the absence of "competent medical witnesses?" If they had sense enough to answer this simple fact? In not one case out of a hundred is question, the offusions of their brains might he summoned as a private individual,—as a that as the Coroner's court is now conducted, learned and most useful profession; and in the chief that his jurymen are as his professional character, therefore, is he and charistens. In cases of desta from coroner and his jury. This distinction is so

malegravie, from mineral poison, from Pills," from dexterously-adshould advocate their cause in the House of ministered vegetable poison, where are have proved that we did not make a wrong covered in the experience of the patholoestimate on this subject. The petitions from gist, and the researches of the chemist? medical practitioners continue to be pre- Better, at once, as we have frequently sented to the House daily, all praying that stated, abolish the Coroner's court altogemedical witnesses at coroners' inquests, ther, than continue to withhold from medimay receive some compensation for such cal men a just reward for the services which services as those which they have hither- they execute in that court, and to allow nonto almost invariably been required to medical functionaries to preside over its bestow gratuitously, in aid of the main- proceedings. At many of the inquests tenance of the cause of public justice in which have lately been held, the powers of After the Medical Wir- this institution, when they are properly ex-NESSES BILL has left the Commons, we will creised, must have forcibly attracted public furnish our readers with the names of the attention, and have illustrated what has so places whence petitions may reach or have often been stated in the pages of this Jourreached Parliament, when a statement will just, with reference to the shield which, be exhibited which will prove to the mem under many trying circumstances, it prehers of the profession resident in this metro- sents to the community. The Bill, therepolis, how ably and faithfully the surgeons fore, which is now before Parliament, is only of England and Wales can discharge their one step towards improvement in this imdaties to the interests of that profession portant branch of our judicature, but it which has the good fortune to claim them as must, necessarily, lead to many others of a satisfactory character.

It is alleged, we find, by Mr. CRIPPS, and other gentlemen who consider that medical witnesses ought not to be paid for their attendance at coroners' inquisitions, that the proposed Bill introduces a distinction, with reference to one class of persons, which may with propriety be claimed by the members of all other trades and professions. What folly! Take the medical practitioner is content to stand in the court upon an equality with every other individual who is similarly circumstanced. But what is the rminate. It ought never to be forgotten, casual spectator, -but as a member of a became the hole of quacks called upon to act for the edification of the

evident, so striking, so convinci equivocal, as an indication of the peculis duties which the professional witness has to execute, that all that remains on the subject, which admits of a patient notice or consideration, is comprised in an answer to the question,-What is an adequate remuneration for the labours which a medical witness is required to discharge? Although we cannot hope that an answer, which shall be fully satisfactory to this question, will be acted upon in the House of Commons, yet, from the manner in which the medical petitions are received in that House, and from the liberal spirit with which the motives for introducing the MEDICAL WITNESSES BILL WAS regarded on both sides of the House, it is hoped and expected that an award will be made somewhat approaching to the importance and the justice of the demand. In reality, the question which the Commons are now to determine is, whether the Coroner's Court shall henceforth be a useless institution, and a profitless drain on the county rates. or whether the public shall find that it is a source of protection against the merciles: impositions of quacks and other criminals.

Never have quacks, quackish doctrines, and quack medicines, exercised a greater influence over the minds and bodies of the people of this country, than they exert at the present epoch. Are such evils to be patiently endured by the scientific members of a noble profession? Common sense, common honesty, and philosophic attainments, alike forbid so scandalous and disgraceful an imputation. The source of the existing evil is to be found in the odious, the exclusive conduct of our rotten and contenptible medical corporations. The College of Physicians, with an ample store of vain conceit and malignity, has done itbest to be mischievous; but the members of that corporation having always been limited, its quackish exclusiveness has been

re for i for the amount of positive injury which it has inflicted upon the community. But the results of the conduct of the College of Surgeous, although that conduct has been somewhat similar, have outstripped all comparison with those of the establishment in Pall-Mall East A precious game have these two institutions been playing during the last six-andthirty years, and it is scarcely surprising to observe that the murderous quacks are sought after by the community, to the exclusion and rejection, in case of need, of licensed practitioners in medicine. The College of Physicians commenced their career by passing a law of exclusion against surgeons. Practitioners of surgery were not deemed worthy of admission into their body. The College of Surgeons, admiring this prudent and general system of excinsion, went a step farther, and a Council, consisting of the self-elected pures of our hospitals, resolved that no surgeon in general practice, that is, that no general practitioner, should be admitted to a seat in the Council. Thus the public were told by the two English Colleges, which had been appointed by royal charter to protect the interests of the profession, and, above all, the health of the community, that surgeons who were engaged in executing the duties of medical practice in all the departments of the profession, were not deemed by the heads of their own colleges qualified to be received on equal terms with themselves, into those national establishments. The Colleges, in short, were industriously employed in disgracing the great majority of the profession, and the results are now before us. Quackery is rampant, and the poison of quack medicines is spreading desolation around, with a virulence and a fatality not exceeded, probably, by that of the plague or the cholera. We are not to draw our inferences of its offects from our three, or even from they inquestry horas even from a thousand, though as many were to be held

949

in a single year. We are to to the fatal consect

inevitably happen from plates a reliance on The powers of a supposed curative agent in ALL diseases. We ask, -In the sands of instances where the results are fatal, will the relatives and friends - the secret abettors of quackery-at once, by acknowledging their delusion and folly, make a confession of their guilt? Nothing can be more absurd than to entertain such a belief. The unfounded, the monstrous reliance which is placed by an uninformed public on the powers of quack medicines, must, from the natural course of things, be followed by the most frightful catastrophes, and it is equally true that the confessions of error will be of small amount. It is not easy to obtain an acknowledgment of the imperfect operations of the judgment, because pride is ever interposing to shield the mind from self-exposure. Every experienced quack is well versed in these weaknesses of our nature, and shapes his course and frames his stratagems accordingly. The ignorance of the community is the soil which they cultivate, and the press is the machine which is set in motion for securing to them a full harvest for their labours.

the operations of these infamous maranders? The indications are simple and striking. The might of the press must be turned against its mercenary abusers, and the ignorance of the people on medical subjects, must be made to give place to rational views of the science, before a hope can be entertained that the existing pestilence will experience shock or check in its reckless career. Without the aid of the press, quacks would be as powerless as other impostors, and even with the use of that engine, were it not for the undiscriminating ignorance of public, it could not be rendered available to their neferious purposes.

fee, that the Government Fearing, t will take diate steps for exterminating quack medicines, and sending their interesting girl," says the reporter of The

ors and proprietors to the helks, we upon the members of the medical profession in England to take the matter seriously, and at once, into THEIR OWN HANDS. They should instantly institute,-by a general subscription, and a combination among themselves, -an

ANTI-MEDICAL QUACKERY SOCIETY.

having its Central Board, with an efficient paid secretary, constantly sitting in the metropolis, composed of the legally-qualified members of the profession, without distinction. Its connections would necessarily be ramified throughout the entire kingdom, and the whole powers and energies of the society, thus organized, should be concentrated on two objects, one present, the other remote. The first, that of apprizing the public in every town and village of the empire, through the medium of anti-quackery tracts, to be supplied from the Central Board, of the murderous results of taking quack medicines; and, remotely, to obtain, by a well-organized process of petitions, the total suppression of the sale of stamped, patent, and secret medicines, through an act of intervention of the Legislature.

The expense of carrying this scheme into What, then, is to be done to counteract execution would require only a very small contribution from each legally-qualified medical practitioner, and the advantages to be obtained by its operation would, we are convinced, be almost concomitant with the first hour of its institution. At any rate, it is a subject which we believe will be found, on reflection, to merit the deliberate attention of the profession.

> Having thus put forth the suggestion, we shall in the next LANCET, take a more extensive view of the question, and endeavour to illustrate what would be the advantages of the acts of a Society such as we have now proposed.

Ar the Spring Assizes held at Winchester on Friday, March 4th, Jane Melchear, " an

Times, " was indicted for the stilled with of her nest-born female child, at South ton, on the 19th of September last .- Mr. Saunders conducted the case on the part of the prosecution ; Mr. Missing the the prisoner." Several witnesses were amunised for the prosecution, and, after a trial of and as much as possible from external seven hours, the jury returned a verifict of moisture, they should be laid in thin layers "Not gullty of the nourder," but "gullty of on willow baskets, stripped of the bark, the concealment." and she was sentenced to They must be placed in a room from which three months imprisonment. At the close of the report, the writer of the statement adds the following observations :-

"One thing is worthy of remark. The surgeon who was first called in, and who examined the person of the prisoner, and the child, afterwards presided as coroner at the inquest sitting on the body of the child, when the jury returned a verdict of 'wilful murder, and he eventually gave evidence ing the leaves. against her on the trial, having previously acted as judge in the case. Without, in the slightest degree, casting any imputation on this gentleman, we cannot but consider this as a state of things which ought not to exist, and it is a very strong argument against the appointment of medical coroners.

The "argument" which the writer,-a barrister, most probably, -suggests in this case, as showing the impropriety of appointing medical men to fill the office of coroner, is exactly such an one as we should expect to hear, not from an intelligent reasoner, but from a parchment-headed scribbler. to institute such a protection, if it be a wise the 1st instant, of your intention to introbe necessary? And when it was deemed necessary, for the ends of public justice, that an inquest should be held, then he was obin his power to appoint a deputy. No imcast upon the coroner, for acting as he did at the inquest, and at the trial in question. That the law is loose, and most imperfect with regard to the office of coroner, generally, we willingly confess; but, before it is mended, it must find other correctors than I am, Sir, in there, yourse the sapient critic of The Times.

At the list meet-Society, Dr. Siggible method of drying and preparing the leaves of commun maculatum for medicinal use. The leaves being in a high state of preserall light is excluded, and then submitted for three or four hours to a heat of a little below 212° of temperature. Having been then turned, they should be exposed to the same heat for about eight hours. They are then crumbled by the hand, with great fa-cility, into a fine powder. Dr. Sigmond showed a good specimen of the powder prepared in this way. Dr. S. considered that the autumnal season was the best for gather-

BATH PETTION.

IMPURE CASTON OIL - Dr. Sigmond also cautioned the profession against a fraud which had been extensively practised by a company who had invented a process, by which rancid and ineffective castor oil could be made apparently sweet and good. It is, however, perfectly useless, and possesses no purgative power. Great quantities have been disposed of, and he thought well that the system should be exposed.

MEDICAL WITNESSES' PETITIONS.

To the Editor of THE LANCET.

Sin: The members of the medical pro-Did it not occur to him that medical coro- fession must be much gratified at the manners might not be engaged in medical practurer in which the announcement was retice, and that it is in the power of the law ceived by the House, on Tuesday evening, one? But, as a lawyer, he ought to have duce a Bill for granting remuneration to known that the medical coroner in the case medical witnesses, for their attendance at in question had no alternative. Having at- duced at the monthly meeting of the meditended the prisoner in the course of his cal society of this city, on Friday evening practice, how could be conjecture, before last, and a committee was appointed for the the result was known, that an inquest would purpose of drawing up petitions to both Houses of Parliament, which they have done, and they will probably be signed by all the medical men in the city and neighbourhood. Enclosed is a copy for publicaliged to act as coroner, because it was not tion in your widely circulated journal, should you consider that its appearance would exputation whatever, therefore, can be justly cite others to follow our example. The favourable reception of the motion for leave to bring in the Bill, does not justify us, in my opinion, in relying upon the first success of the Bill, but it becomes the daty of ever member of the profession instantly to enbody his sentiments in petition, and forward it to the only state for redress.

3, Wew King-st., Bath, March 9, 1836.

In another p rt of this We have in our we have insered copy and that we irnst will serve the same purpose as would the insertion of the petition forwarded by Mr. King, and many others with the same inportant prayer, which we have within the ast few days received from medical gentleneu in different parts of the kingdom.

LATE ADDRESS TO APOTHECARIES, HALL

To the Editor of THE LANCET.

Sin: I was truly astonished to learn how chicken-hearted the students of the London University had become when they sent their address to the Hall. I thought they posressed more courage and more knowledge than to fear the Rhubarbians. How are the vaunted fallen! How have the students of my alma mater degenerated! In days gone by, no document would have been signed and forwarded to the Blackfriars establishment with any evidences of fear or want of favour. The students would have had more confidence in their abilities and acquirements, than to how and pray for mercy before Ridont and Co.

1 perceive in the list some names of 1832men. M**rh**d, W*k***ld, and others, I blush for you. Among others I see J. D*r-"ne". Are you afraid, too? "Tell it not in Gath." I am, Sir, yours.

AN OLD STUDENT IN THE PROVINCES.

March 7, 1836.

METROPOLITAN INFIRMARY FOR CHILDREN.

Broud street, Golden square.

MEASLES FOLLOWING CROUP.

George Coores, aged 5, a remarkably fine and robust boy, was entered as a patient under Dr. Tweeddalk, on Monday the 29th of February last. The little patient was labouring under the frequent, dry, hoarse cough which is peculiar to croup. His skin was hot and dry; the face flushed; the eyes suffused; the tongue white and farred; pulse 130, full; bowels costive; he complains of headache and lassitude. His mother states that on putting him to hed on Saturday evening she noticed that he had a ard dry cough; he was very feverish all day on Sanday, and in the evening she procured some patients for him, which made wards divided. Two other large flans were lain very that feeches were applied immediate. The threat made, each forming nearly a semicircle; the immediate. The threat made threat prains one directed upwards towards the side of calous, the two powdered scammony, the neck, the other downwards. All the of calouss, the five of powdered scammony, the neck, the other downwards. All the were given every two hours small the massles of the dorsum of the scapula were

hi were well purged, and a tablespoond of a mixture containing liquor antim. tart., and oxymel of squills, of each five drachms, and four ounces of saline mixture.

were endered every two hours.

Figure 7. The leeches have bled freely;
the lower have been well opened; he has vomited, several times, a quantity of thick mucus, with small portions of fibrine. Two grains of calomel and three of James's powder, were ordered to be given every four hours. The mixture to be continued. To be put into a warm-bath up to the hips.

March 1. Still feverish; pulse 110, and small; cough much relieved. The surface is covered with the eruption of measles. Three grains of calomel and six of scammony powder, ordered to be taken directly. The other medicine to be confinmed.

2nd. Fever much shated; bowels do not keep open without medicine; pulse 100, small; cough still troublesome, though there is not so much expectoration; the eruption is developed more fully; he is able to sit up in bed; a blister was applied to the chest, and a purgative was given night and morning. The powders and mixture dis-continued. He continued to improve, and is now convalescent.

This is the second case, in the infirmary, of croup followed by measles, terminating favourably under the same plan of treatment. The first patient was a healthy boy, eight years of age, who was bled from the arm, and had leeches to the throat.

ST. BARTHOLOMEW'S HOSPITAL.

TUMOUR ON THE SCAPULA .- James Jackson was brought into the hospital with a large tumour, occupying the left scapular region, of about the size of two-thirds of a large melon. A tumour of about half that size had been removed, five months previous, from underneath the scapula, by Mr. EARLE, but the disease returned, and increased to the above magnitude, continuing rapidly to enlarge up to the day of the operation. From the condition of the old cicatrix it was by some authorities deemed malignant. The operation was performed by Mr. Skev. The man, after some loss of time occupied in determining his position, was finally placed in the re-cumbent posture on the operating-table, lying nearly on his face. The operation was commenced by an incision, forming a part of a small flap, reflected towards the shoulder, which exposed the spine of the scapula, over the line at which it was afterthen divided, for the purpose of charles the bone in perpendicular line, should be the third distant from the glenoid cavity, towards the base. The spine was divided by a common about thing-saw, the upper portion of the bone by Hey's saw, and the lower fossa was split up with Liston's forceps. The hemorrhage was then considerable, but was arrested by the assistants, each of whom seized one or more vessels. Moreover, the subclavian artery was compressed above the clavicle; an inclaion, nearly fifteen inches in length, was then made along the basis of the bone, but between the spine and the old cicetrix, the whole of which was removed. The tumour was rapidly dissected from the ribs, and removed, and the bleeding arteries were tied. A small portion of the disease was found adhering to the neck of the bone, close to the shoulder-joint, which was dissected off with a silver knife.

On the conclusion of a consultation which was then held on the case, the patient was recommended to undergo the removal of the whole upper extremity. To this he would not consent, and Mr. S. removed the remaining part of the muscle, close to its insertion into the hunerus. The wound was united by sutures, and the patient retired, much exhausted from the loss of blood, having been on the table nearly threequarters of an hour, of which period the removal of the tumour occupied but twelve minutes.

Secondary hemorrhage occurred within a few hours, and on securing the vessels the wound was dressed with lint. Thirty-five drops of laudanum were given to him. He remained quiet throughout the night, and on the following day he took repeatedly small quantities of beef-tea. The operation was performed on the 22nd of February. Up to the present time he has had no had symptom : the wound is covered with healthy granulations. The tumour was composed of the same structure as that for which the former operation was performed, viz. albuminous sarcoma. More than half the scapula was entirely absorbed. The tumour was moveable on the ribs, which were perfectly bealthy.

NORTH-LONDON HOSPITAL

SCIERHUS OF THE BREAST. - OPERA-TION .- Mary Welch, aged 47, a milkwoman, was admitted on the 16th of February under the care of Mr. Coopen, on account of indurated enlargement of the right breast, of six months' duration, consequent upon a severe blow received about that period. The swelling became gradually larger, and is now about the size of a man's fist; the nipple is depressed; the tumour is hard, craggy, very firm, and very moveable. The axillary glands do not appear to be affected. She

not discoloused menstrusion is regular, but more acenty than it has previously been-She has horse nine children. Mr. Cooper. recommended the removal of the tuniour: to this the consented, and on the 18th he proceeded to operate. He first made two elliptical incisions, and dissected from below upwards, first on one side and then on the other. Two arteries were cut in the first incision upon the inner side. The fingers of an assistant instantly suppressed the hemorrhage until the whole mass was removed. About five vessels were tied, the largest in the substance of the pectoralis The two integuniental major. vessels. which bled very smartly at first, had now contracted within the subcutaneous adinose tissue, and appeared much smaller than at There was another vessel tied, at the upper angle of the wound. A small portion of scirrhous tissue having been left behind, it was removed. The sides of the incision were brought together with several broad strips of adhesive plaster, the ligatures hanging out in the interspaces; a compress of wet lint was applied over the plaster, and then a broad piece of cloth was pinned around the chest. Her arm was placed in a sling, and she was sent to bed. Mr. Coo-PER prefers the broad piece of linen to a bandage, as, in case of secondary hemorrhage, it is easily tightened without requiring to be first removed. This plan he has known to succeed in several cases where secondary hemorrhage has occurred. Indeed, according to his experience, secondary hemor-rhage is more frequent after this operation than almost any other. In the evening the patient took half a grain of the muriate of morphia, and was then pretty easy.

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19. Is doing very well. Passed a quiet night, but did not sleep much. The anodyne to be repeated to-night.

20. Has slept during a considerable part of the night; pulse quiet, skin natural.

23. The wound was dressed to day. has united at several points, though in others the edges have retracted considerably. Her general health is unaffected.

Mr. RANDAL, of Oxford, surgeon, is coroner for the borough of Aldeburgh .- W. D.

(Advertisement?) " Dr. Hall has resigned his office as Lecturer on the Practice of Medicine at the Aldersgate school. Dr. Hope is to succeed him."

A Subscriber. We lamont to say that the A MEMORYMON WE SAMEON TO SAY that the claim cannot be referred under any institute in which may not transplant over the first part of the part of the

THE LANCET.

Vot. I.]

LONDON, SATURDAY, MARCH 19, 1836.

T1835-36.

LECTURES

42

DISEASES OF THE BRAIN AND NERVOUS SYSTEM.

NOW IN THE COURSE OF DELIVERY IN THE UNIVER-SITY OF PARIS.

By M. ANDRAL.

Physician in Chief to the Hopital de la Pitie, and Professor, and Lecturer on the Principles and Practice of Medicine, in the Faculté de Medecine of Paris.

LECTURE XVI.

RAMOLLISSEMENT OF THE NERVOUS CENTRES.

(Continued from p. 927.)

GENTLEMEN, -Let us now pass to ramollissement affecting other parts of the brain than the cerebral hemispheres. The first which naturally present themselves for examination are.

The Corpus Callosum, the Septum Lucidum, and the Fornix. We have already described the anatomical

characters of the lesion when situated in those parts, and have now merely to occupy ourselves with the functional derangements to which it may give rise. We shall only softened, we generally find the ramollissemore issement is, then, nothing more than a fornix. constituent element of the disease so generally known with the sease of "acute hydrocaphalus of "disease of cannot now enter into any american of "disease form of ramollisectment; it is foreign to the ques- related in the letters of M. LALLEMAND OR tion which now occupies us, and however diseases of the brain and nerves. Now what

interesting in itself, it would lead us too far from the principal subject of our study. We must, therefore, confine ourselves, for the present, to cases in which Ramollissement exists as a Single Lesion, unaccompanied by any effusion of fluid into the ventricular cavities, which cases are excessively rare, and will not, I fear, permit the deduction of any general principles. The ramollissement now spoken of is remarkable in this respect, that it is rarely accompanied with a red coloration of the nervous pulp; on the contrary, the softened cerebral substance is white, of a dull pale colour, and we seldom or never find any trace of injection in the vessels. ABERCROMBIE gives one case of this kind; but we may establish it as a general rule, that red softening of the medullary central parts of the brain is a lesion excessively rare. It may attack all the three parts mentioned a while ago, or only one of them. Ramollissement of the corpus callosum is the most rare of the three. Softening of the septum lucidum alone is also a lesion very sektom observed in the dead body. In the considerations we have to lay before you on this part of our subject, we find ourselves compelled, contrary to custom, to depend alone on the history of particular facts, for the records of the science do not furnish a sufficient number of examples of ramollissement affecting the white central parts, to enable us to draw a general picture of this lesion. Were we to launch out into general reflections, and attempt to describe the form under an enadd on the present occasion, that, when semble of symptoms, we should only run the chance of deceiving and leading you astray. ment accompanied by another lesion, viz. for we again repeat, the records of medicine effusion of a serous fluid into the cavities of do not afford a sufficient number of facts for the lateral ventricles; this certainly occurs the deduction of general principles. We in a great majority of cases. Whenever ra- shall speak, in the first instance, of ramolmollissement occupies the white central lissement when confined to any one part parts of the brain, it is very rare not to find alone; we shall then consider it when at the same time a greater or less quantity affecting at one and the same time the cor-af serous effusion in the ventricles. The rapus callosum, the septum lucidum, and the

First, for ramollissement confined to the thin layer of medullary substance called sepcannot now turn lucidum. You will find one example of the kind in M. Rostan's work; a second is

No. 655.

150 8

were the symptoms observed in these two cases? Both patients were affected with headache; one exhibited as a lesion of motility, a paralysis of one side of the body, which gradually became general, and implicated the four limbs together. In M. Rostan's case, we find no mention made of paralysis; the patient was merely agitated by convulsive movements. This, you see, is analogous to what we saw before when treating of ramollissement of the hemispheres. The lesion of motility at one time manifests itself in paralysis, at another in disordered movements. In both of these two cases death arrived in the same manner; the patients fell into a state of coma, from which condition it was impossible to recover them.

Let us now turn to isolated ramollissement of the fernix, or rather of the nervous mass placed above it, the corpus callosum. We do not possess a single case of the latter, nor of the fornix alone; we must, therefore, consider them, when softened, one or other, in conjunction with the septum lucidum. What are the symptoms of ramollissement when these parts are simultaneously softened? One of the principal is headache, which is often very acute and distressing. In one case described by ABERCROMBIE. page 129, the pain in the head is mentioned as being excessively intense, and extending across the forehead from temple to temple. In another case the pain was confined en-tirely to the frontal region. This severe cephalalgia is sometimes the only symptom that exists for a considerable period. After a certain time, the faculty of speech becomes affected; articulation is indistinct and embarrassed, delirium now supervenes, the patient falls into a state of coma, and the disease quickly terminates in death. In one case we find dyplopia mentioned as an accompanying symptom. In the work of M. LALLEMAND, there is no question of lesions of motility; he does not seem to have observed either paralysis or convulsions-at least he does not speak of them in the case he has described.* However, in children, we sometimes observe isolated ramollissement of the fornix giving rise to functional derangement of the moving power; you will find some examples of this kind in the thesis of M. FOURNET sus-

tedness, but the stee published are few, and, a standard and, said, we cannot, without danger of cirror, draw any general consequences from so limited a number of facts.

The examples of ramollissement affecting the three parts together are more numerous, though still rare; you will find two it the work of M. LALLEMAND, already alluder to, which were communicated to him by M. MARTIN-SOLON. M. SENN has also de scribed the same lesion in his Treatise or the Acute Meningitis of Children. In many of these cases we find headache given as one of the first symptoms, but in one only does the author speak of vomiting, a symp tom which so often accompanies in its origin acute inflammation of the cerebral membranes. With respect to the faculty of motion, we may notice a tetanic contraction o the muscles as a frequent symptom; this phenomenon is described as attacking vari ous parts of the body, throwing back the head, and giving to the whole trunk a cadaveric species of stiffness. All these cases terminate in coma, more or less wellmarked, which perseveres to the instant o death. These are the usual phenomena ob served connected with lesions of motility We must not forget to mention one more symptom of this affection, which has been described by M. SENN alone, as A Pheno menon of Sensibility peculiarly characterizing Rangilissement of the Central White Parts This is an exalted sensibility in the in ternments of the trunk. "The patient." says this author (" Researches sur la Menin gite Aigue des Enfans," p. 88 , " cannot sup port the slightest pressure without com plaint, and frequently the pain produced by simple contact is so great, that if we con fine our examination to the abdomen, we might be led to conclude the existence of acute inflammation in the peritoneum of abdominal viscera." It would seem, how ever, that M. SENN has exaggerated the value of this symptom; it certainly docexist in many cases of ramolli-sement, and even of simple meningitis, but it is not suffi cient alone to characterize the former le sion, for it is frequently absent.

We now come to a set of cases in which there exists a wonderful resemblance he tween this ramollissement of the three een tral parts, and effusion of serum into the wentricular cavities, or, Acate Hydrweigha.

M. You will find a good example of this it the work of M. Charpenter, of Valenciennes, on the Natural Treatment of Acut Water in the Brain, p. 43. The subjectifies case was a child cleven years of age who had been ill with cough and pain it the throat for four or the subject who had been ill with cough and pain it the throat for four or the subject who had been ill with cough and pain it the throat for four or the subject who had been ill with cough and pain it the throat for four or the subject which was a subject with the subject of the disease and, on examining the body after death, the powerior part of the formix and corpus cal-

^{*} Either we have taken down the name incorrectly, or M. Andrah has here fallen into an error. In M. Lallemand's Researches on the Brain and its Dependencies, 1, p. 184, we find the case of a woman, forty years of age, who died after a short illness; she was attacked with fever, delirium, and convolving movements; sommolence and contraction of the limbs; the corpus collosum and fornix were transformed into a white pulp; all the other parts of the brain were sound.—Rev. L.

losum were the street without any the symptoms which presented in these 13 change of colour; the corebral substance in cases. In the whole of these cases, except the membranes were intact; the lateral ventricles contained only a few drops of serum, nor was any effusion found at the base of the brain. The symptoms observed in this case were, at the commencement, fever, with pain of the abdomen, and bilious vomiting, which persisted for two or three days; headache then supervened, and on the next day the child fell into a state of coma, acthe muscles on one side of the face. In the evening of the same day the right arm became contracted and stiff, but this phenomenon was not of long continuance; it was replaced by violent contraction of the muscles of the neck, throwing the head backseat of contraction, now became completely paralyzed, both with respect to motion and sensibility, and the patient died in a few any cause to explain the hemiplegia which the brain. Now for attacked the patient shortly before death; the only lesion which existed was softening of the corpus callosum, the septum lucidum. and the posterior part of the fornix, and we do not know that physiologists have attributed the faculty of directing motion to any of those parts. This is all we have to say apropos to ramollissement of the white central parts of the brain. Let us turn to the

Ramollissement of one Lobe of the Cerebellum.

the median lobe, or one of the lateral lobes; we speak of softening confined to the ceresellum alone, and not coexisting with a oftening of the median lobe, we are acquainted with only a single case in the re- ramollissement situated in one of the cereords of medicine, it is that given by bellar lobes, some lesion of motility exists. DANCE, in his " Memoir on Acute Hyase was not attended by any special sympom whatever; the patient died in a state of oma resembling apoplexy; we must, thereore, turn to ramollissement of the lateral bes of the cerebellum.

We do not possess the same number of acts connected with softening of the cereorner lesion is much more rare than the atter. Thus we have been able to collect nly thirteen cases of ramollisement con-ned to one of the lateral lobes of the cere-ellum, nine of the lateral lobes of the late elinm; nine of the belong to marious au-hors, four to myself; you will find the lat-g detailed in the fifth volume of the Cli-

the rest of the brain was perfectly sound; three, we find the intelligence preserved for a greater or less period from the commencement of the malady. In two examples, without having been deranged, the intellectual faculties were dull and slow. In the three exceptional cases just mentioned, the disease commenced, suddenly, by a loss of consciousness, as if the individual was seized with a violent effusion of blood into the cerebral hemispheres. The faculty of speech companied by strahismus, and retraction of also remained intact in all the thirteen cases except two. In the one related by M. Mo-Non, the speech was simply difficult, but the patient was still able to make himself understood. In the other, which belongs to M. LALLEMAND, the power of speaking was completely lost. This is all we have to rewards; the member which before was the mark in connection with lesions of intelligence; they are various, but, as you see, of slight importance, except in those violent cases where it is nearly impossible to dishours. In this observation, we do not find tinguish ramollissement from hemorrhage of

Lexions of Movement.

These are observed infinitely more frequently: thus in our thirteen cases we find twelve in which the motility was more or less modified, and perhaps even in the thirteenth this took place also; at least it is impossible to say that no lesion of motility existed, for the author (M. DANY, "Memoir. de Med. Milit." t. 22, p. 379) merely states that the patient fell into a state of coma, without mentioning whether the limbs Ramollissement may affect here either were paralyzed or not; indeed, the whole history of this case is imperfect; even the nature of the lesion in the cerebellum is too vaguely described. We are, therefore, inimilar affection of the cerebrum; as to duced to lay aside the case given by M. DANY, and conclude that in all cases of

But what constitutes this lesion? What brocephalus" (Archives Generales, Janvier is its nature? Under what form do we ob-830; here the ramollissement occupied serve it? These are questions which we he right half of the superior almond-shaped now proceed to answer. In one case we obe, and extended thence to the correspond- find a constant agitation of the body; the ng part of the mesocophale (pous v.) This limbs were neither contracted nor paralyzed, phenomena so often observed in ramollissement of the cerebral hemispheres. but affected with a convulsive agitation occupying equally the upper and lower extremities on both sides of the body. In the eleven cases which remain we find six accompanied by contraction and stiffness of the limbs; five of which gave rise to para-lysis, either with or without contracture.* We have now to ask

^{*} This enumeration differs slightly from where he describes two cases as attended with convulsive agitation, and ten with be Medicale. Let us take a rapid view of paralysis or contracture. As to the case,

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what I know is going on on every side, I feel a degree of repulsioned at such sub-jects, and would almost willing the the shafts of malevolence, envy, and difficultion, upon you, and to expend their harmlers force on the surrounding elements. I pity the pour creatures who have no other means of obtaining a livelinood. They have not the legitimate instruments of advancement within their reach,-industry and intellect,-and what power.

I have still a few words to say on scalded glottis. There are certain cases of this accident in which the calomel treatment will before the system is made to feel the action of the remedy. There are, then,

Certain Cases in which Bronchotomy must be resorted to

first case, Dr. Marshall Hall, a gentleman further demonstrate the personally quite unknown to me, but for whom I entertain, from his writings, the highest respect, proposed the performance the extent and form of the lesion which it of the same operation in the same cases, and causes, as well as the nature and the order gave one in which it had been employed, of the symptoms which it produces with all unsuccessfully, however; and it is only fair of which I have made you acquainted in to state, that although my case preceded former lectures. (See Lecture in LANCET, the publication of his essay, I cannot have 1834, page 657 the slightest doubt that his proposal originated in his own mind, without any know- that some time ago a child was brought to ledge whatever of what had been done by the Dispensary, cold, comatose, and labourme. There are, therefore, certain cases of ing under excessive dyspnien, the respirascalded glottis in which you must perform bronchotomy, to gain time. But, upon this companied by a loud sonorous tale. On point I have to warn you of a mistake into opening the mouth by force to inspect the operation will seldom be alone sufficient, tity of whey-like pus discharged. and if you trust to it alone, you will often lose your patient. The inflammation excited by the injury will, notwithstanding that relief may be afforded by the operapatient will die, not perhaps so soon as if water. These are interesting facts for you the operation had not been performed, but to know. They enlarge our views of the death will, most probably, follow. Bear, pathology of this injury, and show, that therefore, this important fact in mind, although a child may weather the more

are not called upon to employ doses so large, the throat, although no inflammatory action or to repeat them so often, though I believe may have extended to the lungs or chest;

to urge this quint upon you, at for will not find that any of those person tately spoken of the those persons, and the batch spoken of the operation, of the operation and the use in these cases, have spoken of the necessity of employing at the same time, the influence of mercurial action, nor have they even at all alluded to the practice. This, if anything can they do? They must exist. They are were necessary, would, of itself, afford mecompelled to use the only weapons in their ply to those detractors who would insinuate, that the calonicl treatment of these cases has been long well known, and is a gene-rally employed mode of practice. The in-sufficiency of the operation unassisted by the not be sufficient, because death may occur rational treatment is pointed out by the case of Eliza Butler, which some time since occurred here. The notes of this case I hold in my hand, and Mr. Cullen, who furnished them to me, has promised to insert them for your perusal in the case book. See Cove 1. 1 for the purpose of gaining time. Such was hold also in my hand, notes of another case, likely to have happened in the case which the dissection of which I witnessed, and has just occurred. I proposed, adopted, and succeeded in the performance of this operation, in these tender subjects, fifteen years and the subjects, fifteen years and the subjects, fifteen years and them over to you. (See Case 2.) Let very young practitioner. Indeed it was by me remark, that both cases afford highly means of this operation that I first endea- important information. They not only voured to anatch the interesting but deserted show, as I have just said, that the opera-subjects of this cruel accident from the grasp tion cannot be depended on without the of death. Soon after the publication of my mercurial treatment be conjoined, but they

Manner in which the Injury kills;

I have been informed by the apothecary, tion being exceedingly laborious, and ac-companied by a loud sonorous rale. On which many have fallen, and daily fall. The fauces, an abscess was broken, and a quanbreathing was immediately relieved, and the child recovered. It was stated by the parent of the child, that it had some days before attempted to take a drink from the tion, extend to the bronchial tubes, and the spout of a tea-kettle containing boiling View the operation only as a means of mediate effects of the lesion, a suppurative, gaining time. Pursue an efficient or slower morbid action may a suppurative, or slower morbid action may a suppurative, may be equally destructed. This case also demonstrates, that destricted the caused by the mechanical obstruction. for stone can be child had not gotten to have sund; and as the lend a the bursting of the abscess was followed by rapid recovery, it is evident that the injury had not produced much effect on the chest.

Treatment, and its Occasions Fallure.

When you reflect on the tender objects of these injuries; on the delicate state of health in which the children of the poor of the age of those in whom the injury almost always and necessarily occurs; when you consider the importance of the injured part, and the nature of the operation of brouchotomy in an infant, you will not be surprised to find that success will sometimes fly from the hest-directed efforts. These remarks I make in consequence of having heard that it was exultingly, but absurdly said, on one occasion, "Here is a case in which the operation has been performed, here is a case in which calomel has been used, and yet here do we find that the chil4's life has not been saved." Is it not absurd to expect oniform success in such cases? But, I can say that the success will, in properly-treated cases, he almost constant. It will leave no room whatever to doubt the propriety of the measures proposed. I have lost one case, and only one, out of very many indeed, out of, at least, apwards of a dozen, and I think I should not have lost that one if the parents of the child had acted with discretion.

A case has been mentioned to me where the child, not withstanding every care, langed, after the calomel treatment and the operation had been conjointly employed, into a state of teverish excitement, which gradually led to great exhaustion and sinking. This I can well believe, I can also easily conceive that after such attacks, a state of general delicacy of health may often take place, the management of which

may require great judgment.

Whenever the accident in question occurs in your practice, lose no time in submitting your patient to mercurial action,-you may, if you please, assist it by leeches applied about the larenx. But do not let the apparent absence of danger, or of alarming symptoms, induce you to postpone, even for an hour, the most efficient line of practice which you can adopt: for these cases are often most treacherous. All appearance of scrious injury may be absent for hours after the accident, and then the most alarming symptoms will set in with great rapidity. by, that the parent is often lulled into a false security, and believes that no mischief with a pair of scissors. There was then has been don't prise gerhaps some little slight bleeding, which stopped in a few minutes.

Respiration was immediately carried on commenced and properly carried on, year through the wound. She seemed rather

s, without an operation, will be almost certain, If, however, you have not seen the case until dangerous or distressing symptoms have set in, you are first to consider, whether the state of your patient be such, that there exists a rational hope that the disease may be overtaken by the action of the remedy. If you think so, you administer, without having recourse to the operation of bronchotomy, two grains of calomel every half hour or hour, until relief be obtained. You should combine each dose of calomel with half a minim of tincture of opium, and as soon as symptoms of relief appear, the dose may be diminished, and the interval increased: but the remedy should be persisted in until all symptoms of distress are removed. On the other hand, if you find that the symptoms are so severe, and are becoming so rapidly worse, as to lead you to fear that dissolution may take place before a state of sufficient mercurial action can be excited, you must have recourse at once to the operation of bronchotomy, which will gain time for you, and afterwards pursue the mercurial treatment until you have secured the safety of your patient. These directions, if adopted, will enable you to steer these cases almost uniformly through their first danger; but to bring them to a full and happy termination, you must not lose sight of them until their tender systems have completely recovered from the shock caused by both injury and treatment.

Abstract of Cases alluded to.

Case 1 .- Eliza Butler, aged three years, was brought to the hospital at nine o'clock in the morning of the 14th of last July. At ten o'clock the preceding night she attempted to take a drink from the spout of a tea-kettle, which had been just removed boiling from the fire. Shortly after the accident she became dozy, and slept, and some hours after got wheezing. On admission she was warm, her pulse too quick to be counted. She had excessive dyspnœa. Respiration sixty in a minute and sonorous. Tracheal rattle prevented auscultation from being satisfactory. Lips and face rather livid; eyes languid; she was listless and drowsy; drank freely; her tongue and fances appeared white and scalded. Four grains of caloniel were given; and at eleven o'clock, that is, two hours after admission, tracheotomy being decided on, an incision was made with a scalpel along the mesial line. There was scarcely any bleeding. trachea was exposed with a blunt knife, and child often suffers so little in appear-traches was exposed with a blunt knife, and ancer after the moment of alarm has passed by the assistance of a hook was drawn forwards, when a circular piece was cut out

1.00

heavy and insensible all day; there we however, remarkable changes. At five but the

lar. The more minute bronchial ramifica- after the operation. tions clogged with tenacions mucus. The anterior part, only, of the lungs, crepitate. The character of the cadarr was such as to make an impression on the The posterior and upper portions are in a mind that the child had been, at the moin ventricles.

plain of anything, yet the tongue and hips and had burst. The epiglottis was shrived were covered with a white pulpy matter, so as to form a kind of tubercle which could, which could be rubbed off in layers, when a red surface was exposed. Much distress was produced on passing the finger into the isthmus of the fauces, which felt tumid and pulpy, but did not afford any sensation as if there was a state of vesication. Leaches, the surface of the application, and application, and the property of the surface of the application, and of the surface of the application, and of

were employed. of breathing rapidly. Fourteen hours after the accio'clock she appeared better, more sensible, progressed. Fourteen hours after the acci-and drank freely. But at twelve o'clock, dent, the child lay on its back, listless; its midnight, there was stupor, intense bron-chitis, mucous rattle in the anterior part of chest. At three o'clock, a.m., coma, dilated its rapidity, and partly from some irregupupils, convulsion of face; tonic contraction larity in its returns; his countenance of right arm; pulse imperceptible; intense flushed, and his skin became very hot. The heat of skin; and she died at eight. One operation of bronchotomy was now perdose of calomel (grs. ij) was given after the formed. Immediate relief was afforded; he operation, but it was not persevered in.

Autopsia.— Epiglottis and upper rima his eyes, sat up, and cried. Indeed, for a thickened, white, and shrivelled. Those time the amendment was so great as to lead appearances evidently successive to cedema. to a hope of recovery. In the course, how-Laryns, from this part to artificial sperture, ever, of some hours the breathing became healthy. The wound of sufficient size, and worse, and his face affected yoursulsive unobstructed. Between wound and ramine twitches. These were followed by more cations of bronchia, tenacious lymph effused. general convolsions, and he was in one of Bronchial membrane exceedingly vascu- these carried off, about twenty-four hours

state of red hepatization. Lungs are ex- ment of the injury, in fine health. Neither ceedingly solid. When cut and squeezed, the lips nor the mouth presented an appearsome sanguineolated muchs is forced out ance as if they had been much injured by from the air-tubes. The hepatized portions the boiling water. The wound over the float in water; no part has gone on to putrachea was ample and patulous, and the rulent infiltration. Esophagus and stomach laminæ of tissues through which it had been perfectly healthy. Veins and sinuses of made were agglutinated to either side. All brain injected. One or two ounces of scrum the soft parts exterior to the trachea were sound, and free from inflammation. The wound in the trachea itself appeared unne-Case 2.-A healthy male child, aged be- cessarily large, and this tube, on the site of tween three and four years, attempted to the wound, was greatly narrowed. From take a drink from the spout of a tea-kettle, this point it gradually acquired, both upcontaining boiling water. Whether it was wards and downwards, its natural dimen-that the child had not felt much pain, or sions. The narrowing of the tube at the that fear had prevented him from making site of the wound, arose evidently from the complaints, it so happened that he appeared, removal of a large portion of the clastic at the time, not at all injured; he was soon structure of the pipe; and hid the child after put to bed, and his bed being in the recovered. I think it very likely that some room in which his mother sat, she had an permanent inconvenience might have reopportunity of observing that he went to sulted from this narrowing. Hence, I would sleep in his usual manner. But, in about advise that on occasions in which bronchothree hours after, and while still asleep, his tony is required in children, no more of breathing became so much affected with this tube should be removed than is indispensely. The cavity of the trachea was mother, and subsequently to induce her to full of a reddish nucus, and its lining memtake him up and carry him to a surgeon, brane, the vascularity of which was greatly When he was seen by the surgeon, eight increased, was covered, in the neighbour-hours after the accident, the breathing was bood of the wound, and from this to the fifty-six in a minute, difficult and sonorous, glottis, by a stratum of lymph. The glottis, Inspiration seemed to require a great effort, 'epiglottis, and the surrounding parts, to the and to be much longer in its performance; extent of an inch, were greatly thickened, than expiration. The pulse was upwards of from submucous effusion. There was not, 130; the surface of the body very warm; however, the slightest appearance of vesithe face flushed. He did not seem to com- cation, or as if any bulke had been formed plain of anything, yet the tongue and lips and had burst. The epiglottis was shrive

the surrounding vated grav-looking set somewhat like stratified lymph, yet could not be rubbed off. Hence, I concluded that R was only the lining mucous membrane of these parts, altered very much in its struc-

There seemed to be a slightly emphysematous state of the upper portions of the left lung; and parts of both lungs, particu-larly og their posterior aspect, were engorged with blood, were very livid, and solid, yet these parts did not sink in water. When a section was made of the denser portions of the lungs, puriform mucus could be expressed, in quantity, from the bronchia of the cut surface, and the intermediate parts exuded, at the same time, a quantity of a dark, livid, or bloody-like fluid. The remainder of the thoracic viscera, and those of the abdominal cavity, the lining membrane of the stomach included, were free from disease.

The vessels of the brain and of all its coverings were gorged with blood. There was a considerable quantity of a clear serum in the ventricles, and when the brain, which i was very firm for the age of the subject, was removed, there was found in the base of the cranium, and round the spinal marrow, a large quantity of reddish serum.

DESCRIPTION OF AN HERMAPHRODITE ORANG-OUTANG LATELY LIVING IN PHILADELPHIA.



Turs animal had black, thick, woolly, and frizzled hair, covering all parts of the body with the exception of the palms, the face, and the ears. Its skin was black, and it nails on all the fingers. The orbits of the eyes were prominent, the arms very long. It had no cheek pouches, nor any tail, nor a guttailst me, and there were rudingents, only, of these bestocks. The nose was many per left, and the facial angle more elevated, than in the simia astyrus of long. It had no cheek pouches, nor any tail, nor a guttain sac, and there were rudinger and the sac, and there were rudinger, only, of disease bestocks. The nose was more perfectly and the facial angle, or Woawen of Duvancel and F. Cavier. Should I for that in the similar styrus of Cavier is the little to the facial angle or Woawen of Duvancel and F. Cavier. Should I for that in the similar styrus of Cavier is the little than the same and the cavier and the facial angle of Woawen of Duvancel and F. Cavier. Should I for the training styrus of Cavier is the little than the same and the cavier and the

sal was two feet two inches. . Its arms were 154 inches long, the hand and fingers 51 inches, the lower extremities 11 inches, the foot was 44 inches long, the head and neck 111 inches long.

This interesting animal was imported into New York, from the island of Borneo; and at its death it was said to be rather less than two years of age. Each jaw contained twelve teeth; three molars, one canine, and two incisors, on each side. When standing erect, the fingers of the forehand nearly touched the ground; when advancing on a plane surface, he voluntarily assumed the crect attitude; he balanced himself with his long arms, on the slack rope, and climbed with the greatest agility; when he retired to sleep, he assumed a recumbent posture; he displayed great fondness for fruits of all descriptions, but particularly for grapes, and he possessed all the doeility and intelligence which is characteristic of the orangs. He died of a diarrhoes from excessive indulgence in fruits.

The orang genus has already been increased from one to six species. The present specimen differs from all the others hitherto described; it evidently pertains to the Gibbon family, or the long-armed orangs." and differs from the others in being of a universal black colour, in the facial line being less inclined, in the absence of the circle of gray hairs around the face, in the rudimentary state of the ischiatic callosities, and, with the exception of the active Gibbon, in the absence of the guttural sacs.

On the death of the animal there were found general adhesions of the peritoneum, the omentum, and the intestines. The glands of the mesentery were very much enlarged. There were white emptions, or, rather, ulcerated tubercles, on the peritoneum, such as are observed occasionally in scrofulous subjects, and inflammation of the mucous coat of the stomach, and the intestinum rectum.

Orangs have, occasionally, been dissected, and minute and laboured descriptions of their anatomy published. The present individual displayed remarkable peculiarities. The ligamentum rotundum was very strong; the liver resembled the human, having the same number of lobes, &c. The appendix vermiformis was very large; the contents of the thorax displayed a close analogy to those of the human being. The ventricles of Morgagni were rather large, although not communicating with a sac in the throat, as in the simia satyrus and some monkeys; the

^{*} The type of which is the Simia tar, (Linn.) to

sternum was composed of only two please, like that bone in man, in which respect it differs from the simine with tails. There were twenty-five rings to the traches, four-teen ribs one-ach side, four-teen dorsal vertebræ, seven cervical, five lumbar, five sacral, and five csecygeal; but the most remarkable peculiarity remains to be noticed; the subject proved to be a complete hermaphrodite.

Hermaphrodism, that is to say, individuals uniting in themselves the means of reproduction, without the concurrence of other individuals of their own species, appears to be in some sort a vegetable attribute, as among plants the class Dioccia (Linneus) is the only one not hermaphrodite. The nearer the animal approaches to the vegetable kingdom, the more frequent and complete are the instances of her-maphrodism. This is of two distinct kinds: in the one it is absolute, the animal possessing within itself the powers of reproduction, as is instanced in the bivalve shells (the oyster for instance), in some of the multivalves (as the chiton), and in the zoophytes, the sholothuria, &c.; whilst in univalve shells, on the contrary, such as the helix, limnes, planorbis, &c., although they unite the two sexes, yet the union of two individuals is necessary to fecundation. The common garden snail is a familiar example. Animals of this description are properly termed "androgynous."

The disposition, then, to hermaphrodism is more rare as we advance in the scale of perfection, or, rather, to a more complex organization. Those cases which are said to have occurred in the higher orders of animals, may, with few exceptions, he attri-buted to mal-conformation of the genital organs, and to an admixture of the two sexes, which, according to the observations of Sir E. Home and Mr. John Hunter, are of more frequent occurrence in the bull than in any other of the mammifera; but in no instance have these authors found the assemblage of the organs of both sexes complete, some or other of the organs being absent, or existing only in a rudimentary state. The case which most nearly approaches in perfection to the subject of the present description, is that detailed by Mascagni in the "Bulletin de la Faculte de Medecine," for 1811, p. 176," where he describes a bull, with all the male organs, and with ovaries, uterus, and vagina, but in place of a vulva, the vagina had its orifice in the urethra. There is also another case. somewhat similar, described in the Med. Repository, No. 45, of a human individual, in Lisbon, uniting both sexes in apparently great perfection. The subject was twentyone years of age, was twice pregnant, and aborted at the third and fifth months. It is true that although the penis and the testicle

vidual, wide "Decembair of this ledividual, wide "Decembair of this ledividual, wide "Decembair desa Sciences Medicales," art. "Cas Rares." The above observations will at least demonstrate the possibility of the occurrence of complete hermaphrodites, even in the highest class of animals,

The specimen which forms the subject of the present description will furnish us, perhaps, with the nearest approach to a complete union of the sexes in the same individual which has been detailed; and is the only instance, so far as we have observed, of a circumstance of this kind occurring in the monkey race. In the present instance the penis was about one inch in length, subject to erections, and terminated, as usual, in a glans, but imperforate, a deep groove on the inferior surface serving as a rudimentary urethra. This groove extended about twothirds of the length of the penis, the remaining portion being covered with a thin, cuticular, diaphanous membrane, which also closed the external orifice of the vagina. being extended across the vulva. The vagina was rather large, and displayed transverse strize. Remains of the nymphic and the labia externa were visible; the mentus urinarius opened beneath the pubis into the vagina; the urine must have been directed along the groove of the penis by the membrane obstructing the orifice of the vagina. The os tincæ was surrounded by small globular glands, the orifice and cervix admitting a large probe into the cavity of the uterus, which organ appeared to be perfect, with all its appendages; the round and broad ligaments, together with well-pro-nounced ovaries, were all in situ.* The scrotum was divided, consisting of a sac on each side of the labia externa, at the base of the penis, covered with hair. The testicles lay beneath the skin of the groin, about two inches from the symphisis pubis, obliquely outwards and upwards. They appeared to be perfectly formed, with the epididymis &c. The most accurate examination could not discover vesiculæ seminales, but an opening into the vagina, above the meatus urinarius, appeared to be the orifice of the vas deferens. The testicles were unfortunately separated from the body, during the process of skinning.

Admitting what in reality appeared to be the fact, that all the essential organs of both sexes were perfect in this individual, had the subject lived to adult ago, most interesting results might have been elicited. Could not the animal have been impregnated by the male individual, by rupturing the sent-sent closing the vulva? Or, by mastur-

one years of age, was twice pregnant, and aborted at the third and fifth months. It is have been settleful in a settleful in the settleful in

batton, might p nated Itself, by this its own range their remarks induced in the control of the authorization of the urethra most probably would have prevented the animal from ejecting the sense; into the subjoined are engraved from accurate drawtagina of another individual. The subject state, of the natural size, taken by Dr. Morwhilst living always inside for a male. Had an instance of as complete a nature R. M. Bird.

occurred in the human subject, it might have occasioned great difficulties in a case ticles to discharge their seminal liquor into of legal medicine. Dr. Charles Pickering

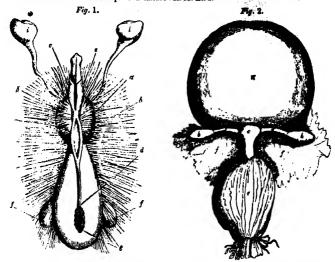


Fig. 1.-External Organs of Generation: - a, Orifice from the vagina and urethra.-b. Membrane covering the vulva .- c. Prepuce. - d, Raphe of the perineum .- e, Penis, with a groove on its inferior surface .- f, Ischiatic nudities .- y, Anus.

Fig. 2.—Internal Organs of Generation, viewed from behind; the Uterus turned up, with its Liyamentum Latum, to show the Ovaries, &c. — a, Bladdor. - b b, Ovaries. e, Uterus .-- d d, Fallopian tubes .- e, Rectum .-- f f, Broad ligaments.

(The foregoing article is extracted from a very interesting and learnedly written volume, entitled "Medical and Physical Researches. By R. Harlan, M.D., F.R.S.L.," just published in Philadelphia.)

CASE OF

INTESTINAL CONCRETION.

OR, ENTEROLITHUS.

To the Editor of THE LANCET.

Sin,-I am induced to send you a short count of a case of intestinal concretion. or enterolithus, with some observations on the subject, because the attention of the profession, other to public or private practice, is said to estimate form of disease.

I remain, your obedient agreent,

J. L. IRIN, Surge Halifax, Yorkshire, March 12, 1836.

A short time ago I was requested to see a man in the country, an under-gardener by occupation, æt. 31. of a naturally robust constitution, who had always enjoyed excellent health, until within four or five months previous to the time at which I was consulted. His symptoms at this period were, pain in the lower part of the abdomen, more particularly in the right iliac region, sometimes relieved by pressure, at other times aggravated by it, which had continued for several months, though varying constantly in its degree of violence; along with this there was an irregular state of the bowels, costiveness and purging alternating ; the discharge often watery, tinged with blood, and attended with tenesmus.

His digestive organs were much impaired, having a furred tongue, dry skin, frequent thirst, headache, bad appetite, loss of strength. His pulse was, however, nearly untural, and there was little or no fever. His general appearance had undergone a considerable change within the last three or him to such a degree that he could only attend to the lighter duties of his occupation. As the bowels were in this irregular state, and as the pain was not at this time increased on pressure, nor such as indicated blood-letting, I ordered him a brisk purge of calomel and jalap in the evening, to be followed up with a draught of sulphate of magnesia and rhubarb in the morning. He was directed to remain quiet for a day, and was put on low diet.

The effect of this medicine was to give considerable relief, though still the sensation of pain and weight in the abdomen was not removed; the pain, however, was feces I began to suspect that an accumulation of feces was the irritating cause, and produced his ailments; I therefore, after an interval of forty-eight hours, repeated the nurge of calomel and jalap, adding only a little pulvis cinnamomi compos. to relieve sufferings had been very great for four or an inch or two above the anus, he had, after many attempts, and intense pain, removed it by aid of a wooden scoop. Only a slight soreness at the lower part of the abdomen, and in the rectum, was now experienced. To allay this irritation of the mucous membrane I prescribed an emollient clyster, mucilaginous drinks, &c., so that in a few days he was able to return to his usual diet and employment.

Observations .- On examining the substance expelled, it appeared at first sight to be nothing but a large indurated mass of feces, in the shape of a ball, and as large as the fist, but when it had been repeatedly washed, a most curious-shaped intestinal concretion was found in the centre, resembling somewhat, in form, the tuberose root of an orchis, only having six or seven tubercles or excrescences instead of two. The following diagram may serve to give an idea of it, the tubercles taking their origin from or " Opman tlader,"

the feed matter ed rather less than an ounce. Its colour resembled that of rhubarby the woody fibres were distinct, and mixed with calcarcous deposits, both externally and internally. On cutting into it, the nucleus had more the appearance of a cherry-stone than anything else. There was a cavity of about the size found in those stones. four months, and his strength had failed A calcareous deposit of phosphate of lime surrounded it. The man felt conduced, that if the substance had been allowed to remain, it would have eaten its way through his abdomen, or permanently have stopped up the passage. I told him, that perhaps a cherry-tree would have grown from his body, like that which grew from the forchead of Munchausen's stag, and that had this happened, he would have become the most extraordinary gardener in the world. On more minutely examining this concretion, it was found to consist principally of woody fibre, and of a great quantity of a peculiar substance like amadon, t or the skin which covers the horns of deer when they now felt most in the left iliac region. From first shoot; it has the appearance of soft, the unhealthy and indurated state of his velvety, brown, spongy network, with short spicula. It is insoluble in water, partially soluble in alcohol, and blackens with sulphuric acid, burns with a slight flame, emits an odour of woody fibre, or tinder (of which it is a description), and heat reduces it to a charcoal. The calcareous deposits I found the griping of which he had complained, and to consist of phosphate of lime, ammonia, continued the cathartic draught. On visit- and magnesia, the presence of which I deing him the day but one after, I found his tected, by adopting the process mentioned symptoms entirely relieved and my patient by Dr. Turner in the 24th vol. of the Edinb. in high spirits; he informed me that his Med. and Sury. Journal, where there is a case of intestinal concretion related by Mr. five hours previous to and during his last Tortet, with Dr. Turner's analysis. In the evacuation, but that now he had succeeded case before us, I attribute the formation of in dislodging the cause of his illness. Hav- the concretion to the tornid state of the ing distinctly felt a hard substance pressing bowels, and to the swallowing of some inon the parts, whilst straining at stool, only digestible matter, as a cherry-stone, or some fruit stone of that description.

Had I not persevered in the use of brisk purgatives, the result might have been most untoward; or had I mistaken the symptoms for those of inflammation of the mucous membrane, and ordered leeching, counterirritants, and mild laxatives only, the exciting cause of derangement would not have been removed; or suppose I had attributed the causes of his sufferings to spasm, or nervous irritability, and had ordered a strong

^{*} The sketch was not sufficiently perfect to allow an engraving to be made from it, but the section has the appearance of rosette of riband, with six boses, the contre being an luch in diameter, and the lows each somewhat less in length; the diameter of the whole is about two and a half inches. Ep. L.

⁺ A variety of the believes ignarius, called " spunk."

entispasmodic, or been still worse than in the former case. These considerations are worthy of the atcention of practitioners, and as a young one, I thought myself fortunate in the happy termination of the case. It appeared from the symptoms that the effect of the first dose of the medicine was to remove the concretion and accumulated mass of feces from the right iliae region, or from the cacum and ilio-escal valve, and the left iliac region, when the repetition of the purge caused the enemy to retreat to the back door, and that the sigmoid flexure of the colon and curves of the rectum obviated in some measure its free passage, producing the sensation of pain so acutely felt at this period.

The rarity of these cases and the practical nature of the subject must plead my excuse for requesting a little more room in

your valuable Journal.

Intestinal concretions are not common in the human body, though several cases are recorded in Munro's work on the Morbid Anatomy of the Stomach, Gullet, and In-testines, in Good's Study of Medicine, in the Edinburgh Journal, in Andral's work, and in the works of other foreign authors. In ruminating animals they are often observed, especially in those whose food consists of luisks, beards of oats, &c., as in millers horses. The intestinal calculus has been tound occasionally to resemble the bezonr," found chiefly in the camel and the goat, and formerly used in Holland and Portugal as an alexipharmic. According to Drs. Fourcroy, Vauquelin, and Berthollet, eight kinds of hezoars have been described, those consisting of,-1st, Super-phosphate of line : 2nd, phosphate of magnesia; 3rd, phosphate of animonia and magnesia; 4th, biliary; 5th, resinous; 6th, fungoid; 7th, hairy; 8th, ligniform.

Dr. Good describes only three kinds of enterolithus, viz., bezoardus, calculus, and scybalum. As almost all animals are endowed with the power of separating and secreting lime and other carths from the blood for particular purposes, such as that of forming a shell, a covering for insects, Ac., so, in a morbid state of the system, generally, this secretion often takes place in abundance, and is poured forth into cavities where its accumulation and crystallization must be attended with mischief. The three varieties of true enterolithus are described as taking their origin in the following manner (See Copeland's " Diction-") :- 1st. Those whose nuclei have been for acd from inspistated hile, gall-stones, &c., to which saline and animal matter have at-

teched themselves. 2ndly. Those having nuclei constating of foreign bodies, such as fint-stones, seeds, husks, fragments of hone, around which the alimentary matter has collected and crystallized. 3rdly. Those which are formed entirely in the alimentary caual, and which are more or less homogeneous, and have no distinct nuclei.

The present case seems to belong to the second class. Concretions are found also in the intestines of persons who are in the babit of taking large doses of magnesia and chalk. Adjocerous and fatty concretions are occasionally formed. Dr. Elliotson in his valuable lectures, and in some of his papers, narrates cases of this description.

The morbid changes produced by these alvine concretions as described by Munro in the work previously alluded to, are either the formation of a sac, constrictions of the bowel, adhesions of the concretion to the inner coat of the intestine, or ulceration of the parts in which they are lodged, &c. The treatment which has been recommended may be divided into three modes, viz., purging, dissolution, and operation. Purging is certainly the best and most likely to succeed, provided the concretion is of limited size. Treatment by dissolution holds out a poor chance of success. That by operation, is a most formidable proceeding, either in adopting Munro's method, or that of M. Tortet; the former directs us to cut down upon the foreign body, in the space between the 12th rib, in the upper margin of the os ilium, or on that part where the peritoneal covering is deficient, then to make a hele in the colon, feel for the calculus, extract with the forceps, &c. The danger of this operation is evident enough, and, besides, how are we to be sure that the concretion will be found in the spot corresponding with the external incision? Mr. Tortet recommends to cut immediately upon the foreign body, supposing it can be distinctly felt through the skin, on the strength of the idea that the danger arising from wounds of the peritoneum and the exposure of the viscera to the contact of air has been exaggerated.

This operation might certainly be practised with a chance of success.

Illustrations of the Elementary Forms of Diseases. By R. Carrwell, M.D. Fasciculi 2-9. London. Longman. 4to. 1835-6.

SINCE we reviewed the first fasciculus of Dr. Carswell's work, eight more parts have appeared, the second and third illustrative of accinoma; the fourth of melanoma; the fifth of softening; the sixth of hemorrhage; the seventh of mortification; the eighth of

Prom rise train compound "padishr," of "padismeler, "subrrupted into "bed subr," of beyon," and translated "depellens regulates."

pus; the ninth of hypertrophy. Each fair a Vernation of her forms that termiciculus presents a comprehensive view of nate ralized and explained is always ingenious; of his broad chest and brawny shoulders. but it is the clear and logical manner in A more important variety of this form of which all the doctrines of morbid anatomy hypertrophy occurs in some involuntary with which every morbid form and shade is trophy of the heart is by no means uncomdelineated, which give the chief character mon, and is attributable only to excessive in this country, to put them at once in the The increase of bulk in one lung, or in one possession of every practitioner, and so to advance, more than any other recent publication, the progress of practical medicine.

We shall only notice the last and ninth fasciculus, which treats of hypertrophy,-"the consequence of an excess of the nutritive functions," and not, as has been supposed, "the consequence of an accumulation of the nutritive materials, from a diminished exercise of the act of decomposition."

Hypertrophy is sometimes congenital; at other times there is in the body a general tendency to an increased but imperfect development of various organs and tissues of the body, such as is observed in persons of a scrofulous constitution, where " the liver, the bones, the lymphatic glands, sometimes the brain, and, frequently, the upper lip, are, more or less, obviously enlarged."

The development of the adipose tissue is at times carried to an enormous extent under the influence of hereditary disposition, but more frequently under the influence of gourmanderie, leisure, and supersaturation of the system with aliment, as was remarkably exemplified in the ancient race of corporators, and the dignitaries of some Christian churches. Among the local causes of hypertrophy, Dr. Carswell enumerates "frequent and increased action of an organ in an unfrequent occurrence in the involunts the voluntary muscles, more especially in glia. those of the extremities: but in the blacksmith's arm, or in the leg of a Taglioni or observations on the state of the vessels in

perurophy is not to be one of the morbid conditions or products considered pathological. Notwithstanding which Dr. Carswell has denominated "ele-mentary forms of disease," because out of that the "superior extremitics of celebrated them, or their combinations, every organic danseuses suffer, and, when compared with disease, every appreciable anatomical lesion, the inferior, almost appear to be emaciated, is compounded. Several of the facts which while the legs of the drayman are sometimes are stated in the different fasciculi are new; so slender, that they seem hardly to posand the manner in which they are gene-sess sufficient strength to sustain the weight

are announced, and the beautiful accuracy muscles and double organs. Great hyperto this work, which is well calculated, as action, induced through the agency of cerwe at first predicated, to diffuse the import- tain diseased states of other organs, partiant discoveries made on the continent and cularly of the brain and nervous system. kidney, when the function of the other is suppressed, affords an interesting example of hypertrophy from a physiological increase of function, called into operation by the wants of the economy. The increased development of arteries and veins for carrying on a collateral circulation, the enlargement of the uterus and of the mamma in pregnancy, and, perhaps, the augmented bulk of one cerebral hemisphere, when the other is atrophied, may be legitimately referred to the same kind of hypertrophy.

The second cause of hypertrophy is " the existence of a mechanical obstacle to the accomplishment of the function of an organ." The most frequent cause of hypertrophy of the heart, the stomach, the bladder, and the biliary ducts, is some contraction or obstruction in the rifices of those organs, by which their muscular parietes are excited to increased action, and are, consequently, from the reason above stated, augmented in volume.

The long-continued influence of a morbid stimulus, is the most general cause of hypertrophy:-

"A state of irritation or chronic inflammation, is by far the most frequent cause of bypertrophy of the mucous, the cutaneous, the cellular, the fibrous, and the osseous tissues, and the glandular organs; nor is it the normal exercise of its function." It is muscles, besides being occasionally met...th this kind of hypertrophy which occurs in in the brain and the nerves, and their gan-

> Dr. Carswell has made is interesting

aneurysms,

The grat plate in the fasciculus which we are noticing, shows hypertrophy of the bronchi, the circular fibres of which are enlarged, and form transverse bands. Other figures represent emphysema, in which the dilated cells vary from the size of a pin's head to that of a cherry or a walnut. The second plate represents various forms of cardial hypertrophy. Figs. 1, 2, 3, of the third plate represent the morbid appearances which precede and accompany the formation of aneurysmal dilatation of the heart:—

"The serous membrane lining the internal surface of the ventricle, presents within a circumscribed space, varying from a quarter of an inch to one or two inches in breadth, or even from one half to two-thirds of its entire extent, a pale straw colour; it has become opaque, is closely united to the cellular tissue beneath it, which presents the same colour, and is considerably thickened. Occupying the situation in which these changes are perceived, and sometimes nearly to the same extent, are one, two, three, or more depressions, cavities, or sacs. These are lined by the scrous membrane and cellular tissue."

Fig. 4 presents a section of the tibia, with circumscribed bony enlargement or node. Traces of the external wall of the tibia are still observable, showing that the new osseous deposit took place on the inner surface of the periosteum.

The fourth plate represents ancurysmal and varicose dilatations of the arteries; also dilatation of the lymphatics and of the urethra. Fig. 2 is an example of ancurvsmal dilatations, which existed in all the arteries of the body, varying from the size of a hemp-seed to that of a large pea. Fig. 6 represents a dilatation of the urethra filled by a large stone. Although the sound had been frequently introduced, the presence of this stone had never been detected, " probably from the situation of the dilatation in the inferior surface of the penis, and the stone not projecting into the urethra." The patient was treated for varicoccle in the Hôtel Dieu of Paris.

he following is a very remarkable case of dilutation of the lymphatics in a young man of about 26 years of age:—

My friend, Amussat of Paris, was called to the Maint, who the day before had been seized with severe pain in the ab-

dial domen, followed by frequent vomiting.

These symptoms, and the presence of two swellings, one in each groin, nearly as large as an orange, left no doubt that the patient was labouring under the effects of strangulated hernia, but the state of pros-tration was such that reduction by an operation was not attempted. On examining the patient after death, the only remarkable circumstance observed was, enormous dila-tation of the lymphatics from both groins upwards, including the thoracic duct. The two swellings situated in the groin, and which at an early age of the patient had been treated as a case of double hernia (for we afterwards learned that he had worn a double truss from his boyhood), were found to be produced by great dilatation of the lymphatics of the inguinal glands. When cut into, instead of having a compact structure, they presented the appearance of a coarse sponge, from the size of all these vessels being increased, the most of them presenting from one to three lines in diameter. All the lymphatics of the pelvic and lumbar regions presented the same alteration in a still more remarkable degree. None of them were less than two, many of them from three to four lines, and the thoracic duct was from six to eight lines, in diameter. As no obstacle was found in the course or at the termination of the thoracio duct to account for the dilatation of the lymphatics in this singular case, and as these vessels had undergone no other perceptible change, I am disposed to consider it as an example of maiformation of these vessels.

> On the Analysis of the Blood and Urine in Health and Disease. With Directions for the Analysis of Urinary Calculi. By G. O. Ress. London, Longman, 1836. 8vo, pp. 147.

THE profession desire, says Mr. Rees, to know more of animal chemistry. Medical students already pursue the study vigorously, and their elders become unwilling to lack the scientific knowledge possessed by the apprentices. He therefore here presents them with what is described as "a concise view of those plans of analysis of the blood and urine , which may be performed" easily, cheaply, and usefully. The design is good, and it is gratifying to find the execution in the hands of a practical man, one who is not a mere book-maker. When the former, in addition to his experience, possesses a good understanding of words, and such clearness of head as will enable him to write comprehensibly, there is reason to congratulate the studious public on his literary labours. But few authors esteem the latter qualities. Consequently six volumes in every seven that come from the press, present us with such unpardonable outrages upon the English language, that their chief purpose is wholly lost and defeated. It gave us pleasure, therefore, to meet with a book whose author seemed alive to this error :-

"I have avoided as much as was possible those formal methods of description which have frequently disheartend the beginner from even reading a process, much more putting it to practice. If any such feeling he entertained by my readers, let me assure them that it is the reading, and reading only, that perplexes them; and that when once they have commenced the practice of the process, all confusion will pass away, and the facts become clearly and firmly impressed upon their minds."-Preface, p. iv.

We cannot altogether approve the " reading," that is to say, the writing, of this passage, and we have also, elsewhere, here and there, some rather perplexing, and some rather superfluous passages; for instance, in speaking of filtration, Mr. Rees advises that

"When pouring from any vessel into a filter, the lip of such vessel should be kept perfectly dry, otherwise the fluid is liable, after passing the lip, to run backwards to the bottom of the vessel, and thus be lost."

And his instructions for weighing are rather excessively described in the following passage, which does not end even with the lines which we have placed in italics :-

"Accuracy is greatly ensured by the habit of weighing by counterpoise, which is by balancing the substance to be weighed with dry powdered sand (or any other convenient powder); and then, on removing this substance, whose weight is to be ascertained, and counterpoising the sand in the balance with the weights, the most accurate result is obtained; for the number of grains, or parts of a grain required, must be identical in weight with the substance removed, before they can produce the same effect, of precisely balancing the sand."

Were it not very desirable to seize opportunities of urging our medical writers to pay more attention to the manner, as well as the matter of their books, we should not have delayed our praise of this volume to advert to a point which Mr. Rees himself the sugar with which it is admixed or some authors actually say, and what they when that principle has been present in

works. Sha a

Our remarks on the volume generally need not belong. We say as much as, and no more than, it deserves, in stating that it is an excellent book of instruction in analyses of the blood and the urine, in health and disease, quantitative and qualitative, with simple excess or decrease of their natural constituents, and with the addition, when present. of foreign substances. Personally familiar with all the processes, the author is not mere copyist, and he has repeated the researches of others where his own experience was too limited to be drawn upon for his descriptions.

His remarks as a medical practitioner are not numerous. The volume is, very properly, almost entirely confined to its expressed object. We extract, however, a few remarks by way of specimen, and with them close our notice.

Extraneous Principles in Urine .- " The urine frequently presents the various odours and colours of vegetable matters which are taken into the stomach; and the examiner must be on his guard against being deceived by such appearances. Thus, I have known a patient on the point of being treated for hamaturia, when the urine (by a mere chance) falling under my observation. I discovered the red coloration to proceed from the presence of a vegetable matter. On inquiry, the patient stated that he had been eating a salad, of which beetroot was an ingredient, during the last eight or ten days of his medical friend's visits."

" Mercury has been said to exist in the urine of those who use frictions with mercurial cintinents. This observation was made by Cantu, who obtained metallic globules from a sediment. I had occasion to examine the urine of a person who was salivated from large doses of calomel, but could not discover any trace of mercury

" Iodine always exists in the urine of those who take it internally. I have detected it in the urine of an individual who had taken only one grain of the remedy, and that in three separate doses of onethird of a grain each.

Diabetes .- " The great difficulty to be overcome in this examination is that of determining the proportion of urea; for in his preface presented to our attention. pletely prevents the crystallization on the We could fill a Lancer any day with the exposition of the difference between what urine have been stated to the state of t consideral made some experiments at the subject, from which be concluded that ures is voided by diabetic patients in the same quantity per diem as by healthy individuals. His method of detection was by plunging a mixture of the fluid with nitric acid into a freezing mixture, formed with ice and common salt; at this temperature a crystallization of nitrate of wrea occurred."

Silica in Calculi .- " This substance was twice detected by Vauquelin and Fourcroy during their laborious researches into the nature and composition of urinary concretions. Venables also reports the case of a woman who passed a calculus containing silica. It seems highly probable that this substance may exist in small proportion in most calculi; nor are we to be surprised at its being overlooked by those who examine the concretions; for, to do justice to such an investigation, it would be necessary to sacrifice the greater portion of most calculi, which is seldom permitted to the chemist, since such minute investigation has rarely been the desideratum of those who subject their specimens to his operations."

GERMAN JOURNALS.

Rust's Mayazin für die Gesammte Heilkunde. Vol. 45, Nos. 1., 11., 111.

WE resume our analysis of the German Journals. The last three numbers of Rust's Magazine contain the following communications, some of which we have already noticed:—

1. Report of the Medical Practice in the Hopital de la Charité, Berlin, from 1833 to 1834. By Dr. BARTELS.

2. Observations in Surgery and Ophthalmology. By Dr. Buck.

- 3. Remarks on an Epidemic of Dysentery at Cottbus in the year 1834. By Dr.
- 4. Fracture of the Skull, with Medullary Cancer in the Cavity of the Cranium. By Professor Wutzer.
- 5. Observation of a Case of Carsarean Operation. By Dr. KRANEFUSS. (Analyzed in The Lancet of Jan. 30th, page 700.)
- On the Difference between Congestion and Inflammation. By Professor NAUMANN, of Bonn.
- On Secondary Abscess. By Dr. NASSE.

8. Some Remarks on the Gout. By Pro-

STATISTICS OF " LA CHARITE,"

The 1 is a lengthened report of the most interesting cases &c. that present I them-

selves at the medical clinique of *Le Charitt*, Berlin, during the year 1833-34. We can only afford space for a notice of the statistical summary.

During the summer session 105 patients were treated; of these were

Cured, 57; incurable, 7; removed to other establishments, 12; died, 12; remained under treatment, 17,

During the winter session 141 patients were treated; of these were

Cured, 81; improved, 7; transferred, 11; died, 23; remained, 19.

Thus of 246 patients treated we have,— 128 cured and 35 deaths; while the remainder were either imperfectly cured or incurable.

The paper No. 2, entitled "Observations in Surgery and Ophthalmology," by Dr. Buck, contains a division entitled

POLYPI OF THE UTERUS.

The three following cases of uterine polypi present each several points of interest. In the first, we find an example of extirpation of the tumour while contained in the cavity of the uterus, an operation which most writers have considered as impracticable, though the present case shows that it may be had recourse to with full success.

Case 1.—A poor woman, forty-six years of age, generally enjoying good health, the mother of six children, was seized at the age of forty-four, with a severe hemorrhage from the uterus, which continued for eight days, and was attributed to fatigue and exposure to cold. Her menstrual periods had always been natural, and the discharge did not return again for twelve months; during this time, however, she experienced constant weight in the hypogastrium, with acute stitches in the sides, pain in the pelvis, and difficulty of making water. After the lapse of a year the hemorrhage returned, with aggravation of the symptoms, and was repeated at short intervals. The author being called on to see the patient in January 1834, found that the loss of blood had been replaced by a fluor albus. The woman was now very much reduced; her general appearance was cachectic, and she was unable to leave the bed; she had severe pain about the iliac region, which was aggravated on pressure, although nothing could be discovered in the shape of tumour, induration, &c.; the pulse was small and weak; cough frequent; she vomited occasionally, and was unable to bear anything but light food; she complained from time to time of weak labour-pains. On examination the uterus was found occupying its normal situation; the inferior segment not developed, but soft and thin; the lips of the os tince were completely

effaced, and the uterine orifice itself was di-lated to the size of a sixpence invelores stituted lady, and the following manner.

tremities of the tubes, oiled, and furnished the patient remained free from inflam-with their threads, along the left index-finger, as high up as possible along the root of the interest were restored by invigorating the polypus. One branch of the instrument being fixed, the operator, turning the con-cave surface of the second branch toward, third year, and gave birth to five children the polypus, succeeded in embracing the the polypus, succeeded in emoracing succeeds with his ligature, and fixing the two ing always appeared within the first twelve ing the uterus the operator took the precaution of exercising the pressure required for manusuring his instrument, rather on the polypus than against the sides of the uterus. However, the latter organ did not experience any pain or contraction, although frequently stimulated by the branches of the instrument. The ligature was gradually tightened for eight days, at the end of which period it came away, but, on examining, it appeared that only one-half the tumour had been destroyed. A second ligature was now applied, but with much more difficulty than the first, because the body of the polypus was reduced in size, while its peduncle seemed very thick and fibrous.

The effects of the copious foul discharge were counteracted by frequent injection of an antiseptic lotion. The unquiet state of the patient induced Dr. Buck to remove the ligature in a few days; he could now discover nothing but some fibrinous concretions, that were soon discharged with the pus. In fourteen days the polypus seemed completely destroyed, the uterus had recovered its normal form; the general symptoms rapidly diminished, and at the expiration of two months the female perfectly recovered her health, and the menses again became regular.

o issa lo st 47 chesticks), so as to admit the index-inger. menced to menstruste regularly every four On passing the finger into the cavity of the weeks at the age of eight years. This state uterus it was easy to feel and determine the existence of a polypus of the size of a large companied by any other sign of precocious pear, which was implanted into the fundus development. After having continued for pear. Which which are an and did not descend quite so far down as six months, the catamenta disappeared until the os tincze. It was impossible to reach the the age of fourteen, and continued regupreduncle with the finger, but the inferior larly until the patient's sixteenth year, portion of the tumour, which was quite in when they were suddenly arrested by a sensible could be circumscribed. The au fright. Four weeks afterwards, on the very thors first care was to improve the patient's day that the menses were accustomed to health, and, if possible, promete the descent appear, the patient was attacked with vioof the tumour into the vagina. For this lent inflammation of the throat (angina latter purpose he administered the secale tonsillaris), which threatened suffocation. cornutum, but without effect. The general This inflammation was subdued by proper symptoms now became more pressing; comeans, and the catamenta reappeared in pious discharge of foul mucus: severe cough four weeks, but wore, on several occasions, and pain in the chest; watery diarrhorn; in the course of the year, supplied by a rehectic fever &c. set in. An operation besturn of the anging: the consequence of this came indispensable, and was performed in repeated inflammation was an induration, with tamefaction of the right amygdala, The patient being placed in a demi-re-cumbent posture on the edge of her bed, the operator, who employed the instrument of Jorg, commenced by introducing the ex-tremities of the tubes, oiled, and furnished

Madame S. was married in her twentywithin eleven years; each labour was diffihours after delivery, and reduced the patient to a state of great debility. During her pregnancy, and while suckling her four first children. Madame S. was free from inflammation of the throat, but six weeks after her last delivery this affection returned on three several occasions. After a lapse of two years, the patient, now thirty-six years of age, was seized with severe loss of blood from the uterus, with pain in the hypogastric region, and a dragging sensation in the loins. From this period the hemorrhage was repeated, at first every six or four months, and, latterly, every three or four weeks, and was always preceded by some mental contrariety. She now complained of increased debility; pain in the lower part of the abdomen; difficulty of making water; the bowels were irregular, and, from time to time, a pricking pain was felt in the mamma. The inflammation of the throat did not reappear.

In this state the patient continued for several years to lose a large quantity of blood. In the month of October, 19 during an effort which the patient - a large body was suddenly neglecte. beyond the external labin, with a distinct for a particular of the control of

stook the disease for inversion of the sterus, and after vain attempts at replacing the organ, recommended astringent and tonic remedies.

These means were of no benefit, and in the year 1830, Dr. Buck was called on to visit the patient, whom he found excessively reduced by the repeated floodings; her body was covered with a cold clammy sweat; she complained much of giddiness inche head, and a periodical dragging feel in the right thigh; the face was pale; the eye dull; the pulse small, frequent, and intermitting; the nights were disturbed; the bowels very costive; the excretion of urine frequent and painful; the blood discharged was sometimes dark and clotted, sometimes thin and watery. On external examination the abdomen seemed soft, even a hand's breadth above the right ileum, where the patient complained of a constant dragging pain not increased by pressure. There was no trace of depression or curvature above the pubic symphysis; the vagina was occupied by a round body as large as a closed fist, quite insensible to pressure, and of a firm smooth surface. The tumour did not yield under compressions, but was compact and dense. The pedancle, two inches in thickness, was not completely surrounded by the os uteri. Where the extremity of the peduncle joined the vagina, there could be felt above and somewhat to the left side, a semilunar, slightly elevated and tumefied edge, with a depression, but everywhere else a flat retiring angle. It was impossible to introduce the finger, or a probe, into the depression. The author considered the body to be a polypus, which was attached to the neck, and by its pressure had closed up the os uteri.

Although this body had been considered by most of the patient's medical attendants as complete inversion, with prolapsus, of the nterus, while the state of the os tince rendered the diagnosis still more difficult, yet two principal reasons induced the author to adopt the idea of a polypus: first, its insensibility to pressure with the nail, a circumstance never observed in the uterus; and. secondly, the manner in which the tumour made its appearance externally, for complete eversion of the uterus is inconceivable. except immediately after delivery; and the patient's last child was twelve years old, and the symptoms did not commence until three years after her last labour.

The removal of the foreign body was evidently the only remedy from which any benefit could be obtained. The general th of the patient was first improved by

the local treatment consisted in washing the parts with cold water. By these means a repetition of the flooding was prevented, and for six weeks the patient was attacked only twice, while the general health im-

proved in proportion.

A ligature of silver wire was passed round the temour, about an inch from the extremity of the peduncle; in about twelve days the tumour began to soften and come away in a sanguincous, purulent, foul discharge: on examining the vagina, the vaginal portion of the uterus, which in size and properties resembled an organ a few days artic delivery, was found in a normal state, filling the cavity of the sa-crum; the os uter had an irregular angular form; some fragments of the polypus adhered to the anterior lip, and were partially removed by the finger; the rest came away with the pus.

Six weeks after the operation, the patient, who for ten years had remained free from any inflammation of the throat, was again attacked with this affection in a very severe degree; however, the symptoms were removed by a treatment with mercury and camphor. During the six months which followed the operation, the patient had no flooding whatever; the catamenia then appeared, at first somewhat abundant, but natural afterwards. At the present day, five years after the operation, Madame S. enjoys perfect health.

Case 3 .- A female, originally of healthy constitution, forty-four years of age, whose catamenia always were regular, though somewhat profuse, gave birth, within a period of thirteen years, to three healthy children, of whom the youngest is six years old. Her husband, a powerful man, forty years of age, was seized about two years previously to the present period, with an erotic monomania, under the influence of which he had connection with his wife more than four times a day for the space of a fortnight. Immediately after this the menstrual discharge became more profuse, the intervals more short, and since April, 1833, a constant discharge took place from the vagina, of blood, or whitish mucus. If we except a more frequent desire to pass water, the patient suffered under no local pain beyond an uneasiness about the pelvis; the appetite, bowels, sleep, &c., were regular. The flooding however continued, and Dr. Buck saw the patient in the summer of 1833; she was now very much reduced, the countenance pale, and the temper very irritable. The loss of blood was moderated by proper regimen, alum, bark, and the attents to complete rest of mind and body; mineral acids. On examining the vagina, the took internally an infusio summit milliabilit and acids. With mineral acids, bark, labelit and area, with mineral acids, bark, found swollen, and hard; the os tince and from the found was given in the even-somewhat dilated; those symptoms, joined lags, and the bowels regulated by Rements; to the obstinate nature of the disease, induced the author to diagnosticate a polypus still enclosed in the body of the uterus. One evening, the flooding, which had been suspended for ten days, having returned with increased violence, the patient began to experience severe pains, similar to those of labour, which continued with brief intervals for about an hour and a balf; after the expiration of this time, the author recognised by the touch the presence of a large, hard, pyriform, perfectly insensible polypus filling the vagins.

The operation was performed in this case as in the two former; the ligature came away on the sixth day, and the remnant of the tumour was easily extracted from the vagins. The polypiss had lost nearly half of its volume, presented a yellow-white surface, a fleshy consistence, and was lined with a smooth miscous envelope. All discharge now ceased, and the patient recovered her former health under the use of strengthening remedies, bark, colombo root,

tinct. ferri acetici æth., &c.

The above cases of uterine polypus are calculated to give rise to some reflections of a practical nature which are not without interest. Whenever a female is subject to any discharge from the vagina, whether of blood, or mucus, or not, it should be an invariable rule with the physician immediately to examine the state of the uterus and internal organs of generation. In the first of the cases now before us, the true nature of the disease had been mistaken for a length of time, and the patient's life brought into great hazard. In the third, the ordinary symptoms of uterine polypus were altogether absent; however, the state of the os uteri, and the obstinate nature of the discharge from the vagina, led to the idea of polypus, and the progress of the disease soon removed all doubts upon the subject-The process by which a polypus makes its way into the vagina is not a passive one; the tumour, distending and stimulating the body of the uterus, produces an action similar to that of labour; the neck of the uterus is effaced, the os tincæ softens and becomes dilatable, labour pains more or less severe set in, and the foreign body is expelled into the vagina with many of the symptoms of true labour. This is well illustrated in the third case, where the period of time during which the tumour was being expelled. lasted for an hour and a half. In many cases, however, the passage of the polypus through the os uteri is not accompanied by any very remarkable phenomena.

The possibility of placing a ligature round

TOTAL OF the foreign body. merus, and whenever the os steri is moderately dilated. is fully established by the first case we have reported; and the operation is indicated whenever the uterus is not sufficiently irritable to expel the tumour into the vagina, while the life of the patient is endangered by the constant loss of blood. This passive condition of the uterus is even favourable to the success of the operation, from which we should not be deterred by any idea of its difficulty. The presence of a polypus in the cavity of the uterus may be concluded when, under the circumstances alluded to, we feel an insensible moveable body through the dilated os uteri. As long as the polypus is closely embraced by the uterus, and the os tincæ contracted, the symptoms are generally of a mild nature, and we are not called on to interfere in a case where all operation would be impossible.

Experience also proves that we are not to adhere too strictly to the opinion of some writers who reject the operation whenever the general health of the nationt is very much deteriorated: when hectic fever, with anasarca, diarrheea, vomiting, &c., have existed for any time. The first and second cases prove that under these unfavourable circumstances the removal of the polypus, so far from hastening the patient's death, may be speedily followed by rapid recovery. Writers generally describe polypus of the fundus uteri, as being attended with severe flooding, while those which arise from the neck or os tincæ produce little or no loss of blood, but rather an abundant fluor albus. This rule admits of several exceptions. Times in the two first cases we observe exactly the contrary. In the first the polypus was attached to the fundus uteri, the organ itself was relaxed, and the os tincæ dilated, yet the hemorrhage was moderate, and during the last six weeks nothing came away except a quantity of mucous fluid; while, in the second case, where the tumour was atached either to the cervix uteri or one of the lips of the os tincze, the floodings continued with great severity for ten years, yet the tumour was not of a spongy nature, but This circumstance gave no certain editor-tion of the point into which Theolypus was inserted, which we can not determine. without . Seated and careful examination.

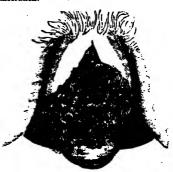
NAL CYSTOCELE

The following is a curious case of very re disease :-

Case.-A woman, 54 years of age, appaintly of good constitution, gave birth to her cond and last child twelve years back. he labour was difficult, and the midwife, ecording to her own account, obliged to move the placenta. The patient, however, sed through the first few months withut any accident, but in the following years ie frequently experienced a sensation as if vacuum were suddenly formed in the lower art of the abdomen by the descent of somering which caused a pressure in the vagina, pined to pain. These sensations continued or some years, when one day she felt a ound firm body in the vagina, which beame more palpable whenever she made any odily exertion. After the lapse of a few ears this body protruded externally beyond te orifice of the vagina, and was at first asily replaced by the patient. At length, owever, the tumour became more enlarged, ithin the labia externa. There was no ifficulty of making water; in this state she ontinued to suffer for three months, until redical aid became indispensable.

The author, Dr. Buck (whose "Observa-The lower third was free from excres- tural position. pon the tomour. The disease

nosticated as a complete prolapsus of the uterus, which, in consequence of the contact with air, urine, &c., had taken on cancerous ulceration.



Several surgeons and acconcheurs by ud she found it impossible to return it whom the patient was examined being of the same opinion, it was determined to oberate the removal of the tumour by carefully dissecting away the vagina from its connections with it. The intestinal canal being emptied, and the patient placed as in the ions" we are still analyzing), on examining operation for lithotomy, several assistants he organs of generation found a hard body endeavoured to introduce the catheter, with-s large as a seven-months' child's head ont success, until Dr. H. having by chance rojecting beyond the external labia. The turned the instrument in a nearly perpen-amour was everywhere dense, and covered dicular direction, passed it into the bladder, early all over with cauliflower excrescences a thing which certainly would not have thich produced a foul and ichorous secre- taken place had that viscus occupied its na-

ence, of a deep-real colour, and closely re- This circumstance threw some doubt for embled in appearance the vaginal segment the first time on the nature of the accident, f the uterus. A probe was introduced, half but as the end of the catheter could not n inch deep, into a transverse slit, which he felt externally, while it was discovered at as considered as the os tince. On passing the posterior wall of the tumour by introduction finger round the tumour, which very ing the finger into the rectum, the displaceasily bled and seemed closely united above ment of the bladder was considered as havthe lahia, it was impossible to introduce ing followed that of the uterus, and the opeie finger further than a blind angle that ration was continued. An incision of several verywhere circumscribed the fungous mass. 'inches was made into the thickened wall of he vagina, everted and prolapsed, seemed the vagina, underneath the tumour, and the cembrace the body of the tumour, and had latter dissected away with the bistoury, conontracted so close an union with the mem- stantly turned towards the swelling, lest the rane of the labia as to form nearly a straight rectum might be injured. However, inne to the perineum. On examination by stead of arriving at the substance of the rectum no trace of the uterus could be uterus, as was expected from the directum, the finger penetrated above into tion, the operator fell upon true muscular thick sac, appraisently the everted vagina fibres, where the catheter could now be felt, 'he author attempted in vain to introduce as a firm envelope, at least one quarter of an se catheter in the ordinary manner, as the inch thick, had been removed from the turifice of the urethra was excessively pain- mour. These two circumstances rendered and closed by large vegetations; besides, it evident that the tunour was in great part, no. "no was secreted in normal quantity, at least, composed of the bladder, without its at the temperature of the bladder, without its profession of the process of volume on the latter was any connected with the uterus. Another includes the produced by pressing som was now made, superiorly, near the vas diag orifice of the urethra, and continued down

to the first one; and the external coat of hard fungous masses was dissected away without the bladder being injured. The catheter could now distinctly he felt at all points of the parietes of the tumour, which had lost half of its volume, and being freed

from excrescences presented a smooth surface; it was partially replaced after a few gentle attempts, and the patient put in bed. She passed the first days pretty well; the

pain of the wound was slight; the appetite moderately good; the abdomen free from pain and not tumid. These favourable symptoms continued for more than three weeks after the operation, when the appetite began to give way. The patient became feverish; the edges of the wound dry and red. A colliquative diarrhoss now set in, and carried

off the patient on the sixth week.

On examining the body after death, the tumour which had been mistaken for the uterus was found to be the bladder, the inferior and posterior walls of which, clothed by the vagina, had gradually descended and projected beyond the great labia. The inferior part of the tumour, which still resembled the inferior segment of the uterus, presented a smooth surface, whose tissue was compact and of a cartilaginous consistence. It was necessary to make an incision of one inch and a half, from below upwards, to arrive at the bladder at this point.

The transverse fissure, which was considered as the os tineze, and contributed more than any other circumstance to the error of diagnosis, was formed by a peculiar fold of the vaginal mucous membrane, for which it is difficult to account. The extraordinary development which the vagina had attained in this case is worthy of notice; it was only the superior part, which in a normal position lies close to the bladder, that could have formed the exterior covering of the tumour. It is also evident that the bladder had not descended through a rupture in the parietes, amining the files at the newspaper agents of the vagina, since the latter membrane surrounded the tamour on all sides. The portion of the bladder which was displaced, was degenerated and thickened; the fundus, covered by the peritoneal tunic, still lay in the cavity of the pelvis, and was nearly in a healthy state. The uterus was also normal, but situated a little higher than it should have been in the hollow of the sacrum. If we reflect on the external appearance of this tumour, and its great resemblance to the inferior segment of the nterus, the persistence of volume, even after the turine was drawn off, and the absence of all symptoms that usually indicate an injury of the bladder, the difficulty of forming a correct diagnosis will be easily conceived. The treatment indicated after the error was recognised, consisted simply in removing the cancerous portion of the vagina, and returning, as far as was possible, the tumour to its natural position.



London, Baturday, March 19, 1836.

WHAT is to be done with the tax unon quackery? This question is now heard in every intelligent medical community. The answers to it are various, but all the experienced practitioners seem to agree in the opinion, that if an ANTI-MEDICAL-QUACK-ERY Society could be established, and could be brought into general action throughout the country, the downfall of empiricism would be rendered more certain by the operations of that society than by the influence of an Act of the legislature. If such a society could be established, what in the name of common sense is to prevent its establishment, but the apathy and indifference of the profession to their own respectability and interests, and to the health and security of the community. Behold what the KING OF THE QUACKS has done by his complete organization. He has a focus of action,-a den, where all his imps of mischief assemble, and receive their orders for the distribution of his universal poison. The organization of his system is complete, and it branches out into the whole of the provincial press of the country. On exin London, we find that nearly every country paper contains columns of advertisements, all puffing the wondrous efficacy of the "Universal Pills." These advertisements are also all dignified with "testimonials" in favour of the Quack and his system, from certificated members of the medical profession. All these things are seen. They are placed in bold relief before us, and the evil consequences are manifest in the increasing business of the undertaker; the public continue to be deluded; the poison is still swallowed by bushel- the science of medicine is degraded and insulted; and yet there are members the profession," ev a with heavy locks, who poolly

end bethe tit.

"and then significantly infiniste that "somet" g might be done, if an antiquackery society could be established." Observe. The quack wields but one instrument in accomplishing his object. That instrument is the press, which vomits forth, with horrible and destructive rapidity, advertiments, tracts, and even numbers of a periodical, in support of his nefarious projects. All his means, all his appliances, being concentrated in the powers of one instrument, that instrument is then brought to bear upon one material, namely, the ignorance, or, in other words, the credulity of the public.

What considerations, then, can deter the members of an honourable profession from boldly grappling with the monster FALSEmoon, in the very scene of its birth and activity? The public mind should be disabused, and there are no means so ready. or so efficient, for the accomplishment of this object, as that of resorting to the allpowerful aid of the press, which, by polluted hands, has been rendered the source of so much national mischief. "If an ANTI-MEDI-CAL-QUACKERY SOCIETY could be established,-why then, why then"-Oh, how sickening are these doubts and difficulties, where nothing but energy and common sense are required! If the Society were but in existence, what then would be the conduct of the guerists? Why they would instantly become subscribers, and obtain from the secretary a supply of tracts containing descriptive accounts of the last moments of the persons who had fallen victims to the use of " universal vegetable medicines," and accounts of the thousands of deaths which have been caused by the use of secret or quack medicines, in general. The best evidence of what might be the results of a combined tivity on the part of the members of the ion, thus directed to the diffusion of useful ki. xledge among the people, is almendy found in e fact, that in, those distraffs where if a actually known o the in-

to be habitants, that death has ensued from taking the "vegetable medicines," there the an antiale of the horrid stuff has been almost blished."

"Oh, but," it will be remarked, "the in"creasing intelligence of the public will, of
"itself, prove a sufficient corrective for the
"evil of quackery."

The persons who speak thus are themselves but sorry examples of the soundness of their own opinions. If man had been created on the 1st of last January, and if we had positive proof that he did not commence thinking in a rational manner until Monday last, at about nine o'clock in the morning, then, indeed, a hope might be entertained that the rapid growth of intelligence would lead to the substitution of a sound belief for a credulous faith. In short, REASON Would eject IGNORANCE from its throuc. How, we would ask, is the growth of intelligence to be promoted, unless the young plant be nursed and cultivated by wise and experienced hands? If credulity with respect to quackery existed only amongst the uneducated, or in the ranks of the poorer classes of the community, the apathetic might find some justification for their supineness; but when it is proved to demonstration, by what happened in the case of John Long, as well as in that of Monison, and the advertising disciples of HAHNEMANN, that the aristocracy of the land are the victims of misbelief with respect to the philosophic principles of the science of medicine, and are credulous, beyond conception, in all matters which have reference to the professions of quacks and the curative powers of their nostrums; we say that circumstances have arisen amongst us which demand the most energetic and powerful combination on the part of the profession, in order to exterminute an evil which has been, and still is, productive of so many fatal consequences to the community.

In considering this subject one thing must always be borne in mind, namely, that the means which could be employed for the and this publication and the dissemination of truth, are up of rational and list convictions, and veg. as much or even more at the disposal of the when the result of their conviction is only members of the profession, than they are at apparent in apathy, -when all the energies the disposal of a quack, whatever may be of the intellect are required to avert a the wealth which he has contrived to ex- frightful evil.—a conjecture is raised by the tort from the pockets of the people. Here, supine parties, that other persons who have then, we have at least ten thousand mem- no conviction,-who have only an absurd bers of an honographe profession, men of faith for steadying their principles, will enscience, moving in the highest ranks of deavour to convert what they do not regard munity, if there exist in the minds of medical practitioners a high-minded feeling regarding what is due to the profession to which they belong, and to the health and welfare of the nation, they will rise en masse against the miscreants who dare to wrest from them their privileges, and who are making the press a wide-spreading source of pollution to the public mind. Some there are who may look forward with confidence to what may be done by the House of Commons for the suppression quackery; but the day, we fear, is distant, when that House will act as it ought in such an emergency. Unfortunately the members of that assembly are not proof against ignorance in medical matters, and there are honourable gentlemen in that House who believe that their own valuable persons have been preserved for the benefit of the existing generation, and their talents for the advantage of posterity, by the careful and continual use of " Huxham's Tincture of Bark!" But what just ground can the members of the medical profession have for believing that any other body of men will exert themselves effectually for the suppression of medical quackery, while they themselves remain inactive? Who are the best judges in this matter? Assuredly medical men. Their opinions on the subject are formed after extensive research

society, and yet, can it be believed, they as a calamity into a public blessing! The allow TRUTH to experience the worst of a supposition is really monstrous, and is only contest in an honourable struggle with another indication of that unsound state of FALSEHOOD. The exhibition is a scandal understanding which, at the present peto the profession; and really, if there be riod, is but too prevalent among all classes any esprit du egres in the medical com- of society. We repeat, that it is in the power of the members of the profession, by a slight degree of organization amongst their members, to annihilate the pretcusions of quacks, and their odious slaying nostrums. In showing how that organization could be effected, we, at any rate, thus far, have discharged our duty, and if medical gentlemen will but co-operate in the manner we have explained, they shall not stand in need of the aid of THE LANCET towards giving efficiency and universality to their exertions.

ROYAL DUBLIN SOCIETY.

THE Royal Dublin Society has at length crossed the "Rubicon." By a vote of its members at a meeting recently held in Dublin, it has announced its determination to set Lord MULGRAVE, and the voice of the Irish people, at defiance. The wise and reasonable propositions submitted to the Society by the under-secretary for Ireland, Mr. DRUMMOND, were indignantly rejected at that meeting by a large majority. It was scarcely to be expected that there would be even a small minority to stand between the infuriated orange maniacs of the Society and their own destruction. What will be the result of the step thus boldly taken he them it is not difficult to conjecture . An we consider that the contest in be son the most impotent cotorie of the fallen orange est popular faction in Loland, and the gilled v' doy that ever stabled over t

There hest acquainted with both, for that ject for which this Society was established) rash termination of its political existence are owing, not to the suburban husbandry of to which its late measures must hasten it. the "gentlemen farmers" of that body, but Made up principally of the elite of the to the gradual progress of intelligence in orange squirearchy of the city and the this and in every other class of society in counter parts of Ireland, they have too long that country. We may venture to affirm drunk from the intoxicating cup of misrule that the simple introduction of the Scotch and bigotry, to yield without a struggle to plough and the Scotch drag, has enriched the dictates of reason and prudence. Like more fields and reclaimed more waste their desperate allies of the Irish corpora- lands in Ireland, has conferred more subtions, they would prefer the annihilation of stantial advantages on that country, than a Society, the advantages of which they all the lectures ever delivered by WADE pretend so much to respect, to its falling or by Lirron. We well recollect, indeed. under the management of the national mind, the anecdote of a gentleman who informed We have heard it stated, indeed, that the us that, walking one day through a farm charter of the Society warrants the course occupied by one of the Society's most scienwhich its possessors have pursued, and that tific husbandmen in the neighbourhood of in the exclusion of liberal men, only a Dublin, he inquired of a rustic neighbour legal right has been exercised. If, after whom he happened to meet, what was the what occurred in the case of Dr. Munnay, success of the owner. "Ah, Sir," was the the Charter really confers any such power, (reply, made with peculiar naiveté, " Mr.it ould be forthwith cancelled, and one is indeed an excellent farmer, and a very good pr. med on this topic, will, or ought to be, Of this Ulyssean species of agriculture, thus answered by the British Government; for if that Society, supported as it has been by grants from the national treasury, is to retain a sectarian or a political character, and to have power to exclude from its councils and its management, all those who happen not to entertain the same opinions as its present governors, then would it be better if the Society were altogether suppressed, than that it should remain a centre of dissension, and an instrument for the jassassination of character,-the most estianable in the country. The good which this Society has achieved for Ireland has, we perceive, been prominently urged as a proof of its proper administration, and as reason for its future preservation. We neither deny that it has accomplished some good, nor are advocates for its demolition. There can be no question that the labours of a society of this kind, under judicious direcwould be highly useful in the present freland; and we only express the present state, and being simply a spectacle feelings and wishes of the inimbitants when for the guze of the idle. Among the few we assert, that there are most anxious for its in Dublin who devote themselves to the

doubt forred by the institution have been grossly be suicidal capabilities of the Dublin in exaggerated, and purchased at souch too ution. Its composition and history were great an expense. The improvements at too well calculated to prepare those who made in the agriculture of Ireland (the obled on more rational principles should man, but the devil a one ever saw a stack of bstituted. The sophistry spoken and corn or a rick of hay in his haggard yet!" "ploughing the sand and sowing it with salt," the Royal Dublin Society achieved quite enough to incur the contempt of every practical cultivator in the country. It is only within the last eighteen months that a portion of the Society's Garden has been appropriated to the cultivation of the best kinds of fruit trees, garden vegetables, and field crops,-an object which, though particularly belonging to the Society, was previously much neglected. Every visitor of their garden must have observed that it had been falling for years into a state of ruin and decay; and if it now wears, as it certainly does, a different aspect, the improvement is attributable rather to the faste, the intelligence, and the attention, of the present conservator, than to the exertions of the Society itself. Then, if we look to the museum, we shall find it to be one mass of ignorant confusion from beginning to end, answering no kind of useful purpose in its well aware that the benefits are the plaint that the arrangement and nomenclature render the specimens and pre-paration, almost valueless. Let the telling them like if they desired as re-Society had for many years in pay a Ireland, they should commence the re man who had obtained in Ireland the easy reputation of a naturalist. The evidence he has left behind him seems to prove that he was either incompetent to the duties of his office, or too much occupied with the mysteries of "Orangeism," to attend to those of nature. An attempt, we understand, is now being made by Dr. Scouler to repair the discussion and diffusion of rancorou the errors and neglect of his predecessor; and anti-national politics, and the labour but much time is likely to clapse before so of its professors were turned into a jest. It difficult a task can be accomplished. It is unnecessary to detail the other neglects and misapplications of the funds of the Society. Those errors are, after all, secondary to the great question, whether the Society, with its present constitution, is calculated to effect the proper objects of such an institution. No one who comprehends the state of political feeling in Ireland, or the composition of the Society, will answer this question in the affirmative. To effect its legitimate purposes, the Society should possess the confidence of the people whom it purposes to instruct, or every effort to diffuse information among them, and improve their condition, will be fruitless. It was in a great measure the absence of a mutual feeling and good will between the Society and the people, which circumscribed within such narrow limits the influence and advantages of the Institution. To no purpose is the machinery of instruction exhibited, or the usual mode of communicating information adopted, while the guiding spirits of the didactic pageant are, in most instances, the judges who "charged" against the the same uncompromising and impartia liberties of the country, the crown-lawyers who hunted down its miserable population, the proprietary who expatriated them by conclude these remarks without advertin thousands, and the corporate burgesses who to, we believe, the only defence of the Sc carried with them into the Institution the same exclusive principles which made them objects of detestation to their fellow-citizens subject. Had these letters been written h ont of it. The ardent and sensitive temperament of the Irish refused to receive Society, the public would, of course, knoproffered favours from such hands, and the how to appreciate them at their prope community consequently left the junto in value; but coming from a writer profession the solitary enjoyment of those treasures of liberal principles, and, from his connection which the Society was intended to be the presumed to be sincere in his profess steward, and not the monopolist. The peo-ple of Ireland responded to the invitations their duplicity, and the ignerance of the of the Society to receive improvements at who saw read and its hands, as Demetrius replied to the Areo-them. Als, however, metaly sufficient t

mation at home. Unsupported by put's opinion the Society languished, its tia and means were wasted in unprofitable an oftentimes mischievous trifling, its lectur rooms became the lounge of the idle or th fashionable, its news and committee roon were converted into convenient centres for this spirit which so successfully achieve those evils which an ultra-party of big in the Society wish to perpetuate, as which it is the duty, as we believe it to I the inclination, of the present paternal go vernment of Ireland, to prevent. Suppor ed by the voice of a people anxious for in provement, and demanding but simple equa lity and justice, the Government are calle upon to defeat the malicious attempts : this faction to convert into a mere sociand political club, an institution and a pro perty created for the most part out of th public funds, and intended for national put poses. The Society, to be of any real advar tage to the country, must be liberalized, ar so constituted, that the religious or politic opinious of amember or of a professor sh. form no impediment to the admission the one, or the appointment of the oth For the attainment of this reasonable ., ject, the people look with deep, though coparatively silent, anxiety to the head of t Irish Government, who, in the adjudication the question, we have no doubt, will displa policy which has characterized all his mer sures since his arrival in Ircland. We cannot ciety which has appeared in print. W allude to the letters of Dr. Meyler on th an avowed Tory, or a known partisan of the n influenced t HRIDI

philosophic loyer of his ry, has made the pages of the "Mail" rehicle of his lucubrations, in order to ve them of their misguiding tenden-Was there no other medium in Dubin through which this ardent philanthropist could make known his love of country and his convictions of the utility of the Society? Were the columns of even the "Post" too ool folthe communication of his warm and benevolent feelings towards his benighted untrymen? Should he again, however, ke up the pen in defence of the Society, it ill. we apprehend, be not necessary to do which, in the first instance, was the juty of an honest man - to inform his readers to what party he really belongs.

ERINENSIS.

Dublin, March 10, 1836.

Hospital Statistics.—The fourth number of the first vol. of the Medicinische Annalen (German journal) contains a review of the medical clinique of the University of Heidelberg for the years 1832 3.4. The following stabilitial results may serve as a term of con-parison with those of our own hospitals. The number of patients treated during the sove period was 1401; the deaths were 62, civing a proportion of mortality as 1 to 145:366. The number of externe patients be ted was 1684; the deaths 83, or as 1 to p. 44.

et.

REJUDICE VERSUS SCIENCE .- To the Easter. - Sir: In further explanation of the farticle in The Lancer of March the 5th, No. 653, under the above head, it should be generally known, that three converted Jews have been appointed professors to King's College, London, for teaching the German, Spanish, and Hebrew languages. Neither of them has had a university education. Mr. Bernays, the professor of German, bought, since his appointment, a diploms of doctor of philosophy at Giessen, a university in the Grand Duchy of Hesse, but he never was entered there as a student. He taught first, in this country, in a Jewish establishment of Brixton. ** I am, Sir, your : obedient servant,

A CONSTANT READER.

The latter part of our correspondis there we have omitted. We cannot prove the statements which it conthe. Will restall to the former part, we systate that the table handles to the letter been attacked by paracless, to should we reverse to a monatorial the tri-

umph of Science versus Parsudice. To, divine, however, the principle on which is catholic institution receives into its both converted Jews, and rejects faithful Christiaus, is beyond our power.

LETTER FORM MR. HENTSCH.

To the Editor .- Sir : In your last week's number you gave a report of the meetings of the governors of the Free Hospital, held at the Gray's-inn Coffee house, respecting the dismissal from office of Mr. Tweedie and myself, which report contains (no doubt unintentionally) several inaccuracies,+ one of which, concerning Mr. Tweedie and myself. I beg leave to point out to your notice. Mr. Marsden is reported to have said that "since the publication of the testimonials. several subscribers had seceded from the charity, believing that the officers were encouraging quackery, and a representation of the fact was made to Mr. Hentsch and Mr. Tweedie, and a sort of promise obtained from them that the cause of complaint should be removed, but without realization." Now, Sir, this is incorrect. Mr. Marsden did not say so at the meeting, nor could he, such not being the fact. Neither Mr. Tweedie nor myself ever made a "sort of promise" that the cause of complaint should be removed, it being quite out of our power to compel Mr. Franks to cease publishing them. The insertion of the above in your next will much oblige, Sir, your obedient scrvant,

WM. HENTECH, Late Apothecary to the Free Hospital. 3, Furnival's-inn, Holborn;

3, Furnival's-inn, Holborn; 16th March, 1836.

t " Several" should perhaps be " one,"-ED. L.

LETTER PROM MR. TWEEDIE .- We have also received a letter from Mr. Tweedis, addressed "To the members of the medical profession," but at a very late hour in the week, and extended to a length which would render it impossible for us, from our arrangements, to give it insertion in this number of THE LANCET. However, we object to publishing what would, we fear (unintentionally, we are sure, on Mr. Tweedie's part), prove a very profitable advertisement of a quack medicine, even the name of which we decline again to admit into our pages. Our late report of some late proceedings at the Gray's-inn Coffee-house are stated, in a note to the Editor from Mr. Tweedie, to contain "two or three serious imperfections;" but these have not been specifically mentioned by him, or they should

[&]quot; Catholic, Relating to the church of Christ."-

INDEX

TO

VOLUME I.—MDCCCXXXV—XXXVI.

Arbonen, crushing of, 18. Abdominal tumours, 180. Abercrombie, Dr. degree of, 641. bscess in the perineum, 295. aphalocyste of the brain, 45, acne induiata, creosote in, 193. aconitum as an emmenagogue, 86. Adder, suicide of, 63. Advertisement, professional, 837; of quack pills, 880. "-pump in strangulated hernia, 58. Florsgate School of Medicine, 5. Ashis's Clinical Reports, 110. Almanack, British Medical, 392. Alexander, Dr., on infantile remittent fever, 99, 493,

Amaurosis from suppressed passion, 569. · morrhos, sinapisms to the mamma in,

putation, below the knee, 95; of the arm,

putations at Breslau. 57.

assat, M., on artificial onus, 256; on traumatic bearinghage, 450.

Ar sarea, idi pathic, 436; with other dise 685.

tm my in freland, 877.

onal, Professor, course of loctores by, on Diseases of the Brain and Nervous System: -LECTURE 1 .-- Introduction .- The peculiar difficulties which surround the investigation of nervous diseases; points to be weighed in considering the causes of those diseases; their complication with o her discuses; extreme obscurity of the ir path lo. v ; modern changes in their "moter; the senses of observation Pleas in their study; difficulties And by the disposition to theorize; de of the nervous force not generally different changes or lesions boin, producing nearly identical the brain not a single organ, telleby a vital unity; difficulmaies, by the same leison of the brain peing the most varied armptoms. the complications of sympathy; modifying influence of age; the great majority of the diseases of the nervous system present no perceptible changes of structure; reasons why pathological anatomy is at fault; chemical and nutritive changes of the brain; indications of the treatment of nervous diseases; influence of imagination; means of clearing obscure points in the pathology of the nervous system; order and spirit to be observed in the present course of lectures, 353.

Brain,-The various anatomical or pathological characters of cerebral hyperemia; considerations to be observed in examining its morbid appearances; influence of atmospheric temperature in producing cerebral congestion; other atmospheric effects; effects of stimulunts and narcotics on the brain; cerebral congestion from diseases within the brain; from affections of other organs; from v-nereal pleasure and abstinence. age, and mechanical forces; general symptoms of cerebral congestion; first variety . r form ; second, or coup de sang ; third, bemiplegia; fourth, paralysia; fifth, farious delirium ; different symptoms of cerebral desage; attempts to localize the corebral functions; con estion and other affections of the ce ebellum; conge tion of the spind marrow; terminat one of cer bral congestion; indications of treatment, 393,

LICTURE 4. - Encephalitis .- The most striking phen mens in the disturbed functions: lesions of the digestive and circulatory apparatus; lesions of respiration; modifications of symptoms; the three varieties of acute encephalities; practical importance of his division; deration and term nation c, the disease; treatment by bleeding and cold; different modes of applying cold; revulsives a d purgatives; mercury, is calone a specific in inflammation? character of the chronic orm of the t se; chronic inflammation of the cer-(Note to this lecture)-

the term encephalities, ayuntoms as lating the disease; three divisions it austomical characters and causes, 681.

11-1

LECTURE 5 .- Myelitie, or Inflammation of the Spinal Marrow - Division into a ute and chronic; anstomical characters, and parts which it attacks; causes and symptoms; lesions of motility; lesions of sensibility in the neighbourhood of the spine; in distant parts; diminution of sensibility in the disease; difficulty of deglutition and articulation; derangement of the digestive functions; of the circulation and respiration; modifications of the secretions; effects of the disease on the organs of generation; diagnosis; di-eases simulating irritation of the spinal marrow, according to the views of Messrs Griffin and Ens; duration, termination, and treatment of myelitis,

LECTURE 6 .- Anemia of the Brain and Cerebral Hemorrhage. - (1. Anemia) -Its simulation of hyperemia; anatomical characters; symptoms; delirium; delirium from withdrawing stimulants; disturbance of sensibility and motility; treatment. - (2. Cerebral Hemorrhage) -Impropriety of using the term apoplexy; parts of the brain in which it occurs; meningeal apoplexy; sanguineous cerebral cysts; appearance and source of the effused blood; period when cicutrization is effected; state of the brain near the effusion, of its mass, and of the m mb anes : causes and periods of corebral hemorrha, e; influence of a diminished aortic culiber; changes in the venous circulation; general pletbora; sex and age, 521.

LECTURE 7 .- Cerebral Hemorrhage (continued) -Symptoms of actual effusion; premonitory symptoms; the disease without them; symptoms depending on other morbid changes than effusion; case of effusion without a symptom of that lesion; paralysis as a symptom; case without paralysis; intermitting paralysis : hemorrhage into the cerebral hemispheres; bemislegia and its indications; sixteen cases of hemiplegia occupying the same side of the body as the lesion in the brain; inquiry into the portions of the brain sever-liv influencing the upper and lower extremities; effusion upon the brain as affecting motility; lesions of the pous varolii.

LECTURE 8.—Cerebral Hemorrhage (continued).—Lesions of Motility and Sensibility.—Does paralysis follow this lesion? On which side is it?—thirty-two cases of this lesion; which lobes the effusion occupies; hemorrhage into hoth cerebrum and cerebrilum; effusion of Mood into the spinal murrow; paraof muscles of the eves and cheeks;

and the blad of arminations of paralysis order of its disappearance; lesions of sensibility in the brain itself; modifications of sensibility in the skin and mucous membranes; disturbance of the organs of various portions of the brain particularly affected; blindness from the disease; modifications of hearing, 601.

Pals. . Prince ration .

LECTURE 9.—Cerebral Hemorrhage (continued).—Lecions of Intelligence.—Lecions principle of the Heldigence.—Lecions principle of the intellectual faculties at the moment of effusion; differences in the seat and extent of hemorrhage; no such lesion in spinal hemorrhage; state of the intellect after the effusion; affections of the speech, circulation, respiration, and generative organs in cerebral hemorrhage, 649.

Lecture 10.—Cerebral Hemorrhage (cocluded).—Peculiar Varieties.—Symptoms attending cerebral hemorrha, which do not seem characteristic of first class of symptoms; contraction arspansmodic affections of the limbs; there treatment; impulses to advance and treat; delirium and somnolency attaing apoplexy; symptoms uncome of with cerebral lesions; duration and ; gress of apoplexy; other varieties; treatment; abuse of venescrition, attenorby ralysis ca, ecially; prevention impoplexy; hypertrophy of the brain, 72.

Legaune 11.—Hypertrophy of the Newboas Centres.—Anatomical character of by-pertrophy of the cerebrum; co-by-pertrophy, with and without an ment of the cranium; causes tavo, the lesion; periods of occurrence, an symptoms; lesions of intelligence, sensibility, motility, respiration, and cillation, in cerebral by-pertrophy; its divisions into the chronic and acute periods; varieties and treatment; partial hypertrophy of the cerebrum; hypertrophy the cerebellum, and its influence on t genital apparatus; hypertrophy of spinal marcow, 761.

spinal marrow, 701.
LECTURE 12.—Alrophy of the Brain and Spinal Marrow.—General description distribution into congenital and grad acquired atrophy; great domination the nervous centres; symptoms changes in the ossessus parietes; chydrocephalus as one form; central following atrophy; seconds the brain normal but very sand from deposits in the basic that mark lible gradient to coreferon in particular, particular, and show the last class entire absence and second descriptions.

cerebral lobes; absende of

the posteor horn of the lateral ventricles; simplydiminution of the cerebral Animal kingdom, Treviranus division of, volume; aborce of the thalami and corpora strie; ages most subject to cerebral atroly; atrophy of the white central part and the pineal gland, 809. LECTURE 13. Atrophy of the Brain and Spinal Agrow (concluded).—Acrophy

of the pus varolii; measurements of the brain; atrophy of the cerebellum; complete absence of the cerebellum, and its inducace on the genital organs; sim VAphonia, case of, 903. fule diminution of its volume; atrophy. Apoplexy of the lungs, 101; inquests in cases of one side of the cerebellum only; of, 392; during pregnancy, 882. atrophy of the cerebellum conjoined; entire absence of the spinal chord; imperfections and diminutions in that chord; atrophy and absence of nervous protuberances; atrophy of the medulla oblongatu; ramollissement of the brain,

LECTURE 14 .- Ramollissement of the Nerrous Centres .- Anatomical appearances, in softening of various parts of the nervous pulp; variations chiefly in colour; lesions whose nature is wholly unknown; different seats of ramollissement in the cerebrum, in the hemispheres, in the central and deep parts, in the cerebellum and spinal marrow; causes of remollissement; common to all periods of life; symptoms, accompanied by derangements of intellect, of motion, and convulsions.

LECTURE 15 .- Ramollissement of the Nervous Centres (continued) .- Ramollissement, with contraction of the muscles; paralysis, convulsions, epilepsy, tetanus : lesions of motility and sensibility; readache; lesions of sight, hearing, and the nutritive processes; acute and chronic ramollissement, and their varieties; ramolissement without any symptoms; order of succession of the symptoms; affecting the same side of the body as the lesion in the brain, 921.

LECTURE 16 .- Ramallissement of the Nerrous Centres (concluded) .- Ramollissement of the central white parts; of the septum lucidum in particular; of the fornix and corpus callosum; peculiar phenomenon accompanying these ramellissements; their resemblance to acute Belladonna, preservative effect of, against hydrocephalus; ramo lissement of one lobe of the cerebrum; lesions of movement in that ramollissement; lesions of scusibility; general ramollissement of erobellam ; ramollis ement of the mesothe in the annual property anoplexy; ranollissement of the brain mass, 953. in the annular protuberance,

Marshral mass, 953.

of the wain, 522. Ma. 498.

Middle ir the posterior lobes; utrophy | Aneurysmal tumour of the orbit, treated by

Anti Medical Quackery Society, 949, 977. Autimony, tertarized, in pneumonia, 315; employment of, 882.

Antrum, disease of, 153. Anus, artificial, cured by a new process, 256; formation of, 561; produced by a wound, 571.

Aorta, diminished caliber of, 222.

Apothecaries' Company, regulations of, 11; effect of, 631; rejection of a student by, 636; meeting on the rejection, 668; address to, from the London University, 880.

Apprenticeships, medical, term of, 423. Arachnoid, hemorrhages into the cavity of, 45; false membranes of, 792.

Arsenic, poisoning from, 436; test for, 877. Arteries, state of, in inflammation, 87 (see also Med.-Chirurg. Review); new treatment of wounded, 331.

Artery, radial, wound of, 332; brachial, wound of, venesection of, 331.

Asthma thymicum, 301.

Atrophy, of the brain and spinal marrow, 84 (see Andral); of the valves of the heart, 946.

Auscultation in stone, 135; M. Raciborski on. 584. Austria, liberality of, respecting French de-

grees, 590. Avlesford, North, Union, medical contract for the poor at, 299.

Bailliere, Mr., letter from, 189. Barker, Mr., on gouty concretions, 821. Barry, Sir David, death of, 264.

Buttley, Mr., Sir H. Halford's puff of, 52. terminations; instances of paralysis Beau, M. on the movements of the heart, 827.

> Bedingfield, Mr., on a metropolitan medical union, 837.

> Bell, Sir C., address of, at the Middlesex Hospitul School, 89; on diseases of the spine, 230; letter from Edinburgh respecting, 641; appointment of, at Edinburgh, 170; a word of advice to, 668.

> scarlation; 300; remarkable effects of, in erysipelas, 758, 806.

Benedict, Prof. ssor, a ticles by, 56.

Benson, Dr., case by, of pulsation in the veins of the arm, 176.

Bieske, M., case by, of insanity, from sabre wounds of the head, 828.

Biology of Treviranus, 453.

Birmingham School of Medicine, 63, 840, Bladder, rupture of, 18; from a blow, 19; from a fall, 21; broken catheter extracted from, 532.

Empyema, lecture on, by Dr. Ros, won ; paracentesis thoracis in, 1888. of, 426 : vari-

Encaphalitis, scate, sympt ties, 120 ; treatment, 428 ; chronic, causes and symptoms of, 4:30.

Entomology, 145.

Epilepsy, from injury of the bead, \$(8); modified, case of, 697.

Enterelithus, case of, 965.

Epps, Dr., letter from, 319; on monopolies in medical education, 515.

Epulis, clinical lecture on, by Sir B. Brodie,

Erinensis on the conduct of the Royal Dublin Society, and the proceedings of Ministers,

Erysipelas, nitrate of silver in, 322; complicated, fatal case of, 322; lecture by Mr. head, case of, remarkable effects of the extract of belladonna in, 758, 806.

Erraia, 16, 128, 160, 224, 271, 320, 341, 472,

647, 728, 759, 808, 888.

 Erythema, characters of, 324. Evett, Mr., note from, 759.

Exfoliation of bone, reproduction after, 046, Extra-uterine fectation, discussion on a case of, 217; Dr. Ramsbotham's letter on, 266. Extravasation of urine, from external injuries,

19; in children, 20; local differences between, into cellular and serous tissues, 22.

facial nerve, section of, by disease, 45. Faraday, Mr., on the silicification of plants, 756.

Farnham, inquest at, 257, 263, 345, 351. Farr, Mr., lectures by, on hygiene, 240, 773. Features, artificial, 538.

. Feces and urine, non-secretion of, during many years, 702.

Fergusson, Dr., on medical aid for the sick Gouty concretions, case of, 821. poor, 747.

Ferral, Mr., note respecting, 919.

Fever, nature and causes of, 131; convalescence from, followed by death, 268; treatment of, Dr. Bright on, 596.

Fieschi, head of, 936.

Fingers, contraction of, 623.

Flame, nature and qualities of, S60.

Fleishmann, Dr., on belladonna as a preservative against scarlatina, 300.

Flogging, death from, 875.

Food of plants and animals, changes of, 103. Fosbroke, Dr., on diseases of the heart, 438, 629.

Fox, Mr., on the election of parochial medical officers, 941.

Fractures, bad effects of splints and tight Guislain, M., on gangrene of the lungs in the bandages in, 168, 245, 288; treatment of, without splints, 461; Mr. Wardrop on, Gun diseases, synopsis of without splints, 710; Dr. Wallace on, 627; Guthrie, Mr. op-ration on, 498; of the tibia, cured without splints, 242, of the finis and to the state of 920; operation of abuls, and of the femur, similarly treated,

blueding is come of, 250% Bear of the propole, 170; of the te Abula, with paralysis, 335; treatment of 384, 423 . death after, 384 . simple, of the ileg, followed by gangiene, 61 h ; of the jaw cases of, 741; of the perells, new mode of treating, 785; of the olecration, 807; at the thigh, BOT.

Free Hospital, Greville-street, proceedings at, 840, 944, 981.

Fungus medullaris, of the pelvis, 695, maligi nant, of the penis and groin, 694. Furlonge, Dr., case by, of modified epilepsy.

G

Liston on, 324; puncture in, 327; of the Gaugrene, senile, case of, 371; of the lungs in the insane, 793.

Gastritis, chronic, case of, 488.

Gustrodynia, creosote in, 124 275.

Gazette Medicale, January 1830, 772.

Guardians, boards of, contracts of, 309, 803. Generation of living and dead matter, 105.

Genital organs, effects of hypertrophy of the cerebellum on the, 765.

Geohegan, Dr., on poisoning by hydrocyanic acid. 175.

Gerron, Dr., on traumatic entaract, 4.3.

Gibson, Mr., case by, of spasmodic colic. 565.

Girten, Mr., on aucient and modern black nations, 40.

Glunders treated with creosote, 594.

Glottis, scalded, cases of, 9,13,

Goitre, lymphatic, ligature of thyroid arteries in, 252.

Gonorrhea, cases of, with condyloniata, 125, 157, 598; in the female, 435; crocsote in, 435; nitrate of silver in, 499,

Gonorrheal rheumatism, Mr. Samuel on,

Gowing, Mr., case by, of strangulated inguinal hernia, 699.

Goyraud, Dr., on inguino-intestinal hernia, 450.

Granger, Mr., present to, from his pupils,

Green, Mr., on the use of setons in hydrocele, 354; lecture by, on fatal simple fracture of the leg, 615.

Green, Dr. P. II., cases and remarks by. (See Hopital des Enfans.)

Gregory, Dr., report by, on small-pox and vaccination, 831.

Gregory's Conspectus, by Dr. Venables, 209, Grimstone, Mr., puff of, 52.

Grisolte, M., on colic from lead, 52,

insane, 793.

H

Hache, M., on pericardicis, 796 Habaemanuism in London, 755, 787, 840; doctrians of, 934.

Halford's, Ser H., puff by, of Mr. Battley. 195.

Hamilton, Dr., the late, 381.

Hancock, Dr., note from, 801.

Hawkens, Mr., on the skull of Dean Swift, 503.

Hemorrhage, into the arachnoid, 45; traumatic, researches in, 450; of the ceruballum, 601; cerebral, peculiar varieties of, M. Andral on, 729 : from the mouth, several case, 863; ligatures in, 934.

Hemorrhoid in the rectum, 295.

Head, pain in, treated with carbonate of iron and hydriodate of potash, 274; injury of, Hunturian Theatre of Anatomy, 7. 518.

Heart, case of disease of, 222; disease of, following rheumstism, 235; disease of, elucidating difficulties of disgnosis, 458; sounds and motions of, 501; Dr. Fosbrokev Hydrocele, 95; treated with seton, 334. on diagnosis of diseases of, 620; movements + Hydrocephalus, acute, of Abercrombie, S7. of, 827; Mr. Bryan on the sounds of Bob ; Hydrocyanic acid, poisoning by, 174. strophy of the valves of, 946.

Hecker's Annalou, articles in, 58; Vel. 2, Nos. 5 and 4, Vol. 3, No. 1, 867.

Heidelberg, hospital statistics at, 981.

Heifer, the, early breeding in, 876. Hemiplegia, M. Andral on, 401, 557. Hemming on uterine diseases, 144.

Hentsch and Tweedie, Messes., proceedings against, 840, 944; letters from, 981.

Hermaphrodism, an instance of, 375; in an orang-outang, 963.

Hernia, inguinal strangulated, 15, 75, 90, 155, 669; strangulated, cured with the air-pump, Tkin, Mr., case by, of amaurosis, 569. 58; ligature in umbilical, 57; strangulated Hium, disease of the bores of, 517, femoral, 153; memoir on inguino-intestinal,

Hip-joint, diseases of, lectures on, 482, 528. Hirsch, Dr., on thymic asthma, 201.

Hippocrates, life and doctrines of, 773

Hodgson, Mr., case by, of phlegmasia dolens,

Home, Sir E., one of the caustic bougie cases of, 770.

Hooper, Mr., note from, 349.

Horse, loss of the tongue in, 626.

Hopital des Enfans Malades, Paris, cases at, and remarks on, by Dr. Green:-Croup, 29; Insune, abolition of irons in the treatment of trachectomy in croup, 29; autopsy in croup, 31; lavyngo-tracheitis mistaken for, 54 N meningitis of the convexity of the brain, Instinct of animals, 107, 56; of the base of the brain, 37; tubercular meningitis in a child after measles, 492; bercular meningitis in a child after plathisis, 573; tubercular threaded by small-pox, 780;

arocephalis, 7815 typhus fever in the

e-pericarditis, 939; labeler passimonic with levingsth and demodsitis, 940. Hospital irresponsibility, 139; functionaries,

attendence of, 668; Semaritan Society.

Haspitals and Behools of Medicine, in London, but of open to students in the session 1855-36, 1.

Housenan and Dechambre, MM., on the disenes of old persons, 705.

louse of Commons, discussion on the Medired Witnesses Bill in, 905; remarks on discussion at, 913.

House-surgeon, election of one, by concours, 909.

Alusaland's Journal, 500; elizir for catarrh, 264.

Humerus, dialocation of, on the dorsum scapulm, 758.

Hydriodate of potash, in pain of the head, 274; in lupiform syphilis, 628; in syphilis, 743; in malignant, fungous, and cancerous diseases, 894.

Hadrophobia, case frequently simulating, 25: remarks on the article of Mr. Youatt on, by Mr. Varence, 26.

Hygiene, lecture on, 240; history of, 775. of Hygieniats of old, 241.

Hypertrophy of the cerebrum and cerebellum, 761 (see Andral, M.; Dr. Carswell on, 967.

1

Illusion of the mind, in delirium tremens, 227.

Infants, remittent fever of, 99, 293; diminution of mortality of, 691; scalded glottis in, 958.

Inflammation, Mr. Searle on, 26; and morbid vascularity, 311; and fever, Dr. Bow on,

Inglis, Dr., on cases mistaken for croup, 497; on a case of aphonia, 903.

Inquest, verdict at, without evidence, 88; at Farnham, 257, 263; on a fatally flogged soldier. 875.

the, 457; gangrene of the lungs in, 793. Insanity, following wounds of the head, 828.

Instruction, clinical, Mr. Travers on, 276. Intellect, derangement of, from sabre wounds of the head, 828.

INTERCEPTED LETTERS:-

Retreat into the country; thoughts at a distance from the profession; affairs at Windsor; changes in medical practice; country amusements; royal fun; the

markets; Dr. Wendrop on bleeding,

Caution to the aged; aspirants for the collegiate char; the hospital eshools; the guinea trade; Dr. Wardrop's books nice discrimination in V.S., 383.

New source of terror to the medical monopolists; the real Hawkins; Madame V., 471.

The new oration; the elevation of Dr. Paris; the revolutionary University; deputations and their answer; high moral mode of libelling, 572.

Arrival in Muyfair; rural retrospect; book for the library; town prospects; the new terror, 590.

Letter from Roderick; the new terror; Sir Benjamin's speculation; precise state of the Journal of fabrications; recovery of missing property, 721.

The contrast; Lincoln's-inn-fields news; the new University; the Pall Mall East meetings, 801.

Intestine, excision of two feet of, 45; distinction between inferior and superior orifices of, 45; wound of, 94.

Intestinal concretions, case of, 965.

Itch insects, detection of, 251.

lodine in diabetes, 319; in the urine, 970. Inswich, coronership of, 599.

Ireland, medical reform in, 308, 379; ana, Knee-joints, diseases of, 528; diseases of the tomy in, 877; medical coroners in, 878. Iris, physiology of, 109.

Iron, supersulphate and superacetate of, in neuralgia, leucorrhora, and night perspiration, 102.

Jacob, Dr., on comparative anatomy, 211. Jacob, Mr., 213.

Jatropha cureas, purgative qualities of, 916. Jaw, fractures of the, 741; osteo-sarcoma of,

and removal, 887. Jervis-street Hospital, Dublin, cases and remarks at, by Dr. Wallace:-Treatment of fractures of the leg and thigh-bones of children without splints, 627; cure of lupiform syphilis with the hydriodate of potash, 628; contraction of the fingers, after diffuse inflammation of the fore-arm, 628; prolapsus ani, its pathology and treatment, 635; fractures of the jaw, 741; syphilis treated with hydriodate of potasby Lebaudy's Surgical Auatomy, 144, 189. 743; disorganization of tissues of the calf, 743; secondary syphilis, contagion of, Lecturing, the system of, 89. 805; ulcerated surfaces, 805; locked-jaw resulting from injured nerves, 846; cases of tetanus, 846; hydriodate of potash in malignant, fungous, and cancerous diseases, 894; cases of scalded glottis treated with calomel, operation of brouchotomy

gonorrhea and leucorrhea, 499.

Jones, Sir W., on ancient and modern ne groes, 40.

Kelso, Dr., on catalepsy complicated with hysteria, 23; on a case of small-pox complicated with hysteria, 744; on the epide. mic small-pox at Lisburn, 744,

King, Mr., on the University of London and the College of Surgeons, 16, 261; on remuneration at coroners' inquests, 950.

Kingdon, Mr., exclusion of, from the College Council, 186; letter of, to the medical pro- 6 fession, 188; and Mr. Lawrence, 210; College Council note respecting, 267; consolutory address to, 515.

King's College Medical School, 7, 345; letter from a student of, 420; and Charing-Cross Hospital, 647; chair of materia medica at 680; note from Dr. Ritchie respecting 724; exclusion of men of science from, 917, 981.

Kingston, Dr., on atrophy of the valves of the heart, 946.

innerton-street School, 472.

Kluge, Dr., on inflammation of the lungs in infants, 42.

Kirby, Mr., resignation of, 379, 418.

Kirby's Bridgewater Treatise, review of, 105.

Kirby, Dr., on a new mode of treating croup, 178.

ligaments of, and disease simulating them,

Knowlys, Mr. Newman, on a law of coroners' inquests, 943. Kopp's asthma, 301.

Kranefus, Dr., case by, of casarean section,

LANCET, THE, present volume of, 143, 192. 352; "occasional" letters in, 212.

Langstaff, Mr., on cases of discused testicle. 405.

Laryngitis, bronchitis, and lobular pueumonia, 940.

Larynx, ulceration of, 74.

Latham, Dr., case-book of, 51, 213.

Laurie, Sir Peter, vote of, at Christ's Hospital. 184.

Lawrence, Mr. W., fate of, 180.

Lead, acetate of, poisoning by, 93.

Lecture and ticket system, 12, 579.

Lee, Mr., on the continental schools, 147. Lelut, M., on false membranes of the arachnoid, 792; account of Fierchi's bend by,

Leucorrhoa, supersulphate and superscetate of iron in, 10%.

in the same injury, 958.

Lichtenstudi, I'rofessor, on Lichtenstudi, I'rof Ligatures to bleeding vessels, 184. Lindsay, Mr., die by, of obstructed

561 ; eperation by, for a new ands

Liston, Dir., clinical lectures of, 125. (See Maxillary, inferior, semoval of, 221; superation North-London Hospital)—On striction and malar brees, removal of, 917. ture, 735, 767, 816; conduct of pure surgrons in the College Council to, 752. Litchfield, Dr., on the itch insect, 251.

Lithotomy, cases of, 123, 152, 160, 320; at case of, by Mr. Lizars, 708.

Liver, diseases of, Conwell on, 206; disease

of, with abscess, 236. Lizars, anomalous operation of lithotomy by

Lock Hospital, cases of gonorrhea with con-

dyloma et, 125, 157, 598. London University, and North-London Hospital, 5.

London Hospital, 160.

London Medical Society, 150 .- Abdominal tumours, 180; Cassrean operation fourteen months after conception, 181; discussion on, 217; cyst in the thyroid gland, 219 letter from Dr. Remsbotham on report of case of extra-utorine futation, 266; chimney-sweeper's cancer, 312; tuberculated disease of the uterus, 313; consolatory address to Mr. Kingdon, 315; treatment of bronchitis, 337; rangworm, 337; death from Morison's pills, 338; artificial features, 338; treatment and effects of fractures, 384; treatment of fractures, 461; gonorhoal rheumatism, 462.

Lowenhard, Dr., case by, of sciatica, 301. Lungs, inflammation of, in new-born children, 42; apoplexy of, with venous pulsation,

101; and heart, disease of, 197; gangrene of, in the insune, 793.

Lupiform syphilis, hydriodate of potash in,

Lymphatics, dilatation of, 269, Lynn Sel:-supporting Dispensary, 629.

M

Macariney, Dr., on water-dressing, 450. Mackenzie on the Eve, 631. Mackenzie, Captain, inquest on, 920. Macleod, Roderick, fabrications by, 114. Maddock, Mr., on comibal fever, 700. Magistrates, medical, letter respecting, 748. agnetism, mineral, as a remedial agent, \$338, 386; report respecting, 506; trial of, ant the Westminster Eye Hospital, 540; Dr. Schmidt on, 593; notice respecting, \$633; Mr. Davidson's reply to Dr. Schmidt on, 715; Dr. Ritchie on, 724. Manchin**ce**l juice in cancer, 266. Manby, Mr., on medical attendance on the

poor, 710,

Manganese, medicinal preparations of, 568; in spirt zis, 568.

arrous diseases, 112 : death et., lights by an remuneration at Mirritian, and Paris, Meastal \$46.

M'Carthy, Dr., on a case frequently simulating hydrophobia, 25; case by, of obstruc-tion of the bowels, 133; of wounded patella, 204.

Breslau, 56; at Naples, 255; anomalous M'Nab's Compendium of the Ligaments, 586.

Measles following croup, 951.

Medical degree, Mr. Prater's examination for, 184.

Medical Gazette, disavowal of editorship of. 727; horror of being suspected of editing, 759

Medical students of London, attacks on, 754. Medical Reform Essays, S19.

Medicines, nauseous solid, 271

Medicinal plants, localities of, 341.

Medico-Botanical Society, discussions at, on the death of Mr. G. Burnett, 266; Manchineel juice in cancer, 266 : new catechu, 341; cardamom seeds, 341; castor-oil plant, 341; medicinal plants, localities of, 314; Peruvion bark, 633; meetings of, 945.

Medico Chirurgical Society, first meeting of, 266; papers at, on inflammation and morbid vescularity of parts, 311; tumour on the scapula, 312; treatment of wounds received in dissecting, 464; atrophy of the heart's valves, 946.

Aledico Chirurgical Review, opinions in, on the arteries in inflammation, 87, 122,

Medullary sarcoma of the brain, 702.

Meningitis, tubercular, 492; after measles and puthisis, 573.

Menstruction, disordered, 972; from excesses by the husband, 973.

Mercury in the urine, 970

Meteorological Reports, 32, 64, 126, 160, 192, 224, 271, 320, 392, 424, 520, 552, 600, 647, 760, 808.

Metropolitan Medical Union, 837.

Metropolitan University, 388; remarks on, 418; propriety of publishing a draft of the charter of, 418, 639; letters from students on granting degrees at, 420, 516, 517, 578; principles on which it should be established. 408, 586; conferences with the Chancellor of the Exchequer respecting, 507, 589, 655; conduct of London University College respecting the charter of, 546; persons who cannot sit as examiners in, 546; the only mode of obtaining endowments for the. 587; memorial to Ministers from the Blenheim-street School respecting, 628; inoperative legal power of the charter of. while the Apothecaries' Act and the clauses relating to the College of Physicians exist. 637; opinions in Edinburgh respecting, 640, 655; defeat of the predictions of the monopolists respecting, 749; letter from Mr. Warburton to the Town Council of Edinburgh respecting, 834; peritions to House of Commons respecting, 839; chancellor of, 877; election of Sir Charles Clarke at, 888.

Michaelia, M., case of croup by, 253.

Middlesex Hospital, semplaints respecting, 268, 715. Middlesex Hospital School, 85; Sir C. Bell's

opening address at, 89.

Midwifery, instruction in, at Paris, 121. Mollities ossium, 150.

Montesanto, Dr., case by, of paraplegia, 702 Morgan, Mr., conduct of to his pupils, 878.

Morphia, immense doses of, 806. Morison's pills, death from, 338; autopsy in a death from, 385; murders committed

with, 832; antidote for the poison of, 877. Mortality in England, Mr Edmonds on the diminution of, among infants, 691; bills of, of London for one hundred years, 691; in the English counties, 364, 408; remarks on, 380, 420.

Moses, law of health enforced by, 241. Moss, Mr., on urethral discharges in children, 448.

Motor and sentient nerves, Dr. Van Deen on, 868.

Moulton, disinterment at, 381.

Mouth, hemorrhage from, 865.

Muller, Professor, on the arteries of the penis, 573.

Murray's Manual of Chemical Experiments. 756; note respecting, 983. Musician, double vision in a, 877,

Myelite, Andral on, 473.

N

Naturalist's Library,-entomology, 145. Negroes, ancient and modern, 40. Neligan, Mr., on lightures in hemorrhage,

935. Nerves, the motor and sentient, experiments on, 868.

Nervous centres. (See Andral, M.)

northes and leucorrhea, 499.

Nervous induction, Dr. Bow on, 927. Neuralgia, supersulphate and superacetate

of iron in, 102. Nitrate of silver in erysipelas, 330; in go- Paris, Schools of Medicine and Hospitals in,

North-London Hospital, abstract of first annual report of the expenditure at, 726; election at, by concours, 909; cases and 93; lithotomy, 123; gustrodynia cured with creosote, 124; clinical lectures at, 125; caries of the os calcis, 151; creosote in sickness, 151, 984; lithotomy in a child, 152; operation for cataract, 152; concus-Pericarditis, case of, 437; signs sion of the brain, 270; fracture of the neck Pericardium, fatal wound of, 266. tumour, 270; lithotomy, 320; removal of markable effects of the extract of belladonna, 758; dislocation of the humerus on Peruvian Bark, history, oh the dorsum scapulæ, 7.58; aconitum in erysipelas of the head, 806; delirium with

debility, 807; compound and comminuted

fracture of the olecranon, and fracture of

the thigh, 807; removal of an osteo-sar-al

come of the jaw, 882; osteo-sarcors of the jaw, removal of the superior maxillary and malar bones, 917; peoriasis, 918; phagedena of the penis, 919; removal of scir-rlus of the breast, 952; cases of purpura, 984. Nostril, obstruction of the, 500.

Obstetric Society, at Guy's Hospital, 983. Obstruction in the bowels, 561.

Esophagus, imperfect, 571. Old persons, diseases and changes in the

pulse and respiration of, 705. Operation table, 7.56.

Operations, Sir B. Brodie on, 281.

Opium, new principles in, 41; in delirium tre mens, 226.

Orbit, aneurysm of, 860.

Osborne, on dropsies, 304.

Osborne, Mr., on manganese in epistaxis, 568; on tar in the blood, and comments on, 824, 865, 917. Osteo-sarcoma, congenital, 518; of the jaw,

operation for, 133, 917; removal of, 887. Otic ganglion, wax model of, 311.

Ourang-outang, hermaphrodite, 263.

Padieu, M., case by, of imperfect a sophagus. 37 L

Palpitations of the heart, 620.

Paracentes a abdominis, Mr. Bree on Mr. Worthington's case of, 40; thoracis, Dr. Roe on, 286.

Paralysis, from want of stimulus, 333 (see also Andral, M.), 401.

Paramorphine, 41.

Paraplegia, with non-secretion of urine and feces during many years, 702; from accumulations in the colon, 916,

117.

Patella, incised wound of, 204; fractures of, new mode of treating, 78%.

Pathological anatomy, importance of, 129, remarks at :- poisoning by acetate of lead Pelletier, on paramorphine and pseudomorphine, 11.

Pelvis, tumour of, 695

Penis, arteries of, 575; plugedena of, 918; and groin, malignant fungus of, 894.

Pericarditis, case of, 437; signs of, 796.

of the scapula, 270; removal of a scirrhous Perincum, abscess in, following hemorrhoids, 295; abscess in, 431; fistula in, 433. calculi from the urethra, 597; the taxis in Peritonitis, sudden subsidence of pain in, 29,

hernia, 597; erysipelus of the head, rest Perspirations, night, supersystate of iron in. 102.

> rieties of, 633. Phagedens of the penil. It Phelan, Mr., on medical

ia dolens, soute, 7.3

Philosophers, pura Phrenological skulls from the skull of Dean S. Phrenology, tests fo Phthisis, duration of, 170; proportionate causes of, 614.

Pinel, M., on the release of the insane from the Bicetre in 1792, 451.

Placenta, terminations of the uterine vessels in connection with, 267.

Pleuro-pneumonia with pericarditis, 939. Plumbe, Mr., offer of for the surgeoncy of Christ's Hospital, 142, 185; case of obstructed nostril by, 500.

Pro-umonia and emphysems, singular case of,

Poisoning, by acetate of lead, 93; by hydrocyanic acid, 174; effects of varieties of doses of, 175; treatment in, 175; morbid appearances in fatal cases of, 176; from arsenic, 436.

Polypi of the uterus, extirpation of, 971. Poor Provident Institutions amongst, 50.

Pour-Law Commissioners and medical contractors, letters and remarks on: extract from report of, relating to medical relief, 49; questions addressed by, to practitioners, 188; conduct of, 577; medical contracts of, in the North Aylesford Union, 209; Mr. Ceely on the proceedings of, 387; plans of medical gentlemen respecting, 461; meeting at Tunbridge Wells respecting, 467; hummits of medical contractors, 509; salaries of, 510; provincial meeting respecting, 548; scale of medical renuncration, by "Ruricela," 652; Mr. Waits and the Wheatenburst Union, 709; measures for pricuring a reform in the present system, 716; letter from Dr. Tweedale respecting, 940; appointment by, at Broughton, 941.

Prater, Mr., examination of for a medical degree, 784.

Pregnancy, apoplexy during, 882.

Prejudice versus Science, 917, 981.

Preston Dispensary, charges against the surgeon of, 297.

Prolapsus uni, case of, 654. Pseudo-morphine, 41.

Paoriasis, case of, 918.

l'ublic health, cultivation of, 241.

Pulse, variations in, in the two arms of the same person, 195; phenomena in, 697; respiration, and animal heat, relations between, 795.

Pulsation in veins, 176; of the heart, in disease of the thoracic viscera, 198.

Purgative seeds, new, 916. Parnura, casha or, 984.

umitted with reitisars, 880. s of over the minde of notice

dical coroners the operation of treatment of disease of the spine by, 232; increased intelligence of the people respecting them, 977; House of Commons not proof against them, 97B.

Quain, Mr. R., introductory address of, 315. Quain's acatomical plates, 881. Quarterly Review, British and Foreign, 643.

Raciboraki's Manual of Auscultation, 583. Radias, dislocation of, 518.

Radley, Mr., on the treatment of fractures of the bones without splints or tight bandages. 168, 245, 283,

Ramolissement of the nervous centres. (See Andral, M.)

Ramsbotham, Dr., on a case of extra-uterine futation, and the terminations of uterine vessels in connection with the placenta, 206.

Rankin, Mr., cases by, of doubtful sex, cancer of the rectum, and early breeding in the heifer, 375.

Ranula, Mr. Walker on, 853.

Ray, Mr., on aneurysms of the thoracic aorta,

Rayer's Treatise on the Skin, and Atlas. 205.

Rectum, cancer of, successfully removed. 376; deficiency of, 374; dispensary for diseases of, 549; structure of, Dr. Wallace on, cióci,

Reas, on the blood and urine, 969. Remittent fever in infants, 99. Reporting for the journals, 112.

Respiratory apparatus in old persons, 97,

Respiration in various animals, chemical table of, 456; proportional force of, 457.

Reviews and notices of books :- Grisolle on Colic from Lend, 52; Waite on the Gums. 54: Walther's System of Surgery, vol. 1, 103; Kirby's Bridgewater Treatise, 105; Walker's Principles of Ophthalmic Surgery, 109; Aldie's Introduction to Hospital Practice, 110; Mart on Nervous Diseases. 112; Cock's Anatomy of the Nerves and Vessels of the Head, 113; Lebaudy's Plates of Surgical Anatomy, 144; Wardrop on Blood-letting, 144; Hemming's Trans-lation of Boivin and Dug-s on Uterine Diseases, 145; Spillan's Translation of Andral's Clinque Medicale, 147; Lee on the Continental Schools, 147; Rayer on the Skin, with Atlas, 204; Conwell's Trentise on the Liver, 206; Venables' Gregory's Conspectus, 209; Osborne on Dropsies, 304; Treviranus on Organic Life, 4.3; Raciborski's Manual of Auscultation, 582; Todd's Cyclopædia of Anatomy, 585; M'Nab's Compendium of the Ligaments, 586; Marray's Munual of Chemi-

cal Experiments, 736; Hecker's Annales, Mierwin, Dr., on fractures, 495.
867.
Sickness, lews of, according to age, 835 Rheumatism, inflammatory, 196; Conorrhoral,

462; copulbal, 625, 700, 746.

Richmond Hospital, Dublin, late elections at letters and remarks on, 547, 575, 668, 680, 712, 835; Mr. Carmichael on, 714. . Ringworm, treatment of, S37; at Christ's

Hospital, 141.

996

Ritchie, Dr., note from, 724; on medical Skin Infirmary, Dublin, lectures at. (S magnetism, 724.

Robins, Mr., letter from, 83.

Roe, Dr., ou empyema. 283.

Rogers, Mr., letters from, on an inquest at Farnham, 259, 391.

Rogerson, Mr., on medical coroners, 913.

Ro ts, Dr., clinical lectures by, on delirium tremens, 161, 225; on a case of chronic gastritis, 488; on vomiting and hysteria, 161 : on anasarca with discuse of the heart and liver, 685.

Rowland, Dr., case by, of pulmonary apoplexy, 101.

Royal Institution, Dr. Faraday on the silicificution of plants, 757.

Runsey, Mr., letters from, on the poor-law medical contracts, 87, 185, 187, 747.

" Ruricola," letter of, in the Times, 214; on medical attendance on the poor, 540; on Mr. Yeatman's letter on parochial medical contracts, 662.

Rust's Magazine, articles from, 56.

Safety-lamps and fire-damp, 77.

duct, 131.

Salopian infirmary, election of a surgeon at,

Scalded glottis, cases of, 958 Scapula, fracture of the neck of, 270; tumour

of, 312; removal of tumour of, 951.

Scarlatina prevented by belladonna, 303: remarks on, by Professor Licutenstadt, 867. Scirrhus of the womb, 197; of the breast,

Schmidt, Dr., note from, on medical magnetism, 424; on the doctrines of Hahnemann, 932.

Sciatica cured by opening the sciatic nerve, 301.

Sarcoma, medullary, in a chi d, 405.

Sclerotitis, remarks on, 92.

Schultz, Professor, on the blood of the vena porta, 935.

Searle, Mr., on inflummation and irritation, 26; on inflummatory fever, 131. Seton, employment of, in hydrocele, 334.

Seymour, Dr., clinical lectures by, on disease of the heart, following rheumatism, 235; disease of the liver with abscess, 236; continued fever, with ulceration of the small intestines, 236 : parelysis, 258 ; treatment of palsy, 240.

Sigmond, Dr., on the Pererian bark, 633. Silicification of p'ante, 756. Singuisms to the mamme in amenorrho

904.

Skey, Mr., introductory lecture by, on a gery, 65.

Skin, Rayer's Treatise on, 204.

Jerris-street, Hospital.)

Skin Infirmary, London, 757.

Small-pox, modified, twenty years after va cination, 375; complicated with hysteri 744; epidemic, at Lisburn, 744; and va cination, report on, 831.

Smith, Mr. P., on cholera, 341.

Smith, Mr. T., rejection of, at the Hall, 636 demand of, for a public examination, 637 his indentures, note respecting, 743; no from, 801,

Soldier, death of one, from flogging, 875. Sopwith, Mr., on the Tonbridge-wells con tract, 57R.

Spartan laws, effect of, on infants, 244.

Sphacelus of the interine, 155. Spillou's Trans'ation of Andral's Clinique

147. Spilsbury, Mr., on the munction of lard in

pulmonary consumption, 446, Spicen, physiology of, 930.

Spinal marrow, congestion of, 403.

Spine, diseases of, \$30.

Splints and bandages, bad effect of, in fractures. (See Fractures.) Spong, Mr., case by, of ruptured tendon

20:1. Salivary concretion, 39; in the submaxillary | Stanley, Mr., introductory lecture of, 94.

Statistics, English hospital, deficiencies of, 55; of " La Charite," Borlin, 971; of the hospital at Heidelberg, 981.

Samuel, Mr., on gonorrheal rheumatism, 746. St. Bartholomew's Hospital, Mr. Stanley's introductory address at, 91; cases at: --Wound of intestines from external injury. 91; aneurysm of the subclavian, 95; aicputation below the knee, 95; hydrocele, 95; sente bronchitis, 96; excision of the lower jaw, 152; strangulated femoral / ernia, 153; convalescence from fever followed by death, 268; fibro-albuminous tumour of the back, 270; removal of a tumour from the scapu æ, 351.

St. Clement Dunes, election of a surgeon in, 143; letter from Mr. Dunn respecting, 214.

St. George's Hospital, display of professional respectability in the board-room of . 599; election of a chaplain at 642; discussion at, on the rew laws, 788; cases at :-inguinal hernia, 91; scleratitis, 92; disease of the antrum, 153; f. tal case of inquinal hernis, 155; disease of the bone 517; dislocation of the genital osteo-sarcometric injury of the band, 519 154; Sir B. Brodie's advice to the

of, 15%

Stricture of the colon, 466; of the urethra, lectures on, 735, 767, 816. Struma of the ribs, 193.

Students, advice to, 46. Students' Association, meeting to form, 658. Strychnine in nervous diseases, 112.

Subjects, distribution of, 319.

Sugar in the blood of a diabetic patient, 254. Sulphur-baths in chores, 938.

Surgeons, resident, in hospitals, 186. Syphilis, literature of, 59; hydriodate of potassa in, 743; secondary, contagion of, 805; contamination, disposition, and action, of, 825; questions respecting, 934.

Tagert, Mr., case by, of gangrene, S71; of coxalgia, 533.

Tar in the blood. (See Osborne, Mr.) Tarral, Mr., on auscultation in stone, 135.

Tatham, Mr., case by, of chylous blood, 373. Taxis in bernia, 597.

Taylor, Mr. Wm., case by, of ulceration of the larynx, 74.

Tendon of the rectus femoris, rupture of, 203. Test for arsenic, 877.

Testis, venereal disease of, 255; malignant diseases of, 105.

Tetanus, lecture on, by Dr. Wallace, 846.

Thigh, shortening of, 14. Thomas, Mr., on unctuous boluses in cholera,

Thyroid, gland, cyst in, 215; arteries, liga-

ture of, m goitre, 752. Tibia and tibula, fracture of, with paralysis,333. Tiedemann, Professor, visit of, to London,

192; portrait of, 392. Tissues of the call, disorganization of, 743. Todd's Cyclopadia of Anatomy, 585.

Tongue, loss of, in a horse, 676.

Tracheotomy in croup, 50.

Traumatic cataract, spontaneous cure of, 43. Travers, Mr., clinical lectures by, on an injury of the head from a fall, 199; abscess in the perincom, 431; fistula in the perineum, 435; extravasation of urine, 454; remark by, on Clinical Instruction, 276.

Treviranus on organic life, 453.

Tumour, congenital, 148; of the cheek, removal of, 189; abro-albuminous, removal. of, 270; scirrhous, removal of by Mr. Cooper, 270; in the pelvis, 695; of the sca, ula, removal of, 951,

Tunbridge Wells, meeting at, respecting poorlaw medical contracts, 407; poor-law con-Ma letter from Mr. Way on the

Edinburkh, 511. The Stier from on the Lynn appriling Dispensary, 629, on the seat of the sick poor, 940.

Stoltz's, Professor, Guanness appression by Addis Trusadie, Mr., and the Free Hospital, 840,981.

Stoffield, wounds at lines of, 45.

17; steatrized these of, 45.

Stone, auscultation is cases of, 135. the hip and knee joints, and discusses simulating the latter effections, 482, 582, 609. Typhus fever in children, cases of, 859, 901.

Ulcers, treatment of, 741, 805. University of London and College of Surgeons, 16; meeting at, 310; its foundation, objects, and principles, 343; proceedings at, 381

Upton, Mr., on safety-lamps, 77.

Urea, in diabetic urine, 970.

Urethra, removal of calculi from, 597. Urethral discharges in children, 448.

Urethotomy, performance of, 179. Urine, extravasation of, 434; retention of,

lecture ou, 816; mercury in retention of, 970; iodine in, 970; ursa in, 970; decoloration of, from beet-root, 970.

L'terus, and appendages, diseases of, Hemming on, 144; relaxation of, 172; tuberculated, disease of, 313; cancer of, 567; complete absence of, 570; loss of, and appendages, 644; polypi of, 971.

Vaccination, repetition of, in the Wurtem. burgian army, 86; and small-pox, report of Dr. Gregory on, 831.

Vaginal cystocele, curious case of, 975. Valvula conniventes nearly to the cacum, 45.

Van Deen, Dr., on the motor and sentient nerves, 868.

Vacetine, Mr., remarks by, on Mr. Youatt's article on bydrophobia, 26.

Vegetable diet, adoption of, 193. Veins, pulsation in, with autopey, 176, Veitch, Dr., new operation table by, 756. Vena portæ, analysis of the blood of, 935,

Venesection, abuse of, M. Andral on, 783. Vision, double, singular cases of, 877, 934.

Vomiting and hysteria, Dr. Roots on, 661; relieved by creosote, 151, 447, 694, 984.

W.

Waite on the gums, 54.

Wallace, Dr., lectures and remarks by. (See Jervis-street Hospital.)

Walker, Dr., case by, of vomiting treated with creosote, 447; remarks on the case by. 593,

Walker's Ophthalmic Surgery, review of, 109.

Walker, Mr., on ranula, 853. (See also St. George's and Lock Hospitals.) Walther's System of Surgery, review of, 103.

Wansbrough, Mr., case by, of small-pos, 375, Wardrop, Dr., on bland-lesting, 144, 348, 383. Warren, Dr. Pelham, biography of, 550.

Water dressing, Dr. Macartney on, 450. Watkins and Hill, note from, 423, 599. Watson, Mr., of Apothecaries' Hall, complaint

against, 422. Watts, Mr., and the Wheatenburst Union, 709: note from, 838.

Way, Mr., note from, 169; on the Tunbridge Wells contract, 630.

Webh-street School, 4; present to Mr. Grain-ger from the pupils of, 883.

Westminster Dispensary School, 7, 10.

Westminster Medical Society-Papers for new session, 148; discussions at:-remarkable tumour in a child, 149; case for the opinion of the Society, 150; urethotomy and cystotomy, 179; death of Sir a dagger entering the pericardium, 266; from drowning, 698. address of Mr. Quain, 315; antimony in Womb, scirrbus of, 197. pneumonia, 310; remarkable disease of the brain, 317; mineral magnetism, 338; autopsy in a death from Morison's pills, 385; Wright, Mr., on the effects of eating brown topsy in a death from Morison's pills, 385; bread, 824. medical magnetism, 386; eczema, siugular case of, 463, 506; stricture of the colon, 463; death of Mr. Mart, 506; report respecting medical magnetism, 506; Dr. Ritchie on medical magnetism, 724; para-lysis of deglutition and articulation, 787; Habnemannism, 787; apoplexy occurring during pregnancy, 882; use of antimonial medicines, 882.

Westmineter Hospital, election of an appethe-cary ut, 16; removal of a malignant tumour of the cheek at, 189; remerks by Mr. Edwards on the operation, 22 ...

Worner, peculiarities of, 145.

Williams, Dr., remarks by Mr. Bryan respecting, 866.

Witnesses Bill, Medical, remarks on, 838, 913; discussion in the House of Commons on, 905; petition in favour of, 943, 946:0 Mr. King on, 950.

Wittenkop, Dr., cases of Casarean section by, 572.

Wheatenburst Union and Mr. Watts, 709. Whipple, Mr., letter from, 123.

Wolff. Dr., case by, of fungous medullaris, 695; case by, of hemorrhage from the mouth, 863.

David Barry, 264; death from the point of Wooley, Mr., remarks by, on resuscitation

" Wright's Pearl Ointment," 319.

bread, 894.

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Yeatman, Mr., plan of, for regulating medical attendance on the poor, 507, 870; remarks on the plan of, by "Ruricola," 662. Yelloly, Dr., on inflammation, 311.